



## PDMP Available Reports

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Prescriber access to patient history</li> <li><input checked="" type="checkbox"/> Prescriber access to own history</li> <li><input checked="" type="checkbox"/> Prescriber access to patient query history</li> <li><input type="checkbox"/> Prescriber access to registrant query history</li> <br/> <li><input checked="" type="checkbox"/> Dispenser access to patient history</li> <li><input type="checkbox"/> Dispenser access to own history</li> <li><input type="checkbox"/> Dispenser access to patient query history</li> <li><input type="checkbox"/> Dispenser access to registrant query history</li> <br/> <li><input type="checkbox"/> Patient access to own query history</li> </ul> | <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Licensing Board access to patient history</li> <li><input checked="" type="checkbox"/> Licensing Board access to licensee history</li> <li><input checked="" type="checkbox"/> Licensing Board access to patient query history</li> <li><input checked="" type="checkbox"/> Licensing Board access to registrant query history</li> <br/> <li><input checked="" type="checkbox"/> Law Enforcement access to patient history</li> <li><input checked="" type="checkbox"/> Law Enforcement access to prescriber history</li> <li><input checked="" type="checkbox"/> Law Enforcement access to dispenser history</li> <li><input type="checkbox"/> Law Enforcement access to patient query history</li> <li><input type="checkbox"/> Law Enforcement access to registrant query history</li> </ul> |
|--|---|

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Summary data on/with patient reports</li> <li><input checked="" type="checkbox"/> Customized reports by user type</li> <li><input checked="" type="checkbox"/> Peer comparison reports</li> <li><input checked="" type="checkbox"/> PDMP annual reports</li> <li><input checked="" type="checkbox"/> Data dashboards</li> <li><input checked="" type="checkbox"/> Prescriber report cards</li> <li><input checked="" type="checkbox"/> Statewide statistics</li> <li><input type="checkbox"/> Lost/stolen prescription information</li> </ul> | <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Clinical Alerts</li> <li><input checked="" type="checkbox"/> Risk Scores</li> <li><input checked="" type="checkbox"/> MME Calculations</li> <li><input type="checkbox"/> Overdose Reports</li> <li><input type="checkbox"/> Multiple Provider Episodes</li> <li><input checked="" type="checkbox"/> Drug trend reports</li> <li><input checked="" type="checkbox"/> Geomapping of prescription data</li> <li><input checked="" type="checkbox"/> Evaluation Reports for Public, Legislature, etc.</li> </ul> |
|--|---|

Other types of reports:

Opioid Dashboard link:

2020

## PDMP Budget and Staffing

### Source(s) of Funding

- |  |   |  |
|--|---|--|
| <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> State general fund</li> <li><input type="checkbox"/> Licensing fee</li> <li><input type="checkbox"/> Controlled substance registration fee</li> <li><input type="checkbox"/> Regulatory board fund</li> <li><input type="checkbox"/> Agreed settlement</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> BJA grant</li> <li><input checked="" type="checkbox"/> CDC grant</li> <li><input type="checkbox"/> SAMHSA grant</li> <li><input type="checkbox"/> CMS grant</li> <li><input type="checkbox"/> NASCSA grant</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Other funding</li> </ul> |
|--|---|--|

### Staff Category and Number of FTEs

Total Staff: 3.00

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li># of employees - Operational: 2</li> <li># of employees - Technical: 1</li> <li># of employees - Analytical/Epidemiological:</li> </ul> | <ul style="list-style-type: none"> <li># of employees - Other:</li> </ul> |
|--|---|

# Policies and Procedures

## Key PDMP Dates

Legislation Enacted: 06-23-2003

PDMP Operational: July 2004

Initial user access: January 2005

On-line access: January 2005

Electronic reporting: July 2004

Interstate Data Sharing 2016

## Relevant Statutes and Rules

Statute website: <http://www.maine.gov/dhhs/samhs/osa/data/pmp/rules.htm>

Statute citation: ME Rev Statute Title 22 Chapter 1603, §§7245 to 7252

Regulation citation: ME Code Regs §§14-118 Chapter 11

Dr shopper statute: ME 17-A MRSA §§ 1108

Pill mill statute:

