



Ohio PDMP AWARE

User Support Manual



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# 1 What Is a Requestor?

A requestor is a PMP AWA<sub>R</sub>x<sub>E</sub> account type that is typically used to review a patient’s prescription history. A requestor’s primary task within the application is to determine if a patient should be given or dispensed a prescription based on their prescription history. Requestors are the strongest line of defense to prevent prescription drug abuse. Physicians and pharmacists are the most common type of requestor, however, there are a myriad of roles that can be classified as a requestor, including those of Law Enforcement. A complete list of available roles that fall into the requestor category are as follows:

## Healthcare Professionals

- Dentist
- Nurse Practitioner / Clinical Nurse Specialist
- Optometrist
- Out of State Pharmacist
- Pharmacist
- Pharmacist's Delegate - Unlicensed
- Physician (MD, DO)
- Physician Assistant
- Podiatrist (DPM)
- Prescriber Delegate - Licensed
- Prescriber Delegate - Unlicensed
- Prescriber without DEA
- Veterinarian

## Agency Administration

- Agency Admin
- Drug Court Delegate
- Drug Court Judge
- Drug Court Supervisor

## Law Enforcement

- Corrections
- Probation

## Other

- Benefit Plan Manager
- Board of Pharmacy Investigator
- State Medicaid Program
- Workers' Compensation

# 2 Registration

PMP AWA<sub>R</sub>x<sub>E</sub> requires that every individual register as a separate user, using their email address as their username within the system. A user can register as a delegate, a role which is designed to allow the user to generate reports on the behalf of another, current user. An example of a delegate role would be a nurse at a small doctor’s office. The nurse would act as a delegate to the physician to create Patient Rx reports for the patients that the physician would be helping that day. All queries run by the delegate will be attributed to the prescriber for whom they run the report.

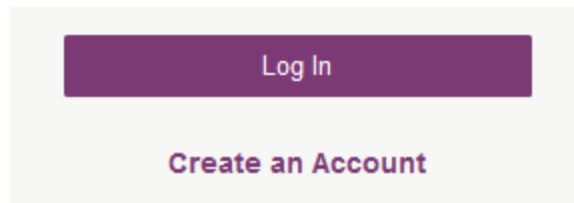
Please note that if you had an account with the previous system, you may already have an account in PMP AWA<sub>R</sub>x<sub>E</sub>. Please attempt to access your account by following the [Reset Password](#) instructions located in this guide before attempting to create a new account. Please utilize the email address associated with your previous account.

The registration process is comprised of three screens: the account settings screen, the role selection screen, and the demographics screen. All three screens must be filled out before the user can successfully submit their registration for processing.

Requestor roles may also require the upload of a copy of a current government-issued photo ID, such as a Driver's License or a Passport, or notarized validation documents. If required, this documentation must be submitted prior to the user account being approved. The user can submit digital copies through PMP AWARxE after completing the registration screens.

## 2.1 Registration Process

1. To request a new account in PMP AWARxE, the user must first load the login screen for the application. The login screen is located at <https://ohio.pmpaware.net/login>
2. Once at the login screen, the user must click the "Create an Account" option to begin the process.



3. The next screen requires the user to enter their current, valid email address and select a password. The password must be entered a second time for validation.
  - a. The password must contain at least 8 characters, including 1 capital letter and 1 special character (such as !,@,#,\$)
  - b. A Registration process tutorial is located to the top right of the screen.

### Registration Process

#### Create an Account

[Registration Process Tutorial](#)



Get Adobe Acrobat Reader

Email

Password

Password Confirmation

Save and Continue

4. After the email and desired password have been entered, the user must click the "Save and Continue" button.
5. The second step is the role selection screen. The user can expand the role categories to select the role that fits their profession.

- a. If you do not see an applicable role for your profession, the State Administrator has not configured a role of that type and potentially may not allow users in that profession access to PMP AWARxE.

## Registration Process

### Select your User Roles

---

Healthcare Professional

Law Enforcement

Other

Save and Continue

## Registration Process

### Select your User Roles

---

#### **– Healthcare Professional**

- Nurse Practitioner / Clinical Nurse Specialist
- Midwife with Prescriptive Authority
- Physician Assistant
- Podiatrist (DPM)
- Optometrist
- Veterinarian
- Medical Intern
- Medical Resident
- Military Prescriber
- Pharmacy Technician
- Prescriber Delegate - Unlicensed
- Pharmacist in Charge
- Pharmacist
- Physician (MD, DO)
- Dentist
- Dispensing Physician
- Prescriber without DEA
- Pharmacist's Delegate - Unlicensed

#### **+ Law Enforcement**

#### **+ Other**

Save and Continue

6. After the role has been selected, the user must click the “Save and Continue” button.
7. The final screen is the demographics screen. Here the user must enter their name, date of birth, employer information, and other information as configured by the State Administrator.
  - a. Required fields are marked with a red asterisk.
  - b. Please enter all active DEA numbers, if applicable.



## Registration Process

### Create an Account

Registration Process Tutorial



Get Adobe Acrobat Reader

All fields with an asterisk (\*) are required.

#### Personal

DEA Number(s) \*

 + Add

DEA Numbers Added

First Name \*

Middle Name

Last Name \*

Date of Birth \*

Primary Contact Phone

#### Employer

DEA Number(s)

 + Add

DEA Numbers Added

National Provider ID

 + Add

National Provider IDs Added

Name \*

Address \*

Address Line 2

City \*

State \*

Zip Code \*

Phone \*

Fax

Submit Your Registration

- After all information has been entered into the form, the user must click the "Submit Your Registration" button to complete the process.

9. The user will then be taken to a landing page notifying them that their account is either pending approval, or incomplete and requires further action.
  - a. Users will also be notified that a link to verify their email address has been sent.
  - b. If your registration is “Incomplete,” please see the [Validation Documents](#) section.

The screenshot shows a user dashboard for 'Doctor Jordan'. At the top, there is a navigation bar with a 'Menu' icon and the user's name. Below the navigation bar, the breadcrumb 'Home > Dashboard' is visible. On the right side, there is a logo for the 'STATE DEPARTMENT OF HEALTH' and a note 'Powered by NarxCare™'. A green success message box states: 'Success: A link to verify your email address has been sent.' with a 'DISMISS' button. Below this, a red warning banner reads 'Your Registration is Not Complete'. Underneath, there are links for 'Registration Process Tutorial' and 'Get Adobe Acrobat Reader'. The main content area is titled 'Welcome' and contains a paragraph: 'Based on the User Roles you've chosen, you may be required to submit additional documentation. You will receive an email with instructions and the necessary forms to be submitted. Once all validation documents are met, your registration will be reviewed for approval. Watch your email or log in for status updates.' Below this is a section titled 'Your User Roles' with a table:

Healthcare Professional	Validation Documents Required	Documentation Received
Physician (MD, DO)	Requestor_Notary_Form.pdf	<b>Fill out the required form and upload it</b>

Below the table is a section titled 'Upload Requestor Notary Form' with a sub-section for 'Physician (MD, DO)'. It features a dashed border box containing a file upload icon and a '+ Add File...' button.

- c. If your account is “Pending Approval,” it is complete and is awaiting approval by the State Administrator.

The screenshot shows a user dashboard for 'Doctor Jordan'. At the top, there is a navigation bar with a 'Menu' icon and the user's name. Below the navigation bar, the breadcrumb 'Home > Dashboard' is visible. On the right side, there is a logo for the 'STATE DEPARTMENT OF HEALTH' and a note 'Powered by NarxCare™'. A red warning banner reads 'Your Account is Pending Approval'. Underneath, there are links for 'Registration Process Tutorial' and 'Get Adobe Acrobat Reader'. The main content area is titled 'Welcome' and contains a paragraph: 'Based on the User Roles you've chosen, you may be required to submit additional documentation. You will receive an email with instructions and the necessary forms to be submitted. Once all validation documents are met, your registration will be reviewed for approval. Watch your email or log in for status updates.' Below this is a section titled 'Your User Roles' with a table:

Healthcare Professional	Validation Documents Required
Physician (MD, DO)	None Required

## 2.2 Registering as a Delegate

Registering as a delegate is virtually identical to registering as any of the other healthcare professional roles. The user would select one of the delegate roles (e.g. *Prescriber Delegate – Unlicensed* or *Pharmacist Delegate – Unlicensed*) and enter any required information on the demographics screen.

The final section of the demographics screen requires the delegate to enter their supervisor's email address. **The supervisor must already have a registered account with the PMP AWAR<sub>x</sub>E.** Delegates may enter more than one supervisor. When adding a supervisor, a delegate will want to ensure that they enter the supervisor's email address correctly and that they are using a valid email address.

### Delegate

---

I am a delegate for the following people... \*

Email

Add

## 2.3 Email Verification


1. After the user submits their registration, PMP AWAR<sub>x</sub>E sends an email to the supplied email address asking for verification of an active email address.
2. The user must click the link within the email to verify their email address.
  - a. The link contained within the email is only valid for 20 minutes. In the event the time has expired, clicking the link will result in a new email verification notification being sent to the user. The user must click on the link in the new email to verify their email address.
3. The user is taken to a screen displaying a message that their email address has been validated.


## 2.4 Validation Documents

1. If a State Administrator requires further validation for a role the user registered for, the user will receive an email with instructions the State Administrator has provided and the necessary forms to fill out and complete.
2. The user completes the required form(s) in accordance with the instructions.
3. The user must then submit the form(s) to the PMP AWAR<sub>x</sub>E system by two methods (as configured by the State Administrator)
  - a. The user logs into the PMP AWAR<sub>x</sub>E using their email address and password used to request an account.
    - i. The user is presented with a file upload screen.


Menu Doctor Jordan ▾

Home > Dashboard



Powered by  NaryCare™

**Your Registration is Not Complete**

[Registration Process Tutorial](#)  [Get Adobe Acrobat Reader](#)

## Welcome


Based on the User Roles you've chosen, you may be required to submit additional documentation. You will receive an email with instructions and the necessary forms to be submitted. Once all validation documents are met, your registration will be reviewed for approval. Watch your email or log in for status updates.

### Your User Roles

Healthcare Professional	Validation Documents Required	Documentation Received
Physician (MD, DO)	Requestor_Notary_Form.pdf	<b>Fill out the required form and upload it</b>

### Upload Requestor Notary Form


**Physician (MD, DO)**




- ii. The user clicks “add file” and selects the file for upload. No further action is needed. The user will receive an email notifying them that an update has been made to their account. Once the validation document(s) are uploaded, no further action is needed by the user.


Menu Doctor Jordan ▾

Home > Dashboard



Powered by  NaryCare™

**Your Registration is Not Complete**

[Registration Process Tutorial](#)  [Get Adobe Acrobat Reader](#)

## Welcome


Based on the User Roles you've chosen, you may be required to submit additional documentation. You will receive an email with instructions and the necessary forms to be submitted. Once all validation documents are met, your registration will be reviewed for approval. Watch your email or log in for status updates.

### Your User Roles

Healthcare Professional	Validation Documents Required	Documentation Received
Physician (MD, DO)	Requestor_Notary_Form.pdf	<b>Fill out the required form and upload it</b>


### Upload Requestor Notary Form

**Physician (MD, DO)**



**Requestor\_Notary\_Form.pdf**, 149.78 KB

Uploaded less than 1 second ago



- b. The user mails the forms to the state office.

## 2.5 Account Approved

1. After the State Administrator has determined that all requirements have been met for the user account, the account can be approved.
2. The user receives an email stating that their account has been approved and is now active.
3. The user can then log into PMP AWA<sub>R</sub>x<sub>E</sub> using the email address and password supplied during the account creation process. If the user no longer has the password, it can be reset by navigating to: [https://ohio.pmpaware.net/identity/forgot\\_password](https://ohio.pmpaware.net/identity/forgot_password)

## 3 Requestor Dashboard

The Requestor Dashboard is the first screen users see once logged in with an approved account. It provides a quick summary of pertinent items within PMP AWA<sub>R</sub>x<sub>E</sub>, including State Administrator announcements, the user's recent patient searches, patient alerts, and their delegate's/supervisor's status. The Dashboard can be accessed at any time by clicking **Menu > Dashboard** (Under "Home").

### My Dashboard

#### — Patient Alerts

**PATIENT ALERTS**  
No Patient Alerts Received

#### — Recent Requests

**RECENT REQUESTS**

Patient Full Name	DOB	Status	Request Date	Delegate
Adam Smith	01/01/1900	Verified	01/01/2017 2:58PM	Test Name
Adam Smith	01/01/1900	Verified	01/01/2017 2:58PM	Test Name
Adam Smith	01/01/1900	Verified	01/01/2017 2:58PM	Test Name
Adam Smith	01/01/1900	Verified	01/01/2017 2:58PM	Test Name
Adam Smith	01/01/1900	Verified	01/01/2017 2:58PM	Test Name

[View Requests History](#)

#### — Delegates

**DELEGATES**

Delegate Name	Status	Request Date
Adam Smith	Verified	01/01/2017 2:58PM
Adam Smith	Verified	01/01/2017 2:58PM
Adam Smith	Verified	01/01/2017 2:58PM
Adam Smith	Verified	01/01/2017 2:58PM
Adam Smith	Verified	01/01/2017 2:58PM

#### PMP Announcements

01/01/2017  
Lorem ipsum dolor sit amet, asd sdfasdf  
dffconsectetur adipiscing elit,

[View all announcements](#)

#### Quick Links

[State Board of Medicine](#)  
[Sample Link](#)  
[Sample Link](#)  
[Sample Link](#)

### 3.1 Patient Alerts

This section shows the most recent patient alerts. New alerts, ones that have not been viewed, are **bold** and have the word “**NEW**” next to them. Clicking the PDF Icon will download the letter associated with the alert. Clicking the patient’s name will take the user immediately to the report normally found under **RxSearch > Patient Request**. **NOTE:** This section is user role dependent, meaning that certain roles will be unable to view this section.

### 3.2 Recent Requests

This section shows the last few patient searches that were performed by the user or by one of the user’s delegates. Clicking the patient name will take the user to the patient report. **NOTE:** The report seen here is a historical report. It is the data that was viewed when the report was initially run. For instructions on performing patient Rx history searches, see section [Creating a Patient Rx Request](#).

### 3.3 Delegates/Supervisors

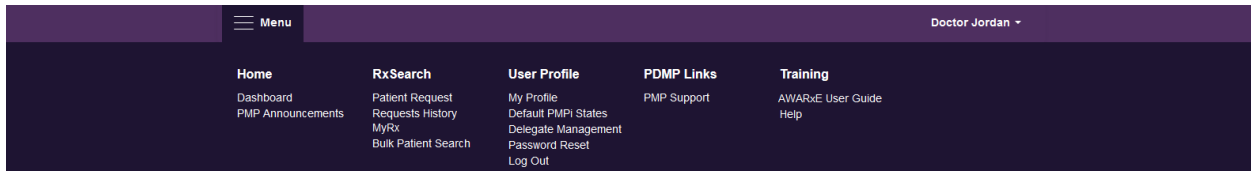
This section shows the user’s delegates or supervisors depending on the user’s role. A supervisor can quickly change a delegate’s status from the dashboard by clicking the delegate’s name. They will be taken to the Delegate Management screen where they can approve, reject, or remove a delegate from their profile. For additional information regarding delegate management, see the [Delegate Management](#) section.

### 3.4 Announcements and Quick Links

State Administrators can configure Announcements to be displayed to users in this section. The quick view on the right shows only the first few lines of text, but clicking on the **Announcements** button will display the full announcement text. The announcements can be configured as role specific meaning that a user whose role is physician can have an announcement whereas delegate user may not have the same announcement viewable under their profile.

State Administrators can also configure Quick Links to webpages outside of PMP AWA<sub>R</sub>x<sub>E</sub>.

## 4 RxSearch

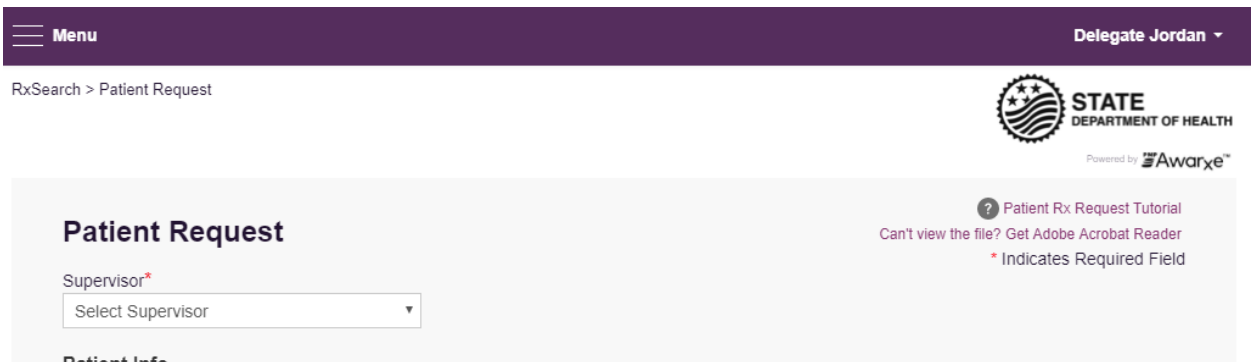


Depending on the settings the State Administrator has enabled for the portal in general and the specific roles types, there may be different options available. The screenshot above and the descriptions that follow in this section are all inclusive. If an option is not available, then it has not been enabled by the State Administrator.

### 4.1 Creating a Patient Request

The Patient Request is a report that displays the previous prescription drug activity for a specific patient.

1. A user must log into PMP AWARxE and navigate to **Menu > RxSearch > Patient Request**. If needed, there is a tutorial located toward the top right of the screen.
2. If the user is a delegate, then they must select a supervisor from the dropdown at the top of the screen. If they have no available supervisors, then they must contact their supervisor to approve their account, add a supervisor under My Profile if available for editing (see [My Profile](#) for further instructions), or contact the State Administrator.



3. The screen displays search fields to lookup a patient. All fields marked with a red asterisk (\*) are required. At a minimum, the user must enter a first and last name and date of birth for the patient. Start and end dates for prescriptions are also required.

# Patient Request

 Patient Rx Request Tutorial

Can't view the file? Get Adobe Acrobat Reader

\* Indicates Required Field

## Patient Info

First Name\*

Partial Spelling

Last Name\*

Partial Spelling

Date of Birth\*

Phone Number

## Prescription Fill Dates

Prescription dates have to be within the last 3 years.

From\*

To\*

## Patient Location (Optional)

The search accuracy can be improved by including the address.

Street Address

City

State

Zip

## PMP Interconnect Search (Optional)

To search in other states as well as your home state for patient information, select the states you wish to include in your search.

Select All

**A**  Alabama

Alaska

Arizona

**C**  California

Colorado

Connecticut

**D**  Delaware

**F**  Florida

**G**  Georgia

**H**  Hawaii

**I**  Idaho

Illinois

Indiana

Iowa

**K**  Kansas

Kentucky

**L**  Louisiana

**M**  Maine

Maryland

Massachusetts

Michigan

Minnesota

Mississippi

**N**  Nebraska

Nevada

New Hampshire

New Jersey

New Mexico

New York

North Carolina  North Dakota

Search



- a. Partial Spelling – By clicking the *Partial Spelling* boxes for either first or last name, users have the option to use only part of a patient’s name to perform a search. This can be very helpful when searching hyphenated names or names that are often abbreviated such as “Will” vs. “William”.
  - b. At least three letters must be included in order to employ *Partial Spelling*.
4. If the user requires information from other states, the user can select the desired states from the list of available PMPi states.
  - a. If a state is not available within the PMPi list, then data sharing is not currently available with that state.
  - b. **NOTE:** Only an exact name match will return results from interstate searches. There will not be a multiple patient list displayed for patients who do not have an exact name match.
5. The user clicks the search button to begin the search.
6. When a single patient has been identified, results are returned to the screen.
7. If the search could not determine a single patient match, the user will receive a message warning of multiple patient matches. The patient records that correspond with the patient can all be selected for inclusion in the report see the [Multiple Patients Identified](#) and [Partial Search Results](#) sections for more information.

#### 4.1.1 Viewing the Patient Rx Request

1. The Patient Rx Request report screen is comprised of four main sections: Patient Information, Prescriptions, Prescribers, and Dispensers.



### Patient Report [Refine Search](#)

Report Prepared: 07/06/2017 07:15PM

Date Range: 07/12/2016 - 07/12/2017



— Alice Testpatient

#### Linked Records

Name	DOB	ID	Gender	Address
Patient Name	01/01/1900	1	Female	832 Not Real Patient Driv Wichita, KS 67205
Patient Name	01/01/1900	2	Female	832 Not Real Patient Driv Wichita, KS 67205
Patient Name	01/01/1900	3	Female	832 Not Real Patient Driv Wichita, KS 67205

#### Report Criteria

First Name	Last Name	DOB
Patient Name	Patient Name	01/01/1900

— Prescriptions

#### Summary

Total Prescriptions: 4  
 Prescribers: 4  
 Pharmacies: 3  
 Private Pay: 2  
 Active Daily MME: 0.0

Filled	ID	Written	Drug	Qty	Days	Prescriber	RX #	Pharmacy*	Refill	MME/D	Pynt Type	PMP
06/18/2017	120	06/18/2017	Tramadol HCL 50 MG Tablet	120	30	Ge Ben	1234	Walmart (4567)	0	20.00	Comm Ins	OH
06/18/2017	120	06/18/2017	Tramadol HCL 50 MG Tablet	120	30	Ge Ben	234234	Walmart (3123)	0	20.00	Comm Ins	OH
06/18/2017	120	06/18/2017	Tramadol HCL 50 MG Tablet	120	30	Ge Ben	234234	Walmart (1234)	0	20.00	Private Pay	OH
06/18/2017	120	06/18/2017	Tramadol HCL 50 MG Tablet	120	30	Ge Ben	345345	Walmart (4567)	0	20.00	Private Pay	OH

\* Pharmacy is created usign a combination of pharmcy name adn the last four digits of the pharmacy license number.

Per CDC guidance, the conversion factors and associated daily morphine milligram equivalents for drugs prescribed as part of medication-assisted treatment for opioid use disorder should not be used to benchmar against dosage thresholds meant for opioids prescribed for pain.

+ Prescribers

— Dispensers

#### Dispensers

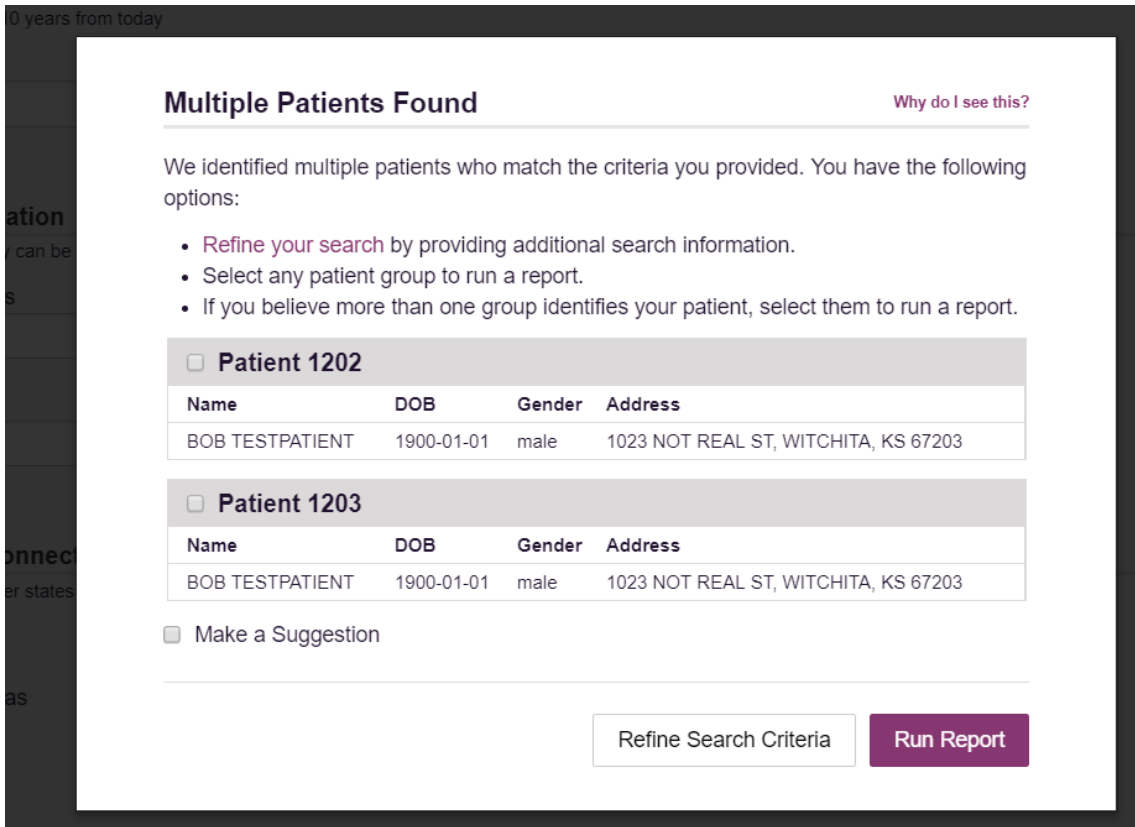
Pharmacy	Address	City	State	Zipcode	Phone
Walmart	5297 Hazy Forest Lane	Brooklyn Heights	OH	45508-8557	675-780-9898
Walmart	5297 Hazy Forest Lane	Brooklyn Heights	OH	45508-8557	
Walmart	5297 Hazy Forest Lane	Brooklyn Heights	OH	45508-8557	
Walmart	5297 Hazy Forest Lane	Brooklyn Heights	OH	45508-8557	

- At the top of the request, the report displays the date the request was run and the date range used to create the request.

3. If configured for the account type by the State Administrator, buttons may also be present that will allow the user to save the report as a PDF document or to save the report as a CSV data file.
4. The Patient Information section displays the search criteria used to search for the patient. It will also display all known patient names, birthdates, and addresses that have been matched to the patient the user searched.
  - a. The table can represent instances of a patient with multiple addresses, misspellings of names, etc.
  - b. The table also lists an ID number that will match a patient's address information to a prescription from the prescription table.
5. The Prescriptions table lists information related to each prescription issued to the patient within the search period entered.
  - a. The Patient ID column is used to provide a link between a specific prescription and the patient name/location information.
6. The Prescribers table displays the information for all prescribers who issued a prescription to the patient within the search period used.
7. The Dispensers table displays the information for all Dispensers who filled a prescription to the patient within the search period used.
8. Each section is collapsible. Users can click on the plus signs next to each section to expand or collapse each section.
9. Each section's tables can be resized to show more or less records. Users can click and drag the bottom of the table with their mouse to resize. A minimum of 2 rows are required to be displayed.
10. Columns in each section can be sorted. Clicking on a column header will allow the results to be sorted in ascending or descending order based on the column selected.
  - a. Column sorting is saved when exporting the request.

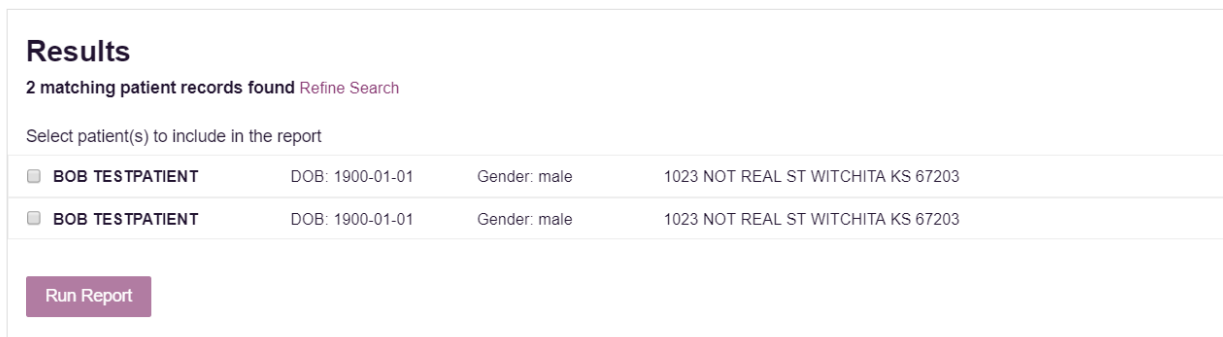
#### 4.1.2 Multiple Patients Identified

1. When submitting a Patient Rx Request, if the entered search criteria cannot identify a single patient, the user receives a message that multiple patients have been identified.
2. The user can refine their search criteria and rerun the report or select one or more of the patient groups identified and run the report.



#### 4.1.3 Partial Search Results

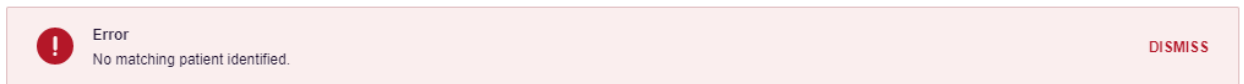
1. When submitting a Patient Rx Request using partial names, if the entered search criteria cannot identify a single patient record, the user receives a message that multiple patients have been identified.
2. The user can refine their search criteria and rerun the report or select one or more of the patient records identified and run the report.



#### 4.1.4 No Results Found

1. If a user searches for a patient and no matching patient can be found, a message is displayed on the screen informing the user that the patient could not be found.
2. If a match for the patient is found, but there are no prescriptions that match the date range entered, the user will receive the below message.

3. The user can modify their search information and resubmit their request.
  - a. The user should verify all information entered on the request (ex. Incorrect birthdate, name misspelling, etc.)
  - b. The user can attempt a partial search if a partial search was not originally performed and is available for selection
  - c. The user can enter additional demographic information like a zip code to perform a fuzzy search.



## 4.2 Request History

1. To view a Patient Rx Request that was previously created, navigate to **Menu > RxSearch > Requests History**.
2. A list of Patient Rx Requests made in the previous 30 days are displayed.
3. The user can only view Patient Rx Requests they or their delegate(s) have created.
4. The user can select a previous request to view the details of the request in a detail card at the bottom of the screen.
  - a. Search criteria is displayed
  - b. PMPi states used during the search are displayed
  - c. If the user's requests require approval and the request is pending or was denied, the reason is displayed.
5. Click the View button to open the results of that request
  - a. Results of previous requests are not updated with new information. If a user requires updated information for their request, they must generate a new request for the patient. Generating a new Rx Request from a previous request can be quickly be done by clicking the "Refresh" button next to the "View" button. This will take the user back to Patient Request screen with all previously used search parameters already populated.

### 4.3 Bulk Patient Search

The Bulk Patient Search is similar to the normal Patient Request (search). It however allows the entry of multiple patients at once rather than one at a time. Patient names are either entered manually or via an uploaded CSV file. To access Bulk Patient Search, navigate to **Menu > RxSearch > Bulk Patient Search**.

The screen is comprised of two tabs, the Bulk Patient Screen which is the landing page and is where the user can start a new search, and the Bulk Search History tab, used for reviewing the results of a request or viewing previous request results.

#### Manual Entry

1. Enter First Name, Last Name, DOB (and any other state required fields)
2. Click the *Add* button after each entry.

The screenshot shows the 'Bulk Patient Search' interface. At the top, there are two tabs: 'Bulk Patient Search' (active) and 'Bulk Search History'. The page is powered by 'Awarxē'. The main heading is 'Bulk Patient Search'. Below this, a section titled 'How do you want to enter patients?' contains two radio buttons: 'Manual Entry' (selected) and 'File Upload'. A note '\* Indicates Required Field' is present. Under the 'Manual Entry' section, there are four input fields: 'First Name\*', 'Last Name\*', 'Date of Birth\*' (with a placeholder 'MM/DD/YYYY'), and 'Zip Code'. A purple '+ Add' button is located to the right of the 'Zip Code' field.

#### File Upload

1. Click the radio button for "File Upload"
2. Download the Sample CSV by clicking "View Sample File"
3. Fill out the required fields and upload the file.
4. Click Validate Format to download a validation report and ensure all records were entered correctly. Null values in the Errors columns indicate acceptable data. If a search is submitted with an invalid file, this will result in a validation error for the search. The file must be corrected and the search resubmitted with the corrected file.

### Bulk Patient Search

**How do you want to enter patients?**

Manual Entry  
 File Upload

**File Upload** \* Indicates Required Field

Upload a CSV file that includes patients by first name, last name, and date of birth. [View Sample File](#)

No File Chosen Choose File Clear

Validate Format

Once the user has entered patients for their search either manually or via file upload, the user will then:

1. Create a Group Name for the search. Group name is required. If group name is not selected, the request will result in a validation error for the search.
2. Select additional states for your search if necessary/available.
3. Click *Search*.
  - a. An acknowledgment may be available, and users may be required to acknowledge they have read it if configured by the State Administrator.

A status message will appear.

**Success**

Your Bulk Request validated successfully and is now being processed. Results can be found in Bulk Patient History tab.

DISMISS

4. To obtain the results of the search, click the Bulk Search History tab to the right of the Bulk Patient Search tab.

### Bulk Search History

Select a group name to view reports run in that session.

Bulk Search Name	Number of Patients	Date Requested	Processing	Incomplete	Ready
test group	2	10-14-2017	0	0	2
test group	2	10-14-2017	0	2	0

- d. The Bulk Search History tab will display previous bulk searches. This screen will indicate whether your search results are still processing with a total number of searches still to

be processed. It will provide a total count of patients in your search in the “Number of patients” column. It will indicate a count of patient records it could not find in the “Incomplete” column. It will indicate a count of patent search results available in the “Ready” column.

5. Click the Bulk Search Name (which is a hyperlink) to see the results of the search.
6. Click a patient name within the search results. Details of the patient search will appear at the bottom of the page.

Bulk Patient Search
Bulk Patient History

[Back](#)

Group Name

**test group**

Prescription Fill Dates: 10/14/2015 - 10/14/2017  
 PMP InterConnect States:  
 Report Prepared: 10/14/2017 12:08 AM

**Bulk Patient Summary**  
 Select a patient to view the report

Patient Full Name	DOB	Prescribers	Dispensers	Prescriptions	Supervisor	Status
bob testpatient	01/01/1900	3	2	5		Ready
dave testpatient	01/01/1900	5	4	12		Ready

**bob testpatient**
Refresh
View

Date of Birth: 01/01/1900  
 Location:  
 PMPi States:  
 Reason:  
 Prescription Fill Dates: October 14, 2015 until October 14, 2017

7. Click *View* to see the actual Patient Report, or Click *Refresh* if you are reviewing a previous report and wish to run a current report. For more information on the report results screen, see the [Viewing the Patient Rx Request](#) section.



## 4.4 MyRx

MyRx gives users that have a DEA number associated with their account the ability to run a self-report to see what prescriptions have been filled where they were listed as the prescriber. **NOTE:** This section is only visible if the user has a DEA number associated with their User Profile.

To access MyRx, navigate to **Menu > RxSearch > MyRx**.

The screenshot shows the 'My Rx' search interface. At the top, there is a purple navigation bar with a 'Menu' icon and the text 'Menu'. On the right side of the bar, the user's name 'Doctor Jordan' is displayed with a dropdown arrow. Below the navigation bar, the breadcrumb 'RxSearch > MyRx' is visible on the left, and the 'STATE DEPARTMENT OF HEALTH' logo is on the right, with 'Powered by NarxCare' below it. The main content area is titled 'My Rx' and includes a note '\* Indicates Required Field'. Under the heading 'Prescriptions Written', there are two date input fields labeled 'From\*' and 'To\*', both with a placeholder 'MM/DD/YYYY'. Below this is the 'DEA Numbers' section, which contains two checked checkboxes for 'AD1111119' and 'JC1111119'. The 'Generic Drug Name (Optional)' section has a text input field labeled 'Drug Name'. At the bottom left, there is a purple 'Search' button.

1. Enter the chosen date range for the search.
2. Click the DEA number(s) you want to run a report on.
3. Enter a generic drug name if needed. Click Search.
4. The system will display a report of prescriptions written by the prescriber within the requested date range. The report is available for export via .pdf or .csv if configured by the State Administrator.

RxSearch > MyRx



← Back

## MyRx

Report Prepared: 10/14/2017  
Date Range: 10/13/2016 – 10/13/2017

 Download PDF
  Download CSV

DEA Numbers						
DEA Number	Prescriber Name	Address	City	State	Zip	
JC1111119	JORDAN, DOCTOR	456 MAIN ST	LYNDON	KY	40242	

Prescriptions							
Date Written	DEA (Last 4)	Patient	Year of Birth	Drug Name	Days Supply	Pharmacy	Pharmacy Address
10/11/2017	1119	PATIENT, JOSEPH	1972	HYDROCODON-ACETAMINOPHEN 5-325	30	GENERIC PHARMACY	123 PORTER ST LOUISVILLE KY 40202
10/11/2017	1119	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	30	APPRISS PHARMACY	123 MAIN ST LYNDON KY 40242
10/11/2017	1119	PATIENT, DAVE	1985	HYDROCODON-ACETAMINOPHEN 5-325	30	HEALTHY PHARMACY	123 STOUT ST LOUISVILLE KY 40202
10/11/2017	1119	PATIENT, SALLY	1970	HYDROCODON-ACETAMINOPHEN 5-325	30	ONE PHARMACY	123 HOLSOPPLE LYNDON KY 40242
10/11/2017	1119	PATIENT, MALLORY	1980	HYDROCODON-ACETAMINOPHEN 5-325	30	FIRST PHARMACY	123 1ST ST LYNDON KY 40242
10/11/2017	1119	PATIENT, STEVEN	1975	HYDROCODON-ACETAMINOPHEN 5-325	30	ANOTHER PHARMACY	444 HOP ST LOUISVILLE KY 40211

### 4.5 Patient Alerts

To access Patient Alerts, navigate to **Menu > RxSearch > Patient Alerts**.

This section shows the most recent patient alerts. New alerts, ones that have not been viewed, are **bold** and have the word “**NEW**” next to them. Clicking the PDF Icon will download the letter associated with the alert. Clicking the patient’s name will take the user immediately to the report normally found under **Menu > RxSearch > Patient Request**. **NOTE:** This section is user role dependent, meaning that certain roles will be unable to view this section.

Patient Alerts				
Select a patient to view more information.				
Patient Full Name	DOB	Alert Date	Alert Letter	Delivery Method
Adam Smith	01/01/1900	01/01/1900	<a href="#">Download PDF</a>	Patient Alerts and Email
Adam Smith	01/01/1900	01/01/1900	<a href="#">Download PDF</a>	Patient Alerts and Email
Adam Smith	01/01/1900	01/01/1900	<a href="#">Download PDF</a>	Patient Alerts and Email
Adam Smith	01/01/1900	01/01/1900	<a href="#">Download PDF</a>	Patient Alerts and Email
Adam Smith	01/01/1900	01/01/1900	<a href="#">Download PDF</a>	Patient Alerts and Email

## 5 User Profile Management

The User Profile section allows users to view and edit certain aspects of their PMP AWAR<sub>x</sub>E account.


To Access the User Profile, navigate to **Menu > User Profile > My Profile**.



### 5.1 My Profile

The My Profile section allows the user to view their account demographics such as role, license numbers, employer details, etc.

Users may have the ability to update their email address, Healthcare Specialty, time zone, and supervisor(s) (if a delegate), if configured by the State Administrator.

Updating personal or employer information (including DEA/NPI/NCPDP numbers) must be requested through the State Administrator.

 **Menu** Doctor Jordan ▾

User Profile > My Profile  **STATE**  
DEPARTMENT OF HEALTH  
Powered by  NaryCare™

---

### My Profile

**Profile Info**

Name: Doctor Jordan	Employer DEA(s):
DOB: 01/01/1901	Employer: Generic Clinic
Primary Contact: 5025555555	456 Main St
DEA Number(s): JC1111119	Lyndon, KY 40242
AD1111119	Employer Phone: 5025555555
Professional License #: 000000	Type: MD
	Role: Physician (MD, DO)

**Setting**

Time Zone

UTC ▾

**Save Changes**

## My Profile

### Profile Info

Name: Jordan Doctor  
DOB: 01/01/1901  
Primary Contact: 5025555555  
DEA Number(s):  
Controlled Substance #: 235235246776  
Professional License #: 0239309    Type: ADM

Employer DEA(s):  
Employer: Generic Clinic  
456 Main St  
Lyndon, KY 40242  
Employer Phone: 5025555555  
Role: Physician (MD, DO)

### Specialty

Add a Healthcare Specialty \* [Browse All](#)

★ Designates Primary Specialty

★ Allopathic & Osteopathic Physicians  
Anesthesiology - Pain Medicine

### Setting

Time Zone

### Contact Information

Change email address associated with this profile

Current Email: doctorjordan@clinic.com

New Email Address

Re-enter New Email Address

To update your account:

- 1. Adding Supervisors:** Delegate users may add additional supervisors to their accounts at the bottom of the screen. The delegate must enter their supervisor's email address and click add. If the delegate needs to remove a supervisor, click the "x" button next to the supervisor. Click "Save Changes." A confirmation message will be displayed.

### Supervisors

I am a delegate for the following people... \*

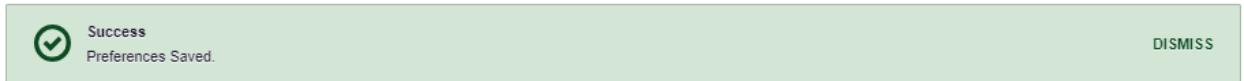
Email

Selected Supervisors

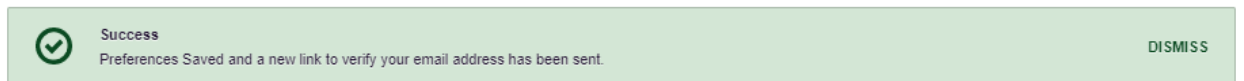
Email: doctorjordan@clinic.com

- 2. Healthcare Specialty:** To add or update the Healthcare Specialty, the user may search for their specialty by typing a few characters into the Healthcare Specialty field or by clicking “Browse All” to locate it.

Select the specialty and it will be added to the account. If the user has multiple specialties, the user may designate their primary specialty by clicking the star icon to the left of the specialty. If the user needs to remove a specialty, click the “x” icon to the right of the specialty. Click “Save Changes.”



- 3. Email Address:** To update the email address on the account, enter the new email address in the “New Email Address” and “Re-enter Email Address” field. Click “Save changes.” Upon saving a confirmation message will be displayed. Please ensure to click the link in the verification email



received to verify the new email address.

## 5.2 Setting Default PMPi states

PMP AWA<sub>R</sub>x<sub>E</sub> is configured to integrate PMPi to expand search capabilities when researching patient Rx history. Users have the ability to select from a list of approved states and can configure states to be selected by default when performing patient Rx searches.

### Default InterConnect PMPs

- Alabama
- Alaska
- California
- Delaware
- Florida
- Kentucky

Update Defaults

1. The user navigates to **Menu > User Profile > Default PMPi States**
2. A listing of available states is displayed.
3. The user checks the boxes next to the states they desire to always be pre-selected when creating a new Patient Rx request.
4. The user clicks “Update Defaults” to save their selections.
5. When the Patient Rx request screen is opened to create a new request, the selected default states will now automatically be checked to include in the search results.
  - a. Users can de-select default states as they choose. Having default states does not lock the state to always be required in patient searches.

### 5.2.1 Using PMPi with a Patient Rx Search

1. When creating a new Patient Rx request, a list of available PMPi states is listed at the bottom of the screen.
2. The user can select as many states as they wish to obtain results from. There is also a “Select All” button present if the user wishes to search all available states.
3. PMP AWAR<sub>x</sub>E will submit the request for the patient to the PMPi systems of the selected states.
4. Results from those states are blended into the final Patient Rx report.
  - a. The report does not separate Rx information from a state by state basis. It incorporates all information from all sources into a single report.
  - b. **NOTE:** Only an exact name match will return results from interstate searches. There will not be a multiple patient pick list displayed for patients who do not have an exact name match.

### 5.3 Delegate Management

For supervisors, delegates associated with the user’s account are displayed in a table found at **Menu > User Profile > Delegate Management**. From this location, the supervisor can approve or reject new delegates, or remove existing delegates from their account.

#### 5.3.1 Approving and Rejecting Delegates

1. When a user registers as a delegate for a supervisor, the supervisor receives an email alerting them that a delegate account is pending their approval.
  - a. If the request is not acted upon, PMP AWAR<sub>x</sub>E will send follow up emails advising that action is still required.
2. The supervisor logs into the PMP AWAR<sub>x</sub>E application (<https://STATE.pmpaware.net/login>) and navigates to **Menu > User Profile > Delegate Management**.
3. From the Delegate management screen, the supervisor can see all delegates associated with their account. New Delegate(s) are identified with the pending symbol in the Delegate Status column.

<b>Delegate Management</b>				
Select a delegate to review details.				
First	Last	Role	Delegate Status	Date Requested
Jordan	Delegate	Prescriber Delegate - Unlicensed	Pending	10/13/2017
Sally	Delegate	Prescriber Delegate - Unlicensed	Approved	10/13/2017

4. The user selects the delegate to view their information in the detail card at the bottom of the screen.

### Delegate Management

Select a delegate to review details.

First	Last	Role	Delegate Status	Date Requested
Jordan	Delegate	Prescriber Delegate - Unlicensed	Pending	10/13/2017
Sally	Delegate	Prescriber Delegate - Unlicensed	Approved	10/13/2017

#### Jordan Delegate

<b>Role:</b> Prescriber Delegate - Unlicensed <b>Phone:</b> 5025555555 <b>Email:</b> delegate@clinic.com (Unverified) <b>Address:</b> 123 Main St Lyndon, KY 40223 <b>Date of Birth:</b> 01/01/1980	Delegate (pending)  Drivers license (invalid)	<b>1 Supervisor</b>  Jordan Doctor (pending) doctorjordan@clinic.com
--	---	---

- To approve or reject the delegate, the supervisor must click the appropriate button above the delegate's information. The delegate's status will be removed if rejected.

#### 5.3.2 Removing Delegates

- If a supervisor decides to remove a delegate from their account, the supervisor navigates to **Menu > User Profile > Delegate Management**.
- The supervisor selects the active delegate from the list displayed.
- The supervisor clicks the "Remove" button in the detail card at the bottom of the screen.
- The delegate will be placed back in pending status. The delegate is not removed from the supervisors list.
  - If a supervisor wants to add the user again at a later date, the supervisor can locate the former delegate in their list and select approve to add the delegate to their account again.
  - If a supervisor wants to completely remove the delegate from their account, the supervisor can select the former delegate and click the "Reject" button. This will remove them from the supervisor's account.

#### 5.4 Password Management

Password management can be handled within PMP AWAR<sub>x</sub>E by the user. The user's password will expire after 90 days. A user can proactively change their password before it expires within the application through their user profile. If a password has expired, or if the user has forgotten the password, they can use "Reset Password" to change their password.

##### 5.4.1 Updating the Current Password

- When a user wants to change their current password, they navigate to their **Menu > User Profile > Password Reset** section.
  - This requires the user to know the current password and be logged into PMP AWAR<sub>x</sub>E.
- The user must then enter their current password and enter a new password twice.
- The new password will take effect once the user has logged out of the application.

## Change Password

Current Password

New Password

New Password Confirmation

Change

### 5.4.2 Resetting a Forgotten Password

1. When a user has forgotten their password or their password has expired, the user should click on the “Reset Password” link located on the log in screen.

**Log In**

Email

Password

[Reset Password](#)

**Log In**

[Create an Account](#)

[Need Help?](#)

**Reset Password**


Please enter the email address registered to your account below.  
If the email address you have provided is valid and registered, a link to reset your password will be sent.

Email

**Request Password Reset**

[Need Help?](#)

2. The user must enter the email address they used to register with the application and click “Request Password Reset.”

 **Success**  
If the email address you have provided is valid and registered, a link to reset your password will be sent.

[DISMISS](#)

3. The user will receive an email containing a link to reset the password as long as the email address was valid and exists on an account.
  - a. The link will only be active for 20 minutes. After the time has expired, the user will need to repeat these steps to generate a new password reset email.



- b. Per our security protocol, PMP AWA<sub>R</sub>x<sub>E</sub> will not confirm the existence of an account. If the user does not receive an email to the email address provided, the below steps should be followed:
    - i. Ensure a valid email address was entered.
    - ii. Check junk, spam, or filtered folders for the message
    - iii. If the email address is a working email address but no email has been received, contact the State Administrators (contact information in Section 7.2, [Administrative Assistance](#)) to request a new password or determine what email address is on the account.
    - iv. Whitelist the below email addresses/domains
      - a. The user should add the following email addresses to the email contacts list
- Or
- b. The user should contact their IT Support to get the following email addresses/domains added as safe senders:

[no-reply-pmpaware@globalnotifications.com](mailto:no-reply-pmpaware@globalnotifications.com)  
[@globalnotifications.com](mailto:@globalnotifications.com)  
[@amazonse.com](mailto:@amazonse.com)

- 4. Once the password reset email is received, the user must click the link in the email to reset their password. The user must enter the new password twice and then save the password.
  - a. The password must contain a capital letter, and a symbol, and must be at least 8 characters. Users cannot reuse any of their last 12 passwords.

## Change Password

---

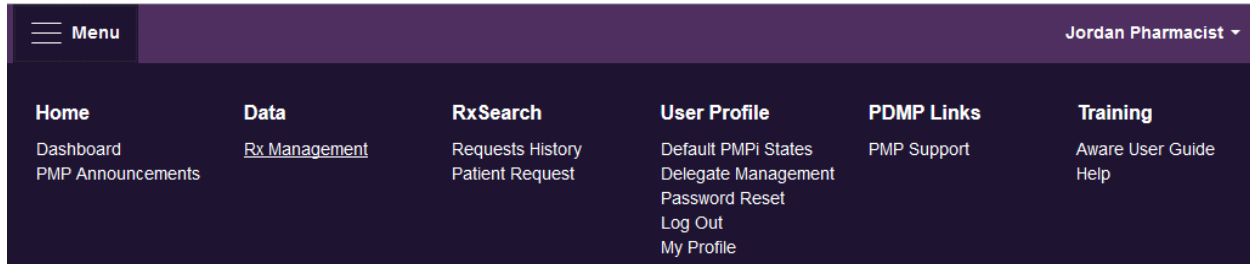
Email

New Password

New Password Confirmation

Change

## 6 Data and Rx Management



The Rx Management section, located under the Data section, allows for management of prescriptions within PMP AWA<sub>R</sub>x<sub>E</sub>. In this section, dispenser users can correct dispensation errors, modify inaccuracies on existing prescriptions (ex. incorrect prescriber information), add new prescriptions, and review prescription history for the pharmacy.

Depending on the settings the State Administrator has enabled for the portal in general and the specific roles types, there may be different options available. The screenshots below and the descriptions that follow in this section are all inclusive. If an option is not available, then it has not been enabled by the State Administrator.

In order to utilize this feature, users must have an Employer Identifier on their account, and must agree that they are responsible for correcting/maintaining prescription information of the employer Identifier for submission to PMP AWA<sub>R</sub>x<sub>E</sub>. This must be done during registration. If the user has already registered and does not have any Pharmacy Identifiers available for selection in the below sections, the user must contact the State Administrator to have the Identifiers added and to agree to the terms of use.

### 6.1 Error Correction

Error correction allows for correction of errors for any prescriptions submitted to PMP AWA<sub>R</sub>x<sub>E</sub> that did not pass validation. This is only applicable to prescriptions submitted via sFTP, file upload, or Realtime submission to PMP Clearinghouse. Any prescriptions submitted via Universal Claim Form cannot be submitted to the PMP AWA<sub>R</sub>x<sub>E</sub> if a validation error is encountered, as the error must be cleared prior to submission.

To begin correcting errors:

### Rx Error List

1. Navigate to **Menu > Rx Management** and click the **Error Correction** tab
2. Click “Advanced options” and select a Pharmacy Identifier from the list
  - i) If there are no identifiers in the list, please contact the State Administrator
3. Enter a prescription number and/or date range if necessary
4. Click “Search”

The user will either be presented with a message “No errors found for your selected employer identifiers,” which means there are no prescriptions needing to be corrected, or the user will be presented with a list of prescriptions with errors needing correction.

If configured by the administrator, the user will be able to export this list into a .pdf or .csv file by clicking either of the icons next to the “Search” button.

### Rx Error List

Displaying 4 of 4

Rx Number	Date Filled	Pharmacy Name	Pharmacy DEA	Pharmacy NCPDP	Errors
78541	10/12/2017	APPRISS PHARMACY	PH1111119		1
78625	10/13/2017	APPRISS PHARMACY	PH1111119		2
98623	10/13/2017	APPRISS PHARMACY	PH1111119		1
98563		APPRISS PHARMACY	PH1111119		1

5. To correct the error, click on the prescription number.
6. The user will be presented with the error correction screen, which will display all fields of the prescription. However, the user may only edit fields containing errors.
  - i) Individual sections (Patient, Pharmacy, Prescriber, Prescription, Drug, Pharmacist, etc.) can be hidden or expanded by clicking the “+” icon to the left of the section name.
  - ii) A count of errors will be listed at the top of the screen, and the error itself will be indicated in red with an error message on the form.

**Rx #78541**

**Patient**

First Name*	Address*	ID Type
TEST	506 W WASHINGTON ST	Driver's License ID
Middle Name	Address Line 2	ID Number
		1234567
Last Name*	City*	Phone Number
PATIENT	LOUISVILLE	5026084567
DOB*	State*	
01/01/1945	Kentucky	
Gender*	Postal Code*	
Male	40202	

**Pharmacy**

Pharmacy Name*	Pharmacy DEA #*
APPRISS PHARMACY	PH1111119
Address*	Pharmacy NPI #
123 MAIN ST	
Address Line 2	Pharmacy NCPDP #
City*	Pharmacy Chain Site ID
LYNDON	
State*	Permit Number
Kentucky	
Postal Code*	Contact Name
40242	
	Contact Phone
	5024444444

**Prescriber**

First Name*	Address One	Prescriber DEA #*
ANOTHER		AM1111119
Middle Name	Address Two	Prescriber XDEA #
Last Name*	City	DEA Suffix
DOCTOR		
Phone Number	State	Prescriber NPI #
5024554555	Select State	
	Postal Code	State License #

**Prescription**


Prescription Number*	Electronic Rx Order #	Payment Type*
78541		Private Pay
Fill Date*	Electronic Rx Reference #	Date Sold
10/12/2017		mm/dd/yyyy
Written Date*	RxNorm Code Type	Rx Transmission Form
10/12/2017		Unknown
Refills*	RxNorm Code	Directions
0		
Authorized Refills*	Rx Serial #	Treatment Type
Authorized refill count value must be present.		
Days Supply*	Rx Serial # Issuer	Diagnosis Code (ICD-10)
10		
Partial Fill	Quantity Prescribed	
No		

**Drug**


NDC Number*	<input type="checkbox"/> Compound	Quantity*	Units*
00406012301		10.0	Each

**Pharmacist**

7. Type in the correct value for the field(s) in error. Once the field(s) are complete, the error(s) will clear.
8. Scroll down to the bottom of the form and click "Submit."
9. You will receive a successful notification and be returned to the error correction list, with prescription cleared from the list.

Powered by  NaryCare™

Error Correction
Rx Maintenance
New Rx
PharmacyRx



**Success**

Success! Rx #78541 was successfully submitted for processing. It may take a few minutes for the record to appear in a patient search.

DISMISS

### Rx Error List

Advanced Options ▾

Search using Advanced Options

Search

Displaying 3 of 3

Rx Number	Date Filled	Pharmacy Name	Pharmacy DEA	Pharmacy NCPDP	Errors
78625	10/13/2017	APPRISS PHARMACY	PH1111119		2
98623	10/13/2017	APPRISS PHARMACY	PH1111119		1
98563		APPRISS PHARMACY	PH1111119		1

## 6.2 Rx Maintenance

Rx Maintenance allows the user to correct inaccurate information on a prescription, for example, incorrect patient or prescriber information. It also allows users to void a prescription if necessary.

### 6.2.1 Correcting Prescriptions

To correct inaccurate information on a prescription:

1. Navigate to **Menu > Rx Management >** and click the **Rx Maintenance** tab
2. Enter the search criteria and click search.
  - i) Select the appropriate Pharmacy Identifier
  - ii) Ensure the fill date range is correct. The default is a month prior to the current date.
  - iii) The user can enter only fill dates and select the Pharmacy Identifier
  - iv) The user can also enter a prescription number or prescriber last name to narrow their search

Error Correction

Rx Maintenance

New Rx

PharmacyRx

## Rx Search

\*Requires at least one Pharmacy Identifier and Rx Fill Dates

### Prescriptions Number

Rx Number

78541

### Prescriber

Last Name

### Pharmacy Identifiers

PH1111119

Search

Clear

### Prescriptions Fill Dates

From \*

09/16/2017

To \*

10/16/2017

- The user will then be presented with the results of their search, which will display the prescription number as well as filled and written dates, the patient's name, and prescriber and pharmacy information. Click the prescription number to proceed.

Error Correction

Rx Maintenance

New Rx

PharmacyRx

powered by  NaryCare

## Rx Search Results

Prescription Number: 78541

Identifier(s): PH1111119

Rx Fill Dates: 09/16/2017-10/16/2017

Displaying 1 entry

Rx Number	Date Filled	Written At	Patient Name	Prescriber	Pharmacy Name	Pharmacy Identifier
78541	2017-10-12	2017-10-12	TEST PATIENT	ANOTHER DOCTOR	APPRISS PHARMACY	PH1111119

- Navigate to the appropriate section of the form to make the correction. For this example we will be navigating to the Prescriber section to correct the prescriber information.

Prescriber

<p>First Name* <input type="text" value="ANOTHER"/></p>	<p>Address One <input type="text"/></p>	<p>Prescriber DEA #* <input type="text" value="AM1111119"/></p>
<p>Middle Name <input type="text"/></p>	<p>Address Two <input type="text"/></p>	<p>Prescriber XDEA # <input type="text"/></p>
<p>Last Name* <input type="text" value="DOCTOR"/></p>	<p>City <input type="text"/></p>	<p>DEA Suffix <input type="text"/></p>
<p>Phone Number <input type="text"/></p>	<p>State <input type="text" value="Select State"/></p>	<p>Prescriber NPI # <input type="text"/></p>
	<p>Postal Code <input type="text"/></p>	<p>State License # <input type="text"/></p>

- Make the correction, then scroll down to the bottom of the form and click "Submit"


Prescriber

<p>First Name* <input type="text" value="DIFFERENT"/></p>	<p>Address One <input type="text"/></p>	<p>Prescriber DEA #* <input type="text" value="BC1111119"/></p>
<p>Middle Name <input type="text"/></p>	<p>Address Two <input type="text"/></p>	<p>Prescriber XDEA # <input type="text"/></p>
<p>Last Name* <input type="text" value="DOCTOR"/></p>	<p>City <input type="text"/></p>	<p>DEA Suffix <input type="text"/></p>
<p>Phone Number <input type="text"/></p>	<p>State <input type="text" value="Select State"/></p>	<p>Prescriber NPI # <input type="text"/></p>
	<p>Postal Code <input type="text"/></p>	<p>State License # <input type="text"/></p>

- The user will receive a successful message indicating the Rx was submitted for processing.

Menu
Jordan Pharmacist ▾

Data > Rx Management > Error Correction



Powered by NarxCare™

Error Correction
Rx Maintenance
New Rx
PharmacyRx

✔

**Success**

Success! Rx was successfully submitted for processing. It may take a few minutes for the record to appear in a patient search.

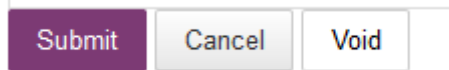
DISMISS



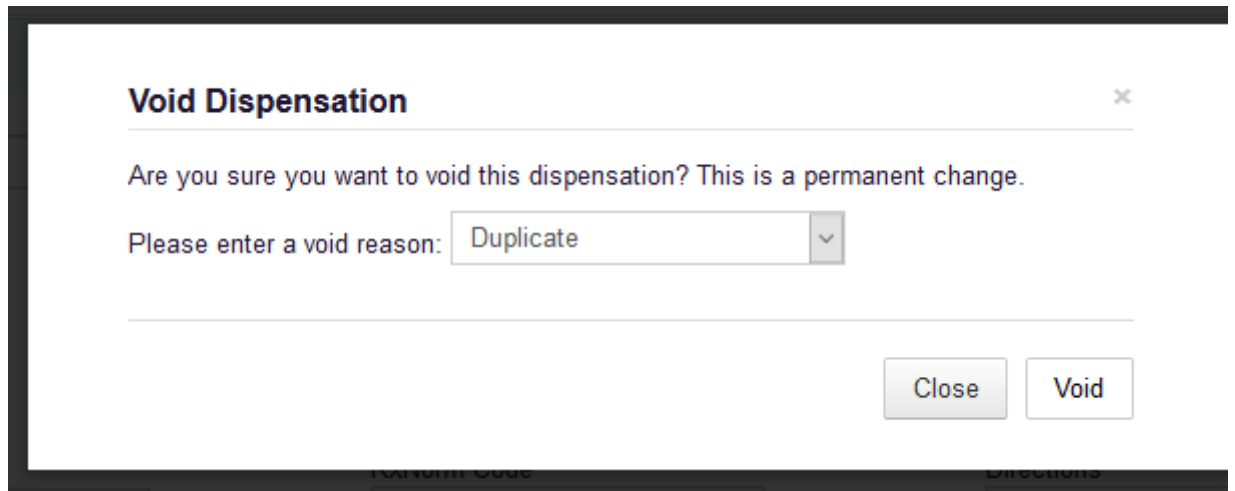
## 6.2.2 Voiding Prescriptions

To void a prescription:

1. Follow the above steps in section 6.2.1, [Correcting Prescriptions](#), to locate the prescription.
2. Scroll down to the bottom of the form and click “Void”



3. The user will need to confirm they wish to void the dispensation, select a void reason, and click submit.
  - i) Voids cannot be undone, in the event the prescription should not have been voided, it will need to be resubmitted.



## 6.3 New Rx

New Rx is a manual submission form to submit a new prescription. Required fields are indicated in bold and with a red asterisk to their right.

The form cannot be saved and must be completed near the time of creation to avoid loss of information. Dispensations cannot be submitted with errors, any errors or missing values will need to be corrected before the dispensation can be submitted.

If a required value or required values are left blank and the user attempts to submit the form, the form will indicate the errors in red and provide an error message. All required values must be entered and valid in order to submit the form.

The form will not retain previously submitted values, such as pharmacy name, pharmacy address, or pharmacy identifier, however depending on your browser you may be able to retain this information for future use.

Manual Submission Form

**Patient**

Patient Type:  Human  Animal

Animal Name\*

First Name\*  Address\*  ID Type

Middle Name  Address Line 2  ID Number

Last Name\*  City\*  Patient Location

DOB\*  State\*  Phone Number

Gender\*  Postal Code\*

---

**Pharmacy**

Pharmacy Name\*  Pharmacy DEA #\*

Address\*  Pharmacy NPI #

Address Line 2  Pharmacy NCPDP #

City\*  Pharmacy Chain Site ID

State\*  Permit Number

Postal Code\*  Contact Name

Contact Phone

---

**Prescriber**

First Name\*  Address One  Prescriber DEA #\*

Middle Name  Address Two  Prescriber XDEA #

Last Name\*  City  DEA Suffix

Phone Number  State  Prescriber NPI #

Postal Code  State License #

---

**Prescription**

Prescription Number\*  Electronic Rx Order #  Payment Type\*

Fill Date\*  Electronic Rx Reference #  Date Sold

Written Date\*  RxNorm Code Type  Rx Transmission Form

Refills\*  RxNorm Code  Directions

Authorized Refills\*  Rx Serial #  Treatment Type

Days Supply\*  Rx Serial # Issuer  Diagnosis Code (ICD-10)

Partial Fill  Quantity Prescribed

---

**Drug**

NDC Number\*   Compound Quantity\*  Units\*

---

**Pharmacist**

First Name  Prescriber NPI #

Middle Name  State License #

Last Name

---

**Other (Dispensation Surrogates)**

First Name  Patient Relationship

Middle Name  Drop-off/Pick-up Type

Last Name  Drop-off/Pick-up ID #

Submit Cancel

## 6.4 PharmacyRx

PharmacyRx allows users at the pharmacy to access a list of previously submitted prescriptions dispensed by the pharmacy.

1. Navigate to **Menu > Rx Management** and click the **PharmacyRx** tab
2. Select the desired Pharmacy Identifier
3. Enter a date range for the report, and click “Search”

4. The user will receive a report on dispensations filled by the pharmacy within the requested time frame. The report will contain a section with the pharmacy’s information as well as a Dispensations table.
  - i) The Dispensations table can be filtered by any of its columns.
  - ii) If the user needs to change the date range of the report, they can do so by clicking the “Back” button at the top of the report.
5. If configured by the State Administrator, the user will be able to export the data into a .pdf or .csv file by clicking the icons at the top of the report.

Fill Date	Rx #	Name	Year of Birth	Drug Name	Qty	Supply	Refill Number	Prescriber Name	Pymt Type
10/13/2017	54555	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	5.0	5	0	DR, DOCTOR	paid
10/13/2017	54321	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	10.0	10	0	TEST, DOCTOR	paid
10/12/2017	86329	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	10.0	10	0	ANOTHER, DOCTOR	paid
10/12/2017	54321	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	10.0	10	0	ANOTHER, DOCTOR	paid
10/12/2017	78541	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	10.0	10	0	DIFFERENT, DOCTOR	paid
10/12/2017	09645	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	15.0	15	0	THE, DOCTOR	paid
10/11/2017	45216	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	30.0	30	0	THE, DOCTOR	paid
10/11/2017	12345	PATIENT, TEST	1945	HYDROCODON-ACETAMINOPHEN 5-325	30.0	30	0	JORDAN, DOCTOR	paid

## 7 Assistance and Support

### 7.1 Technical Assistance

If you need additional help with any of the procedures outlined in this guide, you can contact Appriss at:

1-844-464-4767

or

Create a support request using the following URL:

<https://apprisspmp.zendesk.com/hc/en-us/requests/new>

Technical assistance is available 24 hours, 7 days a week, 365 days a year.

### 7.2 Administrative Assistance

If you have non-technical questions regarding the Ohio PDMP AWAR<sub>x</sub>E System, please contact:

State of Ohio Board of Pharmacy

77 South High Street 17<sup>th</sup> Floor

Columbus, OH 43215-6126

P: 614-466-4143 Option 1

F: 614-644-8556

Email: [info@ohiopmp.gov](mailto:info@ohiopmp.gov)

Director of OARRS Chad Garner

## 8 Document Information

### 8.1 Disclaimer

Appriss has made every effort to ensure the accuracy of the information in this document at the time of printing. However, information may change without notice.

## 9 Introduction to NarxCare

NarxCare is a robust analytics tool and care management platform that helps prescribers and dispensers analyze real-time controlled substance data from Prescription Drug Monitoring Programs (PDMPs). The primary source of data for the system is PDMP data. NarxCare automatically accesses the PDMP data, analyzes it, scores it, and generates an interactive, patient-centered report with visual enhancements that enable providers to quickly comprehend the patient's controlled substance use history.

The NarxCare platform is designed to accommodate additional, non-PDMP data sources such as claims data, registry data, continuity of care documentation, etc. As these data become available they will be visually incorporated as additional risk indicators and eventually be included in existing and new algorithms.

Every NarxCare report includes type-specific use scores for narcotics, sedatives, and stimulants. These scores are based on a complex algorithm with up to twenty, time-weighted, measurement points. The scores range from 000 to 999, with higher scores equating to higher numbers of prescribers, MME, pharmacies, and overlapping prescriptions.

An Overdose Risk Score, developed using advanced data science, is also included. This risk score ranges from 000-999 with higher scores equating to increased risk of unintentional overdose. Currently based on PDMP data, the score will become more holistic in nature as additional data are added to the algorithm.

Data visualization is enhanced with a color coded graphical display of prescription data that is interactive allowing for increased detail when desired.

A Resources section provides tools that enable providers to link patients with treatment and easily obtain information documents that may be helpful as reference material or patient handouts.

# 10 Application Interface Overview

The NarxCare report interface is a modular design with several collapsible segments.

Header


Scores and Indicators

Graphs

Full prescription detail

Menu
james e hulzenga

RxSearch > Patient Request


  
Powered by NarxCare™

**MICHELLE JORDAN, 76F**

Narx Report Resources

Date: 10/19/2017 Download PDF Download CSV

JORDAN, MICHELLE

Risk Indicators

**NARX SCORES**

Narcotic	Sedative	Stimulant
<b>900</b>	<b>620</b>	<b>000</b>

Explain these scores

**OVERDOSE RISK SCORE**

**790**

(range 0-999)

Explain this score

**ADDITIONAL RISK INDICATORS (3)**

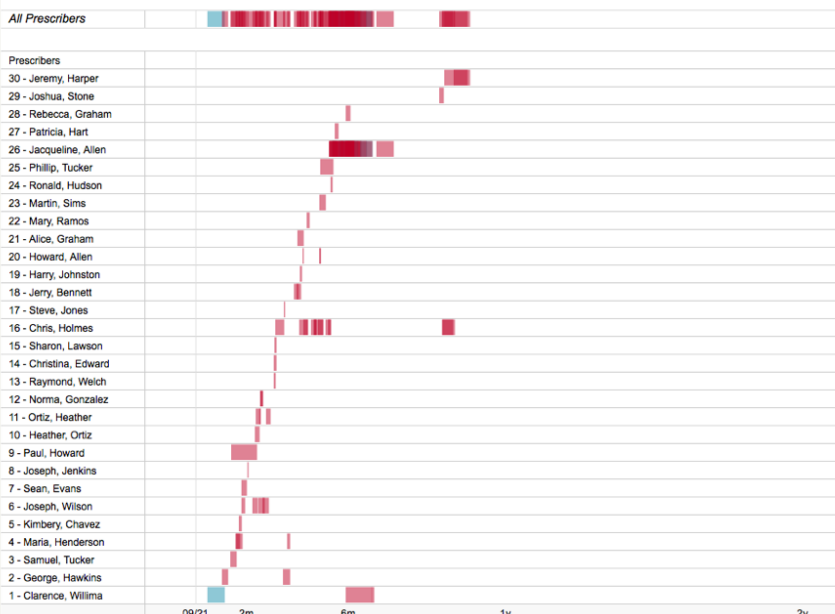
- ! ≥ 4 opioid or sedative dispensing pharmacies in any 90 day period in the last 2 years
- ! ≥ 5 opioid or sedative providers in any year in the last 2 years
- ! > 100 MME total and 40 MME/day average

Explain these indicators

Graphs

RX GRAPH ⓘ ■ Narcotic ■ Sedative ■ Stimulant

All Prescribers



Morphine MeEq/day

Per CDC guidance, the conversion factors and associated daily morphine milligram equivalents for drugs prescribed as part of medication-assisted treatment for opioid use disorder should not be used to benchmark against dosage thresholds meant for opioids prescribed for pain.

Rx Data

**PRESCRIPTIONS**

Total Prescriptions: 76.00  
 Active MME: 0.00  
 Active MME/day: 0.00  
 30 Day Avg. MME/day: 0.00

Fill Date	ID	Drug	Qty	Days	Prescriber	Pharmacy	Refill	MgEq	MgEq/Day	Pymt Type	PMP
09/15/2017	1	LORAZEPAM 1 MG TABLET	60	20	WI CLA	KROGE(1119)	0	60.00	-	Medicare	IM
09/11/2017	1	OXYCODONE-ACETAMINOPHEN 5-325	120	7	HA GEO	WALMA(1111)	0	900.00	128.57	Comm Ins	IM
09/01/2017	1	OXYCODONE-ACETAMINOPHEN 10-325	30	7	TU SAM	KROGE(7120)	0	450.00	64.29	Comm Ins	IM
08/28/2017	1	OXYCODONE-ACETAMINOPHEN 5-325	20	5	HE MAR	WALMA(1111)	0	150.00	30.00	Medicare	IM

# 11 Application Section Detail

## 11.1 Header

The Header contains several report and account level controls.

1. Drop down menu bar
2. Patient identifying information
3. Navigation tabs
4. Report download links

### 11.1.1 Drop down menu bar

Clicking on the menu icon allows for navigation to all functional areas in Aware. For full detail on Aware menu items please see the Aware User Guide [link]. For NarxCare users, there are additional training links in the drop-down menu as well as a link to this user guide. Clicking on the user's name reveals several account specific options.

The screenshot shows the NarxCare application interface. At the top is a dark purple header with a 'Menu' icon on the left and 'Current User' on the right. Below the header is a navigation menu with five columns: Home, RxSearch, User Profile, Training, and PDMP Links. The Home column includes Dashboard, PMP Announcements, and Quick Links. The RxSearch column includes Patient Request, Patient Alerts, Requests History, MyRx, and Bulk Patient Search. The User Profile column includes My Profile, Default PMPI States, Delegate Management, Password Reset, and Log Out. The Training column includes NarxCare Overview, Narx Scores, Overdose Risk Score, Aware/NarxCare User Guide, and Help. The PDMP Links column includes PMP Support.

Below the navigation menu is a section titled 'Risk Indicators'. It contains three main panels: 'NARX SCORES', 'OVERDOSE RISK SCORE', and 'ADDITIONAL RISK INDICATORS (3)'. The 'NARX SCORES' panel shows Narcotic (900), Sedative (620), and Stimulant (000). The 'OVERDOSE RISK SCORE' panel shows a score of 790 (range 0-999). The 'ADDITIONAL RISK INDICATORS (3)' panel lists three indicators: 1) >= 4 opioid or sedative dispensing pharmacies in any 90 day period in the last 2 years; 2) >= 5 opioid or sedative providers in any year in the last 2 years; 3) > 100 MME total and 40 MME/day average. Each panel has an 'Explanation and Guidance' link.

Below the risk indicators is a section titled 'Graphs' with an 'RX GRAPH' and a legend for Narcotic (red), Sedative (blue), and Stimulant (green). The graph shows a bar chart for 'All Prescribers' and two individual prescribers: '30 - Jeremy, Harper' and '29 - Joshua, Stone'. The bars represent the number of prescriptions for each drug class.

### 11.1.2 Patient Identifying Information

The patient's name, age in years, and sex are displayed above the navigation tabs. The first collapsible item of the Narx Report interface is a collapsible segment that contains additional information about the patient including Date of Birth and possible specific address information as well.

**Menu** Current User ▾

RxSearch > Patient Request  STATE DEPARTMENT OF HEALTH  
Powered by NarxCare™

**MICHELLE JORDAN, 76F**

**Narx Report** Resources

Date: 10/19/2017 [Download PDF](#) [Download CSV](#)

⊖ JORDAN, MICHELLE

Linked Records				
Name	DOB	ID	Gender	Address
MICHELLE JORDAN	1/5/1941	1	female	100 MAIN STREET ANYWHERE OH 45320

Report Criteria		
First Name	Last Name	DOB
MICHELLE	JORDAN	1/5/1941

⊖ Risk Indicators

### 11.1.3 Navigation tabs

Under the patient's name are two tab options labeled Narx Report and Resources. The default is the Narx Report. Clicking on the Resources tab will expose several treatment locator and document resources that may be useful in managing patient referrals or reviewing CDC guidelines.

**Menu**

RxSearch > Patient Request

**MICHELLE JORDAN, 76F**

**Narx Report** Resources

Date: 10/19/2017

⊖ JORDAN, MICHELLE

Linked Records				
Name	DOB	ID	Gender	Address
MICHELLE JORDAN	1/5/1941	1	female	100 MAIN STREE



### 11.1.4 Report download links

On the right side of the report below the state logo are two download links that allow the user to download a report PDF or a comma separated values (csv) file of the PDMP data.



## 11.2 Narx Report

The body of the Narx Report contains several functional areas aimed at rapidly raising awareness of risk and prescription use patterns, and when required, individual prescription detail.

### 11.2.1 Scores and additional risk indicators

NarxCare includes a series of type specific use scores termed Narx Scores, an Overdose Risk Score, and Additional Risk Indicators at the top of the Narx Report. These scores and other elements are often automatically returned to the requesting system as discrete data. Requesting systems receiving such data can choose to display the scores within the native electronic health record or pharmacy management system, and many system choose to display these data in the patient header, face sheet, or alongside patient vital signs. *More information on the scores and the additional risk indicators is available later in this document.*

Risk Indicators

NARX SCORES

Narcotic **900** Sedative **620** Stimulant **000**

Explanation and Guidance

OVERDOSE RISK SCORE

**790**  
(range 0-999)

Explanation and Guidance

