

Prescription Drug Monitoring Program Training and Technical Assistance Center

# **South Carolina**

PDMP acrony **SCRIPTS** Region South

Agency Responsib South Carolina Department of Health and Environmental Control

Agency Typ Department of Health

PDMP Web Resources/Links

PDMP Websit https://scdhec.gov/healthcare-quality/drug-control-register-verify/prescription-

monitoring

PDMP Ema scripts@dhec.sc.gov

PDMP Register Websi https://southcarolina.pmpaware.net

User Account Manu https://scdhec.gov/sites/default/files/media/document/SC PMP AWARxE User Supp

ort Manual v3.0.pdf

PDMP Query Websi https://southcarolina.pmpaware.net

PDMP Data Upload Websi https://pmpclearinghouse.net

Data Upload Manu https://scdhec.gov/sites/default/files/media/document/SC%20PMP%20Data%20Submi

ssion%20Dispenser%20Guide v%203.1 1.pdf

Statute/Regulation Websit https://www.scstatehouse.gov/code/t44c053.php

Opioid Guidelines Websi

PDMP FAQ https://scdhec.gov/healthcare-quality/drug-control-register-verify/prescription-

monitoring/dos-and-donts-concerning-scripts

https://go.bamboohealth.com/ehrrequest Integration Guidanc

PDMP Statistics Websi https://scdhec.gov/sites/default/files/media/document/PMP Annual Report 2022.pdf

Opioid Dashboard Websi

http://www.scdhec.gov/Health/FHPF/DrugControlRegisterVerify/PrescriptionMonitoring/ **Training Websit** 

### **PDMP Contact Information**

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## State Population and Number of Registrants

State population: 5,464,155 DEA Prescriber total: 30,176 DEA Dispenser total: 1,144

Data Transmitter(s)

Correctional Facility Pharmacy

Dispensing Veterinarians
Pharmacy (In-State)

Pharmacy (Mail Order Out of State)

**Veterans Administration** 

**Dispensing Practitioner** 

Long Term Care Facility Pharmacy
Pharmacy (Mail Order In-State)

Pharmacy (Other Out of State)

Pharmacy (Other Out of State)

**Substances Monitored** 

Drugs of Concern Schedules II - IV

Alternate Data Sources

Naloxone/Narcan Administrations

**Available Reports** 

Licensee Reports to Licensing Board MME Calculations
Multiple Provider Episode Reports Overdose Reports

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

Patient Reports to Law Enforcement

Patient Reports to Electrising Boards

Prescriber Reports to Electrising Boards

Prescription Drug Combinations Registrant Query Lists to Law Enforcement

Registrant Query Lists to Licensing Boards Registrant Reports to Prescribers

Risk Scores

# Statistical Capabilities

<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>
<ul> <li>         # of Authorized PDMP Users Enrolled     </li> <li>         # of Registrants in SDTC     </li> <li>         # of Registrants in SDTC by Practice/License Typ     </li> </ul>	<ul> <li># of Prescribers Enrolled in PDMP by License Type</li> <li># of Dispensers Enrolled in PDMP by License Type</li> <li># of Prescribers Enrolled in PDMP by Specialty</li> <li># of Unique Prescribers</li> </ul>
<ul> <li>      # of Data Errors by Error Type</li> <li>     # of Data Errors Corrected</li> <li>     # of At-Risk Patients by Risk Factor</li> <li>     Risk Factor Statistics by Time Frame   </li> </ul>	<ul> <li>  # of In-State Queries</li> <li> # of In-State Queries by Requestor Type</li> <li> # of Interstate Queries</li> <li> # of Interstate Queries by Requestor Type</li> <li> # of Positive Matches from Interstate Queries</li> </ul>
<ul> <li>         # of Solicited Prescriber Reports         <ul> <li>             # of Solicited Prescriber Reports by Requestor Type</li> <li>             # of Unsolicited Prescriber Reports</li> <li>             # of Unsolicited Prescriber Reports by Recipient Type</li> <li>             # of Solicited Dispenser Reports</li> <li>             # of Unsolicited Dispenser Reports by Requestor Type</li> <li>             # of Unsolicited Dispenser Reports</li> <li>             # of Solicited Dispenser Reports by Recipient Type</li> <li>             # of Solicited Patient Reports</li> <li>             # of Solicited Patient Reports by Requestor Type</li> <li>             # of Unsolicited Patient Reports</li> <li>             # of Unsolicited Patient Reports</li> <li>             # of Unsolicited Patient Reports by Recipient Type</li> </ul> </li> </ul>	<ul> <li># of Solicited Statistical Reports by Requestor Type</li> <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. rep</li> <li>✔ # of Unique Requestors for Unsolicited Rep</li> <li>☐ # of Unique Recipients by Recipient Type (unsol. rep</li> <li>% Out-of-State Patien &lt;5%</li> <li>% Out-of-State Prescribe 5-10%</li> <li>Data Analysis Resources Available:</li> <li>Epidemiologist</li> </ul>