Pain clinic statute:

Disclosure statute: ME Rev Statute Title 22 Chapter 1603, §7251(2)

Opioid guidelines:

## Miscellaneous Capabilities and Policies

Data collection frequency: next business day

Zero-reporting Zero-reporting frequency: quarterly

Mandatory E-Prescribing (EPCS)

Payment method captured

Patient ID required to be presented to dispenser

Patient ID captured

ID of person (other than patient) dropping off capture

ID of person (other than patient) picking up capture

Mandated use of advisory group

ICD-10 Codes Collected

Deceased Patient Field

HIPAA Covered Entity

Certified as CMS Specialized Registry

User-friendly web interface

Data analysis software

Online user guides/educational materials

Patient consent required before data release

Required notification to patients of Query

Patient Breach Notification Method

Patient Breach Notification Method Other:

PDMP Effectiveness Stud

Frequency unsolicited alerts/reports generated: quarterly

Delivery method for unsolicited alerts/reports: Notification sent via email and available within the system when the provider logs in.

Ability to identify prescriber specialty

Ability for users to set thresholds for alert notices

Ability for users to do user-led alert notices

Unsolicited alerts to practitioners not enrolled in PDMP

Ability to search for multiple patients in one query

Maximum number of patients in one query:

Supervisor review/audit of delegate accounts

Number of delegates allowed not limited

Ability to de-identify data

Authority to release de-identified data

Authority to release for epidemiological or educational purposes

Engaged in release for epidemiological or educational purposes

Identifiable Data to State Health Department

Identifiable Data to local Health Department

Patient Notification of Breach

Patient Breach Notification Written

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### Data Retention

- Data retention policy     Prescriber information purged     Patient information purged     Retain de-identified data  
 All information purged     Dispenser information purged     Drug information purged    Retention time: 6 years

Record retention details: 6 years

De-Identified data retention details: Once patient, practitioner, and pharmacist identifying information has been removed, the aggregated data may be retained indefinitely.

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### PDMP User Training

Training website: <http://www.maine.gov/dhhs/samhs/osa/data/pmp/resources.htm>

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#### Available Training

- Prescriber                       Attorney General  
 Dispenser                       Patient  
 Law Enforcement             Researcher  
 Regulatory Board

#### Training Required Before PDMP Use

- Prescriber                       Attorney General  
 Dispenser                       Patient  
 Law Enforcement             Researcher  
 Regulatory Board             Other
- 

### PDMP Accounts

- Automatic enrollment with license renewal or application

Enrollment method: Prescribers are auto enrolled per the Board's, Dispensers and delegates are manual

Prescriber account criteria: DEA Registration number and State License number, and state or federal government issued photo ID (registration form must be notarized); exceptions are made for VA providers—any provider who is employed at a VA in Maine may register, even if they have an out of state license.

Dispenser account criteria: DEA Registration number and State License number, and state or federal government issued photo ID (registration form must be notarized);

Regulatory Board account criteria: Licensing boards have identified investigators who can query

Law Enforcement account criteria: Access through Grand Jury Subpoena, PDMP staff queries data for them

#### Law Enforcement Requirements

- Active investigation             Probable cause  
 Subpoena                         Search warrant  
 Court order/approval         Proper need/upon request

Other:

#### Law Enforcement Access Methods

- On-line/web portal  
 Written request

Other method:

Must be a grand jury subpoena submitted in writing to the PDMP Coordinator

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### Criteria to Query PDMP

Minimum data elements: first and last name, date of birth

Partial data elements:

Optional data elements: address, gender, exact or soundex, county, zip code

Patient access to query list details:

Requirements for patients to get own report: Fill out a request for person PHI form; present ID to get a copy; policy to allow notarized copy of their id or designee can pick it up for them with proper id

### Required PDMP Enrollment and Use

- Required enrollment - Prescriber     Required enrollment - Dispenser     Compliance Process for Enrollment Mandates

Legislatively mandated that automatic enrollment occurs for all licensed prescribers in the state of Maine. Legislatively mandated that all dispensers licensed to dispense schedule II - IV controlled substances be registered with the PMP.

