

## **Tennessee**

PDMP acronym: CSMD Region: South

Agency Responsible: Tennessee Department of Health, Tennessee Board of Pharmacy

Agency Type: Pharmacy Board

PDMP Web Resources/Links

PDMP Website: https://www.tn.gov/health/health-program-areas/health-professional-boards/csmd-

board.html

PDMP Email: csmd.admin@tn.gov

PDMP Register Website: https://www.tncsmd.com/

**User Account Manual:** 

PDMP Query Website: https://www.tncsmd.com/
PDMP Data Upload Website: https://www.tnrxreport.com/

Data Upload Manual: https://www.tn.gov/content/dam/tn/health/healthprofboards/csmd/TNDataCollectionManua

ITN.pdf

Statute/Regulation Website: https://www.tn.gov/health/health-program-areas/health-professional-boards/csmd-

board/csmd-board/csmd-regulations.html

Opioid Guidelines Website: https://www.tn.gov/content/dam/tn/health/healthprofboards/pain-management-

clinic/ChronicPainGuidelines.pdf

PDMP FAQs: https://www.tn.gov/health/health-program-areas/health-professional-boards/csmd-

board/csmd-board/faq.html

Integration Guidance: https://www.tn.gov/health/health-program-areas/health-professional-boards/csmd-

board/csmd-board/ehr-integration.html

PDMP Statistics Website: https://www.tn.gov/health/health-program-areas/health-professional-boards/csmd-

board/csmd-board/reports.html

Opioid Dashboard Website: https://www.tn.gov/health/health-program-areas/pdo/pdo/data-dashboard.html

**Training Website:** 

#### **PDMP Contact Information**

Contact Name: Phillips, Pete D.Ph. - Director, CSMD

Address: 665 Mainstream Drive
City State Zip: Nashville TN 37243

Telephone: 6152531305

Fax:

Email: peter.j.phillips@tn.gov

### State Population and Number of Registrants

**DEA Prescriber total:** State population: 7,134,327 41,466 DEA Dispenser total: 1,642

Data Transmitter(s)

**Dispensing Practitioner** 

Pharmacy (In-State)

Pharmacy (Mail Order Out of State)

**Dispensing Veterinarians** 

Pharmacy (Mail Order In-State)

**Substances Monitored** 

Schedules II - V **Drugs of Concern** 

Alternate Data Sources

Overdoses - Fatal Overdoses - Non-fatal

Patient Lock-in information Pharmaceutical Manufacturers/Distributors

**Available Reports** 

**Clinical Alerts Annual PDMP Reports** 

**Customized Reports by User Type Data Dashboards** Dispenser Reports to Law Enforcement **Drug Trend Reports** Licensee Reports to Licensing Board **MME Calculations** 

Multiple Provider Episode Reports Patient Query Lists to Dispensers

Patient Query Lists to Law Enforcement Patient Query Lists to Licensing Boards

**Patient Query Lists to Prescribers Patient Reports to Dispensers** Patient Reports to Law Enforcement Patient Reports to Licensing Boards **Patient Reports to Prescribers** Patient Reports with Summary Data

**PDMP Evaluation Reports Peer Comparison Reports** 

**Prescriber Reports to Law Enforcement Prescription Drug Combinations** 

Registrant Query Lists to Law Enforcement Registrant Query Lists to Licensing Boards

**Registrant Reports to Prescribers Statewide Statistics** 

# Statistical Capabilities

<ul> <li>✓ # of Solicited Dispenser Reports</li> <li>✓ # of Solicited Dispenser Reports by Requestor Type</li> <li>✓ # of Unique Recipients by Recipient Type (unsol. report</li> <li>✓ # of Unique Recipients by Recipient Type (unsol. report</li> <li>✓ # of Unique Recipients by Recipient Type (unsol. report</li> <li>✓ * Out-of-State Patients: &lt;5%</li> <li>✓ * Out-of-State Prescribers:</li> <li>✓ * Data Analysis Resources Available:</li> <li>Fpidemiologist</li> </ul>	<ul> <li># of Prescription Filled</li> <li>✓ # of Prescriptions Filled by CS Schedule</li> <li>✓ # of Prescriptions Filled by Drug Class</li> <li>✓ Statistics Filtered by Age or Age Range</li> <li>□ Statistics Filtered by Ethnicity or Race</li> </ul>	<ul> <li>         ✓ # of Dosage Units Dispensed     </li> <li>         ✓ # of Dosage Units Dispensed by CS Schedule     </li> <li>         ✓ # of Dosage Units Dispensed by Drug Class     </li> <li>         ✓ Statistics Filtered by Gender Identification     </li> <li>         ✓ Statistics Filtered by Geographic Location     </li> </ul>
# of Data Errors Corrected  # of At-Risk Patients by Risk Factor  Risk Factor Statistics by Time Frame  # of Solicited Prescriber Reports  # of Unsolicited Prescriber Reports  # of Unsolicited Dispenser Reports  # of Solicited Dispenser Reports  # of Unsolicited Statistical Reports by Recipient Type  # of Unique Requestors by Recipient Type (unsolicited Dispenser Reports)  # of Unique Recipients by Recipient Type (unsolicited Dispenser Reports)  # of Unique Recipients by Recipient Type (unsol		# of Dispensers Enrolled in PDMP by License Type # of Prescribers Enrolled in PDMP by Specialty
<ul> <li>✓ # of Solicited Prescriber Reports by Requestor Type</li> <li>☐ # of Unsolicited Prescriber Reports</li> <li>☐ # of Unsolicited Prescriber Reports</li> <li>☐ # of Unique Requestors for Solicited Reports</li> <li>☐ # of Unique Requestors by Requestor Type</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors for Unsolicited Reports</li> <li>☐ # of Unique Requestors by Recipient Type (unsol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (unsol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (unsol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (unsol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (unsol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (unsol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (unsol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Requestor Type (sol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (sol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (sol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (sol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (sol. reports)</li> <li>☐ # of Unique Requestors by Recipient Type (sol. reports)</li> <li>☐ # of Unique Requestors by Recipient</li></ul>	# of Data Errors Corrected # of At-Risk Patients by Risk Factor	# of In-State Queries by Requestor Type # of Interstate Queries # of Interstate Queries by Requestor Type
# of Unsolicited Patient Reports by Recipient Type	# of Solicited Prescriber Reports by Requestor Type # of Unsolicited Prescriber Reports # of Unsolicited Prescriber Reports by Recipient Type # of Solicited Dispenser Reports # of Solicited Dispenser Reports by Requestor Type # of Unsolicited Dispenser Reports # of Unsolicited Dispenser Reports # of Unsolicited Dispenser Reports by Recipient Type # of Solicited Patient Reports # of Solicited Patient Reports by Requestor Type # of Unsolicited Patient Reports # of Unsolicited Patient Reports	<ul> <li># of Unsolicited Statistical Reports by Recipient Type</li> <li># of Unique Requestors for Solicited Reports</li> <li>✔ # of Unique Requestors by Requestor Type (sol. reports)</li> <li># of Unique Requestors for Unsolicited Reports</li> <li># of Unique Recipients by Recipient Type (unsol. reports)</li> <li>% Out-of-State Patients: &lt;5%</li> <li>% Out-of-State Prescribers:</li> <li>Data Analysis Resources Available:</li> </ul>

#### **Authorized PDMP Users**

Dispenser Delegates - Licensed/Solicited In-State Dispenser Delegates - Licensed/Solicited Out-of-State Dispenser Delegates - Licensed/Unsolicited In-State Dispenser Delegates - Unlicensed/Solicited In-State Dispenser Delegates - Unlicensed/Solicited Out-of-State Dispensers - Pharmacists/Solicited In-State Dispensers - Pharmacists/Solicited Out-of-State Drug Courts/Solicited In-State Law Enforcement - Federal/Solicited In-State Law Enforcement - Local/Solicited In-State Law Enforcement - State/Solicited In-State Medicaid Drug Utilization and Review/Solicited In-State Medicaid Fraud and Abuse/Solicited In-State Medical Examiners and Coroners/Solicited In-State Medical Residents/Solicited In-State Medical Residents/Solicited Out-of-State Nurse Practitioners/Solicited In-State Nurse Practitioners/Solicited Out-of-State Nurse Practitioners/Unsolicited In-State Patients/Solicited In-State Peer Review Committees/Solicited In-State Physician Assistants/Solicited In-State Physician Assistants/Solicited Out-of-State Physician Assistants/Unsolicited In-State Prescriber Delegates - Licensed/Solicited In-State Prescriber Delegates - Licensed/Solicited Out-of-State Prescriber Delegates - Licensed/Unsolicited In-State Prescriber Delegates - Unlicensed/Solicited In-State Prescriber Delegates - Unlicensed/Solicited Out-of-State Prescriber Delegates - Unlicensed/Unsolicited In-State Prescribers/Solicited In-State Prescribers/Solicited Out-of-State Prescribers/Unsolicited In-State Prosecutors/Solicited In-State Regulatory and Licensing Boards/Solicited In-State Regulatory and Licensing Boards/Solicited Out-of-State

Regulatory and Licensing Boards/Unsolicited In-State

State Health Departments/Solicited In-State

Researchers/Solicited In-State

## **Engaged PDMP Users**

Dispenser Delegates - Licensed/Solicited In-State Dispenser Delegates - Licensed/Solicited Out-of-State Dispenser Delegates - Licensed/Unsolicited In-State Dispensers - Pharmacists/Solicited In-State Dispensers - Pharmacists/Solicited Out-of-State Drug Courts/Solicited In-State Law Enforcement - Federal/Solicited In-State Law Enforcement - Local/Solicited In-State Law Enforcement - State/Solicited In-State Medicaid Drug Utilization and Review/Solicited In-State Medicaid Fraud and Abuse/Solicited In-State Medical Examiners and Coroners/Solicited In-State Medical Residents/Solicited In-State Medical Residents/Solicited Out-of-State Nurse Practitioners/Solicited In-State Nurse Practitioners/Solicited Out-of-State Nurse Practitioners/Unsolicited In-State Patients/Solicited In-State Peer Review Committees/Solicited In-State Physician Assistants/Solicited In-State Physician Assistants/Solicited Out-of-State Physician Assistants/Unsolicited In-State Prescriber Delegates - Licensed/Solicited In-State Prescriber Delegates - Licensed/Solicited Out-of-State Prescriber Delegates - Licensed/Unsolicited In-State Prescriber Delegates - Unlicensed/Solicited In-State Prescriber Delegates - Unlicensed/Solicited Out-of-State

Prescriber Delegates - Unlicensed/Unsolicited In-State

Regulatory and Licensing Boards/Solicited In-State

State Health Departments/Solicited In-State

Prescribers/Solicited In-State
Prescribers/Solicited Out-of-State
Prescribers/Unsolicited In-State

Researchers/Solicited In-State

# Budget

Total Annual Budget:	51,363,020.00	PDMP Staff:	6	
# of Employees - Operational:	6	# of Employees - Other:	0	
# of Employees - Technical:	0			
# of Employees - Analytical:	0			
		Funding Source(s	)	
BJA Grant		Licensing F	ee	
Regulatory Board Fund		State Gene	eral Fund	
		Technologies		
Data Collection Entity:	Vendor		State HIE in place	
Data Collection Vendor name:	Bamboo He	ealth	RxCheck Integration Allowed	
Data Storage Entity:	Vendor	$\checkmark$	VHA VISTA integration	
Data Storage Vendor name:	Bamboo He	ealth	HL7 FHIR connectivity	
Report Generation Entity:	Vendor	AS	SAP Version Utilized: 4.2A	
Report Generation Vendor nam	e: Bamboo He	ealth		
Data Access Method:	Web Portal	/On-Line		
Data Access Entity:	Vendor			
Data Access Vendor name:	Bamboo He	ealth		
		Patient Matching	5	
Refer	ential Matching		$\square$ Exact Matching	
$\Box$ Deter	ministic Matchii	ng	✓ Probablistic Matching	
<b>✓</b> Manu	al Matching		Probablistic and Manual Ma	tching
<b>✓</b> Other	Matching			
		•	to select appropriate patients t	
		ect "None of These" is offer	ed if the patients listed are not	the healthcare
_	s patient.			
Access to patient matching a	_			
Patient Matching Metrics Availar Patient matching data elements				
	lr	ntegration(s) Availa	ble	
Integration Type % Providers	Hub Used	Paid by Fed Gov't Paid by	State Gov't Paid by Facility	Paid by Provider
EHR Integration Unknown	PMPi	raid by red cover and by	state dove i ala sy radine,	raid by riotide.
✓ Data Downloaded/Stored	TIVITI	Data Manipulated for Ar	a altraia	
•		☐ Data Manipulated for Ar	•	
✓ Data Incorporated with Inter	state Data	✓ Multistate Integrations A	Allowed	
Integration Standards:				
Integration Type % Providers	Hub Used	Paid by Fed Gov't Paid by	State Gov't Paid by Facility	Paid by Provider
PDS Integration Unknown	PMPi			
✓ Data Downloaded/Stored		$\square$ Data Manipulated for Ar	nalysis	
✓ Data Incorporated with Inter	state Data	✓ Multistate Integrations	Allowed	
Integration Standards:				

# Interstate Data Sharing Partner(s)

	interstate De
Alabama	PMPi Hub
Arizona	PMPi Hub
Arkansas	PMPi Hub
Colorado	PMPi Hub
Delaware	PMPi Hub
Florida	PMPi Hub
Georgia	PMPi Hub
Illinois	PMPi Hub
Indiana	PMPi Hub
Iowa	PMPi Hub
Kentucky	PMPi Hub
Louisiana	PMPi Hub
Maine	PMPi Hub
Maryland	PMPi Hub
Maryland	RxCheck Hub
Massachusetts	PMPi Hub
Michigan	PMPi Hub
Military Health Service	PMPi Hub
Minnesota	PMPi Hub
Mississippi	PMPi Hub
Missouri	PMPi Hub
Nevada	PMPi Hub
North Carolina	PMPi Hub
North Dakota	PMPi Hub
Ohio	PMPi Hub
Oklahoma	PMPi Hub
Pennsylvania	PMPi Hub
Rhode Island	PMPi Hub
South Carolina	PMPi Hub
South Dakota	PMPi Hub
Texas	PMPi Hub
Virginia	PMPi Hub
West Virginia	PMPi Hub
and the second s	

PMPi Hub

Wisconsin

### **PDMP Policies**

Enabling legislation enacted:	2003	Data collection frequency:	Daily or next busines
PDMP operational:	2006	✓ Requirement for zero-reportir	ıg
User access date (any method):	2007	Frequency of zero-reporting:	Daily
User electronic access date:	2007		
Date received electronic data:	2006		
Interstate sharing start date:	2013		
Law/Statute citation:	TN Code §§53-10-301 to -311	; 53-11-309	
Regulation/Rule citation:	TN Comp Regs 1140-1101 to	0 .04; 1200-34-0107	
Dr Shopper law/statute:	TENN. CODE ANN. §§ 53-11-3	09	
Pill Mill law/statute:			
Pain Clinic law/statute: Unauthorized Use or Disclosure: Enacted 42 CFR Part 2: 42 CFR Part 2 Details:	Enacted Tenn. Code Ann. § 53-10-30 practitioner whose practice is	4(e) Notwithstanding subsection as Part 2 Program shall submit the	e dispensing and
	reporting of dispensing or add subsection (e) until the comm dispensing and administration	ed substances in accordance with ministration by a Part 2 Program in hissioner promulgates rules regulan, and access to that reported infoiality provisions of 42 CFR Part 2.	s not required by this ating the reporting of such
Required Notification to consist Mandated Use of Advisory G     Payment method captured     Ability to id prescriber specia     Patient consent required before Ability for users to set threshold Ability for users to do user-lew Mandatory E-Prescribing (EPFORM) Compliance Process for Enrolew Compliance Process for Quertwork ICD-10 Codes Collected Deceased Patient Field Engaged in Academic Detailing Patient ID Required to be Prescriber Ability to de-id data Authority to release de-id data De-identified data Retention Deceased Patient ID Required To be Prescriber Ability to de-id data Retention Deceased Patient ID Required To data De-identified Data Retain De-Identified Data	Ity ore PDMP data release olds for alert notices d alert notices CS) Iment Mandates y Mandate g esented to Dispenser ta cions: tails:	■ Data Retention Policy Data Retention Time: 1 year m  All Information Purged  Patient Information Purged  Prescriber Information Purge  Dispenser Information Purged  Prug Information Purged  HIPAA Covered Entity  Identifiable Data to State Heal Identifiable Data to local Heal  Certified as CMS Specialized  PDMP Disaster Recovery Plan  Types Reported:	ed d alth Dept alth Dept Registry n
		um of 1 year but can be longer pr	
provis  ✓ Patient Notification of Breach		g to put policies in place on data	
Patient Notification of Breach Patient Breach Notification Meth		☐ Written Notification of Brea	ICH
		be made to TN's HIPPA Privacy Of	ficer and the HIDDA Privacy
racient breach Nothication Metr		ct an investigation and formulate	

E-prescribing required substances: Controlled substances

E-prescribing exemptions/waivers: Link on every board professions website: https://www.tn.gov/health/health-

program-areas/health-professional-boards/me-board.html

Authority to enforce PDMP mandates: Regulatory/Licensing Board

Enrollment and Accounts		
✓ Superviser Review/audit of Delegate Accounts Number of Delegates allows: unlimited for licensed delegates only ✓ Auto Enroll with License Renewal or App Enrollment Method:		
Go to URL https://www.tncsmd.com/ and choose register and appropriate user type and enter the required information identified by red "*" and hit "Submit". Required information varies by user type. If all information is validated the system automatically s		
Practitioner IDs for PDMP Account:		
DEA controlled substance registration number; Licensing Board number; National Provider Identifier;		
2 Factor Authentication: 2 factor authentication not offered		
Criteria for Dispensers to get account to upload data		
Vendor is responsible for Dispenser registration requirements		
Criteria for Prescriber delegates to get account:		
Registration requires state licensure information if licensed, driver license and driver license of supervising physician,		
demographic and personal information		
Criteria for Dispenser delegates to get account:		
Registration requires state licensure information if licensed, driver license and driver license of supervising pharmacist, demographic and personal information		
Criteria for PAs to get account:		
Registration requires: DEA Registration number, TN professional license number, driver's license number of supervising physician, email address, phone and other demographic information and personal information		
Criteria for Nurse Practitioners to get account:		
Registration requires: DEA Registration number, TN professional license number, driver's license number of supervising physician, email address, phone and other demographic information and personal information		
Criteria for other users to get account:		
Access is determined by TN law		
Requirements for Patients to get PDMP Report:		
Their provider is allowed to release a report from their medical record		
Requirements for others to get PDMP Report		
Criteria for Online Non-healthcare accounts:		
PDMP Data for Epidemiological Purposes: Authority to Release		
✓ Law Enforcement On-line access to PDMP  Law Enforcement Written Request access to PDMP  Law Enforcement Access Method:		
Law Enforcement Access Requirements: Active Investigation		
Proper Need/Upon Request		

 $\square$  PDMP Access without DEA Number

Validation Process for

✓ PDMP users validated with DEA Registration File

✓ PDMP users validated with State Licensing Board File users without DEA #:

 $\square$  PDMP users validated with NPI File

#### **Enrollment Mandates**

Dispenser - Mandatory PDMP Enrollment Prescriber - Mandatory PDMP Enrollment

Effective Date(s): January 1, 2013

Details:

Per Tennessee Public Chapter 1002 in 2016 and Public Chapter 1039 in 2018

Effective Date(s): January 1, 2013; October 30, 2021

Details:

Per Tennessee Public Chapter 1002 in 2016 and Public Chapter 1039 in 2018

Rule 1145-01-.03 Registration with the Database. (1) Each healthcare practitioner registered with the database shall register each of his or her Tennessee DEA Registration Numbers, including suffixes, as part of his or her CSMD profile. (2) Each healthcare practitioner required by Title 63 to maintain a collaborating physician shall register each and every of his or her collaborating physicians who allow that healthcare practitioner to prescribe controlled substances within his or her CSMD profile. Each collaborating physician who allows a collaborating healthcare practitioner to prescribe controlled substances shall be registered with the database profile within thirty (30) days after such collaborative relationship begins. Any collaborative relationship which lasts less than thirty days in a calendar year is exempt from registration unless such registration is required for the healthcare practitioner to have the necessary access to the database. (3) Each healthcare practitioner registered with the database must maintain a unique valid e-mail address that she or he has access to and keep such e-mail address associated with his or her user profile in the database.

#### **Use Mandates**

Dispenser - Mandatory PDMP Use Prescriber - Mandatory PDMP Use

Effective Date(s): April 1, 2013

#### Details:

Healthcare practitioners shall query the PDMP at the beginning of each new episode of treatment and semi-annually when that controlled substance remains part of the treatment; when dispensing a controlled substance, all healthcare practitioners shall query the PDMP prior to dispensing certain controlled substances to the patient for the first time at that practice site and at least semi-annually; before prescribing or dispensing, a healthcare practitioner shall query the PDMP if the practitioner is aware or reasonably certain that the person is attempting to obtain a Sch. II – V controlled substance for fraudulent, illegal, or medically inappropriate purposes. Nonresidential office-based opiate treatment facilities shall query the PMP upon every visit of the patient with a program physician.

Effective Date(s): April 1, 2013; 1-26-22

#### Details:

Healthcare practitioners shall query the PDMP at the beginning of each new episode of treatment and semi-annually when that controlled substance remains part of the treatment; when dispensing a controlled substance, all healthcare practitioners shall query the PDMP prior to dispensing certain controlled substances to the patient for the first time at that practice site and at least semi-annually; before prescribing or dispensing, a healthcare practitioner shall query the PDMP if the practitioner is aware or reasonably certain that the person is attempting to obtain a Sch. II – V controlled substance for fraudulent, illegal, or medically inappropriate purposes. Nonresidential office-based opiate treatment facilities shall query the PMP upon every visit of the patient with a program physician.

Rule 1145-01-.04 Drugs of Abuse. Pursuant to T.C.A. § 53-10-310(e)(4), in addition to opioids and benzodiazepines, the Commissioner finds, and the Committee has found at Rule 1140-11-.02, that Schedule II amphetamines demonstrate such a potential for abuse that when prescribing Schedule II amphetamines, all healthcare practitioners, unless otherwise exempted, shall check the controlled substance database prior to prescribing Schedule II amphetamines to a human patient in accordance with T.C.A. § 53-10-310(e)(1).

## Training on Enrollment and Use

#### **PDMP Queries**

✓ Ability to search for multiple patients in one query

Patient Query Date Range: 1 year

Minimum data elements to query for healthcare user:

Query by partial data elements by healthcare user:

Optional data elements to query by healthcare user:

Optional data elements to query by non-healthcare user: This would be allowed by Admin

Minimum data elements to query for non-healthcare user: This would be allowed by Admin Query by partial data elements by non-healthcare user:

Maximum number of patients in one query: 100

Other Query Date Range: can be changed if more data is ne

First Name, Last Name, Date of Birth

TN CSMD allows partial searches which may be a few letters of

the first and last name.

Middle Name, Gender, Street, City, State, Zip can also be

included in the search criteria

This would be allowed by Admin

## **Unsolicited Reports/Push Notifications**

Frequency unsolicited alerts/reports generated:

Delivery method for unsolicited alerts/reports:

Notification sent via email

Delivery method for unsolicited alerts/reports - LE: Delivery method for unsolicited alerts/reports - Boards:

Unsolicited alerts/reports to practitioners not enrolled in PDMP

## **Veterinary Policies**

Data transmission frequency for Veterin	arians: 14 days	
Criteria for veterinarian queries:	Animal's Name	
☐ Veterinarian access to owner's prescr	iption history	$\square$ Veterinary Icon on PDMP Report
$\square$ Reporting Specifications		
Reporting Method:	Electronic, Mail, Fax, Web Por	tal, email completed form
Reporting Specifications:	See TCA53-10-304	
Data Fields:	PAT07 - Last Name, PAT08 - A	nimal's First Name, PAT18 - Animal's Date of Birth
Reporting Description:	Veterinarians are required to	report
Reporting Mandate Compliance		
Reporting Compliance Details:		
Reporting Mandate Actions:		
Reporting Issues:	See TCA53-10-304	
Reporting Misc Information:		
$\square$ Enrollment Mandate Compliance		
Enrollment Description:		ta to TN, if statutory requirements are met. ith CSMD as determined by statute.
Enrollment Mandate Compliance Details	S:	
Enrollment Mandate Criteria:		
$\square$ Query Mandate Compliance		
Query Description:	Veterinarians can voluntarily of	query
Query Mandate Compliance Details:		

Query Mandate Criteria:

### **PDMP Effectiveness Measures**

Reduction in morphine milligram equivalents (MMEs) prescribed or dispensed

Reduction in number of fatal or non-fatal overdoses

Reduction in incidence of multiple provider episodes

Reduction in number of opioid prescriptions issued

Reduction in number of benzodiazepine dosage units dispensed

## **Substance Use Disorder Activities**

Tools or Resources	
<ul> <li>□ MAT Services</li> <li>□ MOUD Services</li> <li>□ Harm Reduction Strategies</li> <li>□ Mental Health Assistance Services</li> <li>□ Employee Assistance Programs</li> <li>□ Housing Assistance Programs</li> <li>□ Re-Entry Programs</li> </ul>	Other: PDMP Data is used to inform the listed activities but not incorporated.
Surveillance Activities	
☐ Emergency Department Data Data Sources for Surveillance Activities:	☐ Medical Examiner/Coroner Data  TN Death Certificates, State Unintentional Drug Overdose Reporting System (SUDORS), Hospital Discharge Data System (HDDS), Drug Overdose Reporting (DOR), Electronic Surveillance System for the Early Notification of Community Epidemics (ESSENCE)
Initiated Actions	
<ul> <li>✓ Resources to Affected Areas</li> <li>✓ Directed Training on Prescribing</li> <li>□ Prescription Drug Tool Kits</li> <li>✓ Risk Evaluation/Analysis on PDMP Reports</li> <li>□ Referrals to SUD Organizations</li> <li>□ Referrals to OFR Teams</li> </ul>	Other Actions: