

Rhode Island

PDMP Name: RI PDMP PDMP region: East
 Agency responsible: Department of Health
 Agency type: Department of Health
 PDMP email: RIPMP@health.ri.gov
 PDMP website: <http://www.health.ri.gov/programs/prescriptionmonitoring/>
 Enrollment website: www.ripmp.com
 Query website: www.ripmp.com
 Data upload website:
 Statistics website:

Contact Information

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State Registrant Totals and Population

Statistics year:	2018	DEA registered prescribers:	6,765
State population:	1,061,712	DEA registered dispensers:	207

PDMP Available Reports

- Prescriber access to patient history
- Prescriber access to own history
- Prescriber access to patient query history
- Prescriber access to registrant query history

- Dispenser access to patient history
- Dispenser access to own history
- Dispenser access to patient query history
- Dispenser access to registrant query history

- Patient access to own query history

- Licensing Board access to patient history
- Licensing Board access to licensee history
- Licensing Board access to patient query history
- Licensing Board access to registrant query history

- Law Enforcement access to patient history
- Law Enforcement access to prescriber history
- Law Enforcement access to dispenser history
- Law Enforcement access to patient query history
- Law Enforcement access to registrant query history

- Summary data on/with patient reports
- Customized reports by user type
- Peer comparison reports
- PDMP annual reports
- Data dashboards
- Prescriber report cards

- Statewide statistics
- Lost/stolen prescription information
- Drug trend reports
- Geomapping of prescription data
- Evaluation Reports for Public, Legislature, etc.

Other types of reports:

Opioid Dashboard link:

2019

PDMP Budget and Staffing

Source(s) of Funding

- State general fund
- Licensing fee
- Controlled substance registration fee
- Regulatory board fund
- Agreed settlement

- BJA grant
- CDC grant
- SAMHSA grant
- CMS grant
- NASCSA grant

- Other funding

Staff Category and Number of FTEs

Total Staff: 0.00

of employees - Operational:

of employees - Technical:

of employees - Analytical/Epidemiological:

of employees - Other:

Policies and Procedures

Key PDMP Dates

Legislation enacted: 1978 PDMP operational: 1979
Initial user access: On-line access: 07-01-2012 Electronic reporting: 2006

Relevant Statutes and Rules

Statute website: <http://www.health.ri.gov/regulations/?parm=Pharmacy>
Statute citation: RI Gen Laws §21-28-3.18
Regulation citation: RI Code Regs 31-2-1 §§1.0 to 4.0
Dr shopper statute: RI Gen. Laws § 21-28-4.05
Pill mill statute:
Pain clinic statute:
Disclosure statute: RI Gen Laws §21-28-3.32
Opioid guidelines:

Miscellaneous Capabilities and Policies

Data collection frequency: one business day Zero-reporting Zero-reporting frequency:

<input type="checkbox"/> Mandatory E-Prescribing (EPCS)	<input type="checkbox"/> Ability to identify prescriber specialty
<input checked="" type="checkbox"/> Payment method captured	<input type="checkbox"/> Ability for users to set thresholds for alert notices
<input type="checkbox"/> Patient ID required to be presented to dispenser	<input type="checkbox"/> Ability for users to do user-led alert notices
<input checked="" type="checkbox"/> Patient ID captured	<input type="checkbox"/> Unsolicited alerts to practitioners not enrolled in PDMP
<input type="checkbox"/> ID of person (other than patient) dropping off capture	<input type="checkbox"/> Ability to search for multiple patients in one query
<input type="checkbox"/> ID of person (other than patient) picking up capture	Maximum number of patients in one query:
<input type="checkbox"/> Mandated use of advisory group	<input type="checkbox"/> Supervisor review/audit of delegate accounts
<input type="checkbox"/> ICD-10 Codes Collected	Number of delegates allowed:
<input type="checkbox"/> Deceased Patient Field	<input checked="" type="checkbox"/> Ability to de-identify data
<input type="checkbox"/> HIPAA Covered Entity	<input checked="" type="checkbox"/> Authority to release de-identified data
<input type="checkbox"/> Certified as CMS Specialized Registry	<input checked="" type="checkbox"/> Authority to release for epidemiological or educational purposes
<input type="checkbox"/> User-friendly web interface	<input checked="" type="checkbox"/> Engaged in release for epidemiological or educational purposes
<input type="checkbox"/> Data analysis software	<input type="checkbox"/> Identifiable Data to State Health Department
<input type="checkbox"/> Online user guides/educational materials	<input type="checkbox"/> Identifiable Data to local Health Department

Patient consent required before data release
 Required notification to patients of Query
Patient Breach Notification Method:
Patient Breach Notification Method Other:
 PDMP Effectiveness Study

Frequency unsolicited alerts/reports generated:
Delivery method for unsolicited alerts/reports:

<input type="checkbox"/> Patient Notification of Breach
<input type="checkbox"/> Patient Breach Notification Written

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: 5 years

Record retention details:

De-Identified data retention details:

PDMP User Training

Training website:

Available Training

- | | |
|---|---|
| <input type="checkbox"/> Prescriber | <input type="checkbox"/> Attorney General |
| <input type="checkbox"/> Dispenser | <input type="checkbox"/> Patient |
| <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Regulatory Board | |

Training Required Before PDMP Use

- | | |
|---|---|
| <input type="checkbox"/> Prescriber | <input type="checkbox"/> Attorney General |
| <input type="checkbox"/> Dispenser | <input type="checkbox"/> Patient |
| <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Regulatory Board | <input type="checkbox"/> Other |
-

PDMP Accounts

- Automatic enrollment with license renewal or application

Enrollment method:

Prescriber account criteria: To register, must have a State license number, DEA number and Drivers license number

Dispenser account criteria:

Regulatory Board account criteria:

Law Enforcement account criteria:

Law Enforcement Requirements

- | | |
|---|--|
| <input type="checkbox"/> Active investigation | <input type="checkbox"/> Probable cause |
| <input checked="" type="checkbox"/> Subpoena | <input checked="" type="checkbox"/> Search warrant |
| <input type="checkbox"/> Court order/approval | <input type="checkbox"/> Proper need/upon request |

Other:

Law Enforcement Access Methods

- On-line/web portal
 Written request

Other method:

We provide reports to law enforcement permitted to receive by statute upon request and with a authorization form completed by the law enforcement agency.

Criteria to Query PDMP

Minimum data elements:

Partial data elements:

Optional data elements:

Patient access to query list details:

Requirements for patients to get own report:

Data Monitored or Accessible

- Schedule II controlled substances
- Schedule III controlled substances
- Schedule IV controlled substances
- Schedule V controlled substances

- Authority to monitor other substances
- Removed from monitoring

Drug-related Arrests

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

Drug-related Convictions

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

Child Welfare Case Information

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

Criminal Court Case Information

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

Drug Court Case Information

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

Medical Marijuana Dispensings

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

Naloxone/Narcan Administrations

- Data on PDMP Report Data Collectors: [Health Department](#)
- Monitor Trends/Inform Policy Data Reporters: [Hospitals, Emergency Medical Services](#)
- Reciprocity Data Location:

Naloxone/Narcan Dispensings

- Data on PDMP Report Data Collectors: [PDMP](#)
- Monitor Trends/Inform Policy Data Reporters: [Pharmacies](#)
- Reciprocity Data Location:

Data Monitored or Accessible (cont'd)

Pharmaceutical Manufacturers/Distributors Sales

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

Sales data access method:

Frequency of sales data upload:

Sales data elements available:

Overdoses - Fatal Information

- Data on PDMP Report Data Collectors:
 Monitor Trends/Inform Policy Data Reporters: [Health Departments, Medical Examiners/Coroners Offices](#)
 Reciprocity Data Location:

Overdoses - Non-fatal Information

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

Other Information

- Description:
 Data on PDMP Report Data Collectors:
 Monitor Trends/Inform Policy Data Reporters:
 Reciprocity Data Location:

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 4-2/2011
- ASAP 4-2a/2016

Data Transmission Methods Allowed

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

Required Data Transmitters

- Pharmacy in-state
- Pharmacy in-state/mail order transmitters
- Pharmacy out-state/mail order
- Pharmacy out-state/other
- Dispensing doctor
- Veterinarian
- Long-term Care Facility Pharmacy
- Correctional Facility Pharmacy
- Department of Defense
- Veterans Administration
- Indian Health Services
- Tribal Pharmacy

Other:

Data Collection, Storage, Generation and Access

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

Interstate Data Sharing

Method	Jurisdictions Engaged
<input checked="" type="checkbox"/> PMPi Hub	AK, CT, DE, DC, ID, IN, KS, ME, MA, MN, MS, NH, NJ, NY, OH, SC, SD, VT, VA, WV
<input checked="" type="checkbox"/> RxCheck Hub	SD
<input type="checkbox"/> HIE method	

Data Integration

Method	Paid By	Cost Model	# of Integrations
<input checked="" type="checkbox"/> via Health Information Exchange			
<input checked="" type="checkbox"/> via Electronic Health Record			
<input checked="" type="checkbox"/> via Pharmacy Dispensing System			
Other:			
<input type="checkbox"/> Integrations through PMPi Hub		Clinicians % Integrated:	
<input type="checkbox"/> Integrations through RxCheck Hub		Pharmacies % Integrated:	
<input type="checkbox"/> Integrations through Other Hub			

Patient Matching

- Exact match
- Probabilistic match
- Referential match
- Deterministic match
- Manual match
- Other match method
- Access to patient matching algorithms
- Matching data elements:
- Matching metrics available:
- Internal matching barriers:
- Interstate matching barriers:

Requestors and Reports Authorized to Generate

	Requestor Type	Solicited Reports		Unsolicited Reports	
		In-State	Out-of-State	In-State	Out-of-State
Healthcare	Prescriber	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Dispenser/Business (i.e., pharmacy)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Dispenser/Person (i.e., pharmacist)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Midlevel - Physician Assistant	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Midlevel - Nurse Practitioner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Prescriber Delegate (licensed)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Dispenser Delegate (licensed)	<input checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Medical Residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Drug Treatment Provider	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regulatory	Licensing/Regulatory Board	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	State Health Department	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Peer Review Committee	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	Law Enforcement - Federal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Law Enforcement - State	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Law Enforcement - Local	<input checked="" type="checkbox"/>	<input 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"/>
Public and Private Insurers	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"/>
Other	Researchers	<input checked="" type="checkbox"/>	<input 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"/>
	Vendor, agent, contract, or designee	<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"/>	<input type="checkbox"/>

Requestors and Reports Being Generated

	Requestor Type	Solicited Reports		Unsolicited Reports	
		In-State	Out-of-State	In-State	Out-of-State
Healthcare	Prescriber	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Dispenser/Business (i.e., pharmacy)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Dispenser/Person (i.e., pharmacist)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Midlevel - Physician Assistant	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Midlevel - Nurse Practitioner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Prescriber Delegate (licensed)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Dispenser Delegate (licensed)	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Drug Treatment Provider	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Regulatory	Licensing/Regulatory Board	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
State Health Department		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Peer Review Committee		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	Law Enforcement - Federal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	Law Enforcement - Local	<input type="checkbox"/>	<input 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"/>
Public and Private Insurers	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"/>
Other	Researchers	<input type="checkbox"/>	<input 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"/>