Enrollment Effective Date(s): February 23, 2012

- Required use - Prescriber     Required use - Dispenser     Compliance Process for Use Mandates

Mandated use of the PDMP upon initial prescription of an opioid or benzodiazepine medication and every 90 days for as long as the prescription is active. PDMP check must be completed if any of the following conditions are met: Person is not a Maine resident Prescription is from a prescriber with an address outside the State of Maine Person is paying cash with prescription insurance on file Person has not had a prescription for a benzo or opioid in the past 12 months. All prescribers of medication-assisted treatment are required to consult the PDMP prior to initial treatment, changes in dosages, and as clinically indicated. Office-based opioid treatment clinicians shall register with the PDMP and comply with laws regarding reporting on dispensed controlled substances and shall query the PDMP prior to initiating office-based opioid treatment and at least every 90 days thereafter or more frequently when clinically indicated.

Use Effective Date(s): January 1, 2017

Authority to enforce PDMP mandates: Regulatory/Licensing Board, PDMP

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### Veterinarian Policies

- Veterinarian access to owner's prescription history     Veterinary Icon on PDMP Report

Criteria for veterinarian queries: Animal Owner's Name and Date of Birth

Reporting method: Rules not yet promulgated

Reporting description: Veterinarians are required to report

Data Fields: Rules not yet promulgated

- Animal reporting specifications same as human patient

Animal v. Human Patient Reporting Differences:

Reporting Issues:

Reporting Miscellaneous Information:

- Reporting Mandate Compliance

Compliance Details:

Reporting Mandate Actions

Enrollment Description: Veterinarians can voluntarily enroll as data requesters with the PDMP and do enroll as data requestors

Enrollment Mandate Criteria:

- Enrollment Mandate Compliance

Compliance Details:

Use Description: Veterinarians are required by statute/rule/policy to query

Use Criteria:

- Use Mandate Compliance

Compliance Details:

## Data Monitored or Accessible

Schedule II

Schedule III

Schedule IV

Schedule V

Authority to monitor other substance

Removed from monitoring

**Drug-related Arrests**

Data on PDMP Report

Monitor Trends/Inform Policy

Reciprocity

Data Collectors:

Data Reporters:

Data Location:

Data Fields:

Authorized Users:

**Drug-related Convictions**

Data on PDMP Report

Monitor Trends/Inform Policy

Reciprocity

Data Collectors:

Data Reporters:

Data Location:

Data Fields:

Authorized Users:

**Child Welfare Case Information**

Data on PDMP Report

Monitor Trends/Inform Policy

Reciprocity

Data Collectors:

Data Reporters:

Data Location:

Data Fields:

Authorized Users:

**Criminal Court Case Information**

Data on PDMP Report

Monitor Trends/Inform Policy

Reciprocity

Data Collectors:

Data Reporters:

Data Location:

Data Fields:

Authorized Users:

**Drug Court Case Information**

Data on PDMP Report

Monitor Trends/Inform Policy

Reciprocity

Data Collectors:

Data Reporters:

Data Location:

Data Fields:

Authorized Users:

**Medical Marijuana Dispensings**

Data on PDMP Report

Monitor Trends/Inform Policy

Reciprocity

Data Collectors:

Data Reporters:

Data Location:

Data Fields:

Authorized Users:

**Risk Ratings\_Urine Drug Screens**

Data on PDMP Report

Monitor Trends/Inform Policy

Reciprocity

Data Collectors:

Data Reporters:

Data Location:

Data Fields:

Authorized Users:



## Data Monitored or Accessible (cont'd)

**Naloxone/Narcan Administrations**

- Data on PDMP Report      Data Collectors:
- Monitor Trends/Inform Policy      Data Reporters:
- Reciprocity      Data Location:
- Data Fields:
- Authorized Users:

**Naloxone/Narcan Dispensings**

- Data on PDMP Report      Data Collectors:      EMS
- Monitor Trends/Inform Policy      Data Reporters:      dispensing pharmacists and MAT providers
- Reciprocity      Data Location:
- Data Fields:      Dates Prescription was filled and where
- Authorized Users:      PMP Admin staff.

**Overdoses - Fatal Information**

- Data on PDMP Report      Data Collectors:
- Monitor Trends/Inform Policy      Data Reporters:      Syndromic Surveillance; Emergency Departments; Medical Examiner
- Reciprocity      Data Location:
- Data Fields:
- Authorized Users:

**Overdoses - Non-fatal Information**

- Data on PDMP Report      Data Collectors:
- Monitor Trends/Inform Policy      Data Reporters:      Syndromic Surveillance; Emergency Departments; Medical Examiner
- Reciprocity      Data Location:
- Data Fields:
- Authorized Users:

**Pharmaceutical Manufacturers/Distributors Sales**

- Data on PDMP Report      Data Collectors:
- Monitor Trends/Inform Policy      Data Reporters:
- Reciprocity      Data Location:
- Data Fields:
- Authorized Users:

Sales data access method:

Frequency of sales data upload:

Sales data elements available:

**Other Information**

- Data on PDMP Report      Description:      Treatment facility to enter information into the program for a patient
- Monitor Trends/Inform Policy      Data Collectors:
- Reciprocity      Data Reporters:
- Data Location:
- Data Fields:
- Authorized Users:

Capture/access registrant's disciplinary history/status

- Capture/access patient lock-in information
- Capture/access lost/stolen prescription drug reports
- ARCOS data available



# Technological Capabilities

## ASAP Versions Accepted

- ASAP 4-1/2010     ASAP 4-2a/2016  
 ASAP 4-2/2011     ASAP 4-2b/2019

## Data Transmission Methods Allowed

- Electronic data transmission     Mail data transmission  
 Fax data transmission     Media data transmission  
 Other

## Required Data Transmitters

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Pharmacy in-state                         | <input checked="" type="checkbox"/> Dispensing doctor     | <input type="checkbox"/> Department of Defense              |
| <input checked="" type="checkbox"/> Pharmacy in-state/mail order transmitters | <input checked="" type="checkbox"/> Veterinarian          | <input checked="" type="checkbox"/> Veterans Administration |
| <input checked="" type="checkbox"/> Pharmacy out-state/mail order             | <input type="checkbox"/> Long-term Care Facility Pharmacy | <input checked="" type="checkbox"/> Indian Health Services  |
| <input type="checkbox"/> Pharmacy out-state/other                             | <input type="checkbox"/> Correctional Facility Pharmacy   | <input type="checkbox"/> Tribal Pharmacy                    |

Other:

## Data Collection, Storage, Generation and Access

|                           |                    |              |     |
|---------------------------|--------------------|--------------|-----|
| Data collection entity:   | Vendor             | Vendor name: | NIC |
| Data storage entity:      | Vendor             | Vendor name: | NIC |
| Report generation entity: | Vendor             | Vendor name: | NIC |
| Data access entity:       | Vendor             | Vendor name: | NIC |
| Data access method:       | Web Portal/On-Line |              |     |

## Interstate Data Sharing

- | Method  | Jurisdictions Engaged  |
|---|--|
| <input checked="" type="checkbox"/> PMPi Hub    | AL, AZ, AR, CO, CT, DE, FL, GA, ID, IA, KS, LA, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, PA, RI, SC, SD, TN, TX, VT, VA and MHS |
| <input checked="" type="checkbox"/> RxCheck Hub | MD   |
| <input type="checkbox"/> HIE method             |  |

## Data Integration

- State HIE in place     RxCheck Integration Allowed

|   | % Providers Integrated | Integration Hub | Data allowed to be downloaded/store | Data allowed to be manipulated for analysis | Data incorporate interstate data    |
|---|------------------------|-----------------|-------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> HIE Integration            |                        |                 | <input type="checkbox"/>            | <input type="checkbox"/>                    | <input type="checkbox"/>            |
| <input checked="" type="checkbox"/> EHR Integration |                        | PMPi            | <input type="checkbox"/>            | <input type="checkbox"/>                    | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> PDS Integration |                        | PMPi            | <input type="checkbox"/>            | <input type="checkbox"/>                    | <input checked="" type="checkbox"/> |

|              |               |                  |                  |
|--------------|---------------|------------------|------------------|
| Paid by Feds | Paid by State | Paid by Facility | Paid by Provider |
|--------------|---------------|------------------|------------------|