### Authorized PDMP Users

Correctional Supervision/Solicited In-State Dispenser Delegates - Licensed/Solicited In-State Dispenser Delegates - Licensed/Solicited Out-of-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 Dispensers - Pharmacists/Unsolicited In-State Dispensers - Pharmacists/Unsolicited Out-of-State **Drug Courts/Solicited In-State** Drug Treatment Providers/Solicited In-State Law Enforcement - Federal/Solicited In-State Law Enforcement - Federal/Solicited Out-of-State Law Enforcement - Federal/Unsolicited In-State Law Enforcement - Local/Solicited In-State Law Enforcement - Local/Solicited Out-of-State Law Enforcement - Local/Unsolicited In-State Law Enforcement - State/Solicited In-State Law Enforcement - State/Solicited Out-of-State Law Enforcement - State/Unsolicited In-State Medicaid Drug Utilization and Review/Solicited In-State Medicaid Fraud and Abuse/Solicited In-State Medical Examiners and Coroners/Solicited In-State Nurse Practitioners/Solicited In-State Nurse Practitioners/Solicited Out-of-State Patients/Solicited In-State Patients/Solicited Out-of-State Physician Assistants/Solicited In-State Physician Assistants/Solicited Out-of-State Physician Assistants/Unsolicited In-State Physician Assistants/Unsolicited Out-of-State Prescriber Delegates - Licensed/Solicited In-State Prescriber Delegates - Licensed/Solicited Out-of-State Prescriber Delegates - Unlicensed/Solicited In-State Prescriber Delegates - Unlicensed/Solicited Out-of-State Prescribers/Solicited In-State Prescribers/Solicited Out-of-State Prescribers/Unsolicited In-State Prescribers/Unsolicited Out-of-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

Researchers/Solicited In-State

## **Engaged PDMP Users**

Correctional Supervision/Solicited In-State

Dispenser Delegates - Licensed/Solicited In-State

Dispenser Delegates - Licensed/Solicited Out-of-

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 Treatment Providers/Solicited In-State

Law Enforcement - Federal/Solicited In-State

Law Enforcement - Federal/Solicited Out-of-State

Law Enforcement - Federal/Unsolicited In-State

Law Enforcement - Local/Solicited In-State

Law Enforcement - Local/Unsolicited In-State

Law Enforcement - State/Solicited In-State

Law Enforcement - State/Unsolicited In-State

Medicaid Fraud and Abuse/Solicited In-State

Medical Examiners and Coroners/Solicited In-State

Nurse Practitioners/Solicited In-State

Nurse Practitioners/Solicited Out-of-State

Patients/Solicited In-State

Physician Assistants/Solicited In-State

Physician Assistants/Solicited Out-of-State

Prescriber Delegates - Licensed/Solicited In-State

Prescriber Delegates - Licensed/Solicited Out-of-

State

Prescriber Delegates - Unlicensed/Solicited In-State

Prescriber Delegates - Unlicensed/Solicited Out-of-

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

Researchers/Solicited In-State

Researchers/Solicited Out-of-State

Telemedicine Prescribers/Solicited in-State

# Budget

Total Annual Budget: \$50	00,000.00	PDMP Staff:		4	
# of Employees - Operational	3	# of Employees - Othe	er:	0	
# of Employees - Technical:	0				
# of Employees - Analytical:	1				
		Funding Source(	s)		
CDC Grant		•	,	e Registration Fee	Э
		Technologies			
Data Collection Entity:	Vendor	_	☐ State HIE i	n nlace	
Data Collection Vendor name	Bamboo l	_	_	ntegration Allowe	d
Data Storage Entity:	Vendor			A integration	u
Data Storage Vendor name	Bamboo I	_	HL7 FHIR	•	
Report Generation Entity:	Vendor	_	_	ccess via integra	tion
Report Generation Vendor name		_	SMART on	•	
Data Access Method:			SAP Version	• • •	3
Data Access Entity:	Vendor				
Data Access Vendor name	Bamboo I	lealth			
		Patient Matchin	g		
Referen	tial Matchir		☐ Exact Ma	atchina	
	nistic Match	•		stic Matching	
✓ Manual		9		stic and Manual M	/latching
☐ Other M	•				g
Access to patient matching	J	3			
Patient Matching Metrics Availal	•				
Patient matching data elements					
J					
	In	tegration(s) Avail	able		
Integration Type % Providers	Hub Used	Paid by Fed Gov't Paid b	y State Gov't	Paid by Facility	Paid by Provider
EHR Integration 50-74%	PMPi				
☐ Data Downloaded/Stored		☐ Data Manipulated for	Analysis		
	toto Doto		•		
✓ Data Incorporated with Inters	lale Dala	✓ Multistate Integrations	s Alloweu		
Integration Standards					
Alternate data available:		Naloxone A	Administration	ons	
Integration Type % Providers I	Hub Used	Paid by Fed Gov't Paid b	y State Gov't	Paid by Facility	Paid by Provider
PDS Integration 50-74%	PMPi				•
☐ Data Downloaded/Stored		Data Manipulated for	Analysis		
	tata Did	☐ Data Manipulated for	•		
☑ Data Incorporated with Inters	iate Data	✓ Multistate Integrations	s Allowed		
Integration Standards					
Alternate data available:		Naloxone A	Administratio	ons	

# Interstate Data Sharing Partner(s)

	iliterstate Data
Alabama	PMPi Hub
Alaska	PMPi Hub
Arizona	PMPi Hub
Arkansas	PMPi Hub
Colorado	PMPi Hub
Connecticut	PMPi Hub
Delaware	PMPi Hub
District of Columbia	PMPi Hub
Florida	PMPi Hub
Georgia	PMPi Hub
Hawaii	PMPi Hub
Idaho	PMPi Hub
Illinois	PMPi Hub
Indiana	PMPi Hub
lowa	PMPi Hub
Kansas	PMPi Hub
Kentucky	PMPi Hub
Louisiana	PMPi Hub
Maine	PMPi Hub
Maryland	PMPi Hub
Massachusetts	PMPi Hub
Michigan	PMPi Hub
Minnesota	PMPi Hub
Mississippi	PMPi Hub
Montana	PMPi Hub
Nebraska	RxCheck Hub
Nevada	PMPi Hub
New Hampshire	PMPi Hub
New Jersey	PMPi Hub
New Mexico	PMPi Hub
New York	PMPi Hub
North Carolina	PMPi Hub
North Dakota	PMPi Hub
Ohio	PMPi Hub
Oklahoma	PMPi Hub
Pennsylvania	PMPi Hub
Puerto Rico	PMPi Hub
Rhode Island	PMPi Hub
South Dakota	PMPi Hub
Tennessee	PMPi Hub
Texas	PMPi Hub
Utah	PMPi Hub
Virginia	PMPi Hub
Washington	PMPi Hub
West Virginia	PMPi Hub
Wisconsin	PMPi Hub

## PDMP Policies

Enabling legislation enacted:	2006	Data collection frequency:	Daily or next busin
PDMP operational:	2008	☐ Requirement for zero-repo	rting
User access date (any method):	2008	Frequency of zero-reporting:	
User electronic access date:	2008		
Date received electronic data:	2008		
Interstate sharing start date:	2011		
Law/Statute citation:	SC Code §§44-53-1610	to -1680; 16-1-90	
Regulation/Rule citation:			
Dr Shopper law/statute:	Section 44-53-395 of the	SC Controlled Substance Ac	t
Pill Mill law/statute:			
Pain Clinic law/statute: Unauthorized Use or Disclosure: Enacted 42 CFR Part 2: 42 CFR Part 2 Details:	SC Code §44-53-1680		
Required Notification to consult Mandated Use of Advisory Grown Payment method captured Ability to id prescriber specialty Patient consent required befor Ability for users to set threshod Ability for users to do user-led Mandatory E-Prescribing (EPC Compliance Process for Enrol Compliance Process for Query ICD-10 Codes Collected Deceased Patient Field Engaged in Academic Detailin Patient ID Required to be Prescribed	oup  iy re PDMP data release olds for alert notices I alert notices CS) Iment Mandates y Mandate	<ul> <li>✓ Data Retention Policy         <ul> <li>Data Retention Time:</li> <li>All Information Purged</li> <li>Patient Information Purge</li> <li>Prescriber Information Purge</li> <li>Dispenser Information Purged</li> <li>Drug Information Purged</li> <li>HIPAA Covered Entity</li> <li>Identifiable Data to State</li> <li>Identifiable Data to local Health Communication</li> <li>Certified as CMS Specialion</li> <li>Qualified PDMP with CMS</li> <li>PDMP Disaster Recovery</li> </ul> </li> </ul>	irged irged Health Dept Health Dept ized Registry
<ul> <li>✓ Ability to de-id data</li> <li>✓ Authority to release de-id data</li> <li>De-identified data sharing conditi</li> <li>De-Identified Data Retention Detail</li> <li>Retain De-Identified Data</li> </ul>	ons:		
Record Retention Detai Length o	of data vendor contract		
☐ Patient Notification of Breach  Patient Breach Notification Methor  Output  Description: Patient Notification Methor  Description: Patient Notification Methor  Description: Patient Notification Notification  Description: Patient Notification  Description  Description: Patient Notification  Description  Descri	od:	☐ Written Notification of Br	eacn
Patient Breach Notification Metho			
E-prescribing required substan	Controlled substance	S	
E-prescribing exemptions/waive	Exempted situations dispenses directly to	by laws: (i) a practitioner, othe the ultimate user; (ii) a practit included in Schedules II throu	ioner who orders a
Authority to enforce PDMP mand	at Regulatory/Licensing	Board	

Enrollment and Accounts
Superviser Review/audit of Delegate Account Number of Delegates allowed: 3
☐ Auto Enroll with License Renewal or App
Enrollment Method:
online enrollment
Practitioner IDs for PDMP Account:
DEA controlled substance registration number;
2 Factor Authentication:
Allowed to use 2 factor authentication
Criteria for Dispensers to get account to upload data:
Criteria for Prescriber delegates to get account:
government issued photo ID
Criteria for Dispenser delegates to get account:
government issued photo ID
Criteria for PAs to get account:
State medical license number, DEA Registration number and valid government issued photo ID
Criteria for Nurse Practitioners to get account:
State nursing license number, DEA Registration number and valid government issued photo ID
Criteria for other users to get account:
Requirements for Patients to get PDMP Report:
Notarized request form, Valid government issued photo ID
Requirements for others to get PDMP Report:
Criteria for Online Non-healthcare accounts:
Licensing/regulatory Board investigators, Law Enforcement investigators (federal, state, and local), Medical examiners/coroners, Pardons or Parole officers, Patients or their representatives
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
<ul> <li>✓ PDMP users validated with DEA Registration Fil</li> <li>✓ PDMP users validated with NPI File</li> <li>✓ PDMP users validated with State Licensing Board users without DEA #:</li> </ul>

### **Enrollment Mandates**

## **Use Mandates**

Prescriber - Mandatory PDMP Use

Effective Date(s): May 19, 2017

Details:

A practitioner, or the practitioner's authorized delegate, shall review a patient's controlled substance prescription history, as maintained in the prescription monitoring program, before the practitioner issues a prescription for a Schedule II controlled

### Training on Enrollment and Use

Prescriber - Training Provided In-person; Interactive online training; Webinar; Presentations
Licensing Board - Training Provided In-person; Interactive online training; Webinar; Presentations
Law Enforcement - Training Provided In-person; Interactive online training; Webinar; Presentations
Dispenser - Training Provided In-person; Interactive online training; Webinar; Presentations
Attorney General - Training Provided In-person; Interactive online training; Webinar; Presentations

### **PDMP Queries**

☐ Ability to search for multiple patients in one query Maximum number of patients in one query

Patient Query Date Ran >3 years Other Query Date Range:

Minimum data elements to query for healthcare user: last name, first name, dob or partial last name,

partial first name, dob

Query by partial data elements by healthcare user: 3 characters
Optional data elements to query by healthcare user: phone, address

Minimum data elements to query for non-healthcare user: last name, first name, dob or partial last name,

partial first name, dob

Query by partial data elements by non-healthcare user: 3 characters

Optional data elements to query by non-healthcare user: phone, address

### **Unsolicited Reports/Push Notifications**

Frequency unsolicited alerts/reports generated:

Delivery method for unsolicited alerts/reports:

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 Veterinal	rians: Daily	
Criteria for veterinarian queries:	Animal's Name	
$\square$ Veterinarian access to owner's prescrip	tion history	✓ Veterinary Icon on PDMP Report
☑ Reporting Specifications		
Reporting Method:	Electronic, Web Portal	
Reporting Specifications:		
Data Fields:		3 - Animal's First Name, PAT18 - Animal's nal's Gender, PAT20 - Species Code, PAT21
Reporting Description:	Veterinarians are required t	o report
✓ Reporting Mandate Compliance		
Reporting Compliance Details:		n that is not reporting that should be, we see requirements and make sure they begin
Reporting Mandate Actions:		
Reporting Issues:	Veterinarian's software s no	ot able to report data in ASAP format
Reporting Misc Information:		
☐ Enrollment Mandate Compliance		
Enrollment Description:		ssuing prescriptions for greater than a 5 days g must consult the PMP prior to prescribing. eterinarians.
Enrollment Mandate Compliance Details:		
Enrollment Mandate Criteria:		
☐ Query Mandate Compliance		
Query Description:	Veterinarians are required by	by statute/rule/policy to query
Query Mandate Compliance Details:		
Query Mandate Criteria:	Listed earlier. Prior to issuir	ng CII medications greater than a 5 days'

supply.

### PDMP Effectiveness Measures

Reduction in morphine milligram equivalents (MMEs) prescribed or dispensed

Reduction in incidence of multiple provider episodes

Reduction in number of benzodiazepine dosage units dispensed

Reduction in number of benzodiazepine prescriptions issued

Reduction in number of opioid dosage units dispensed

Reduction in number of opioid prescriptions issued

Reduction in number of stimulant dosage units dispensed

Reduction in number of stimulant prescriptions issued

### 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:
Surveillance Activities	
✓ Emergency Department Data Data Sources for Surveillance Activities:	☐ Medical Examiner/Coroner Data
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 Report</li> <li>□ Referrals to SUD Organizations</li> <li>□ Referrals to OFR Teams</li> <li>☑ Prevent disruption of nations services</li> </ul>	Other Actions:
✓ Prevent disruption of patient services	