HIE Cost Model:

EHR Cost Model:

Unknown

PDS Cost Model:

Unknown

## Patient Matching

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Exact match         | <input checked="" type="checkbox"/> Access to patient matching algorithms  |
| <input checked="" type="checkbox"/> Probabilistic match | Matching data elements:    Patient last name, Patient first name, Patient address, Patient date of birth, Patient gender                                     |
| <input type="checkbox"/> Referential match              | Matching metrics available:  |
| <input type="checkbox"/> Deterministic match            | Internal matching barriers:  |
| <input checked="" type="checkbox"/> Manual match        | Interstate matching barriers:  |
| <input checked="" type="checkbox"/> Other match method  | Manual matching (human adjudicators manually review potential matches and make a determination whether or not two records match based on the data available) |

## Requestors and Reports Authorized to Generate

|                                    | <b>Requestor Type</b>                | <b>Solicited Reports</b>            |                                     | <b>Unsolicited Reports</b>          |                                     |
|------------------------------------|--------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
|                                    |                                      | <b>In-State</b>                     | <b>Out-of-State</b>                 | <b>In-State</b>                     | <b>Out-of-State</b>                 |
| <b>Healthcare</b>                  | Prescriber                           | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Dispenser/Business (i.e., pharmacy)  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Dispenser/Person (i.e., pharmacist)  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Midlevel - Physician Assistant       | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Midlevel - Nurse Practitioner        | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Prescriber Delegate (licensed)       | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Dispenser Delegate (licensed)        | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Prescriber Delegate (unlicensed)     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Dispenser Delegate (unlicensed)      | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medical Residents                    | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Interns                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medical Facility/Institution         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Patient                              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Drug Treatment Provider              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Regulatory</b>                  | Licensing/Regulatory Board           | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
|                                    | State Health Department              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Peer Review Committee                | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Law Enforcement</b>             | Law Enforcement - Federal            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Law Enforcement - State              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Law Enforcement - Local              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Prosecutorial Authority              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Correctional Supervision             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medical Examiner/Coroner             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Drug Court                           | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Public and Private Insurers</b> | Medicaid Fraud and Abuse             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medicaid Drug Utilization and Review | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medicare                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Workers Compensation - State         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Workers Compensation - Insurance     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Third-party Payer                    | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Other</b>                       | Researchers                          | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Marijuana Dispensary                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Other PDMP                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    |                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    |                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |

## Requestors and Reports Being Generated

|                                    | <b>Requestor Type</b>                | <b>Solicited Reports</b>            |                                     | <b>Unsolicited Reports</b>          |                                     |
|------------------------------------|--------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
|                                    |                                      | <b>In-State</b>                     | <b>Out-of-State</b>                 | <b>In-State</b>                     | <b>Out-of-State</b>                 |
| <b>Healthcare</b>                  | Prescriber                           | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Dispenser/Business (i.e., pharmacy)  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Dispenser/Person (i.e., pharmacist)  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Midlevel - Physician Assistant       | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Midlevel - Nurse Practitioner        | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Prescriber Delegate (licensed)       | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Dispenser Delegate (licensed)        | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Prescriber Delegate (unlicensed)     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Dispenser Delegate (unlicensed)      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medical Residents                    | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                    | Interns                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medical Facility/Institution         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Patient                              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Drug Treatment Provider              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Regulatory</b>                  | Licensing/Regulatory Board           | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
|                                    | State Health Department              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Peer Review Committee                | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Law Enforcement</b>             | Law Enforcement - Federal            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Law Enforcement - State              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Law Enforcement - Local              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Prosecutorial Authority              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Correctional Supervision             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medical Examiner/Coroner             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Drug Court                           | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Public and Private Insurers</b> | Medicaid Fraud and Abuse             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medicaid Drug Utilization and Review | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Medicare                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Workers Compensation - State         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Workers Compensation - Insurance     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Third-party Payer                    | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>Other</b>                       | Researchers                          | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Marijuana Dispensary                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    | Other PDMP                           | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    |                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                    |                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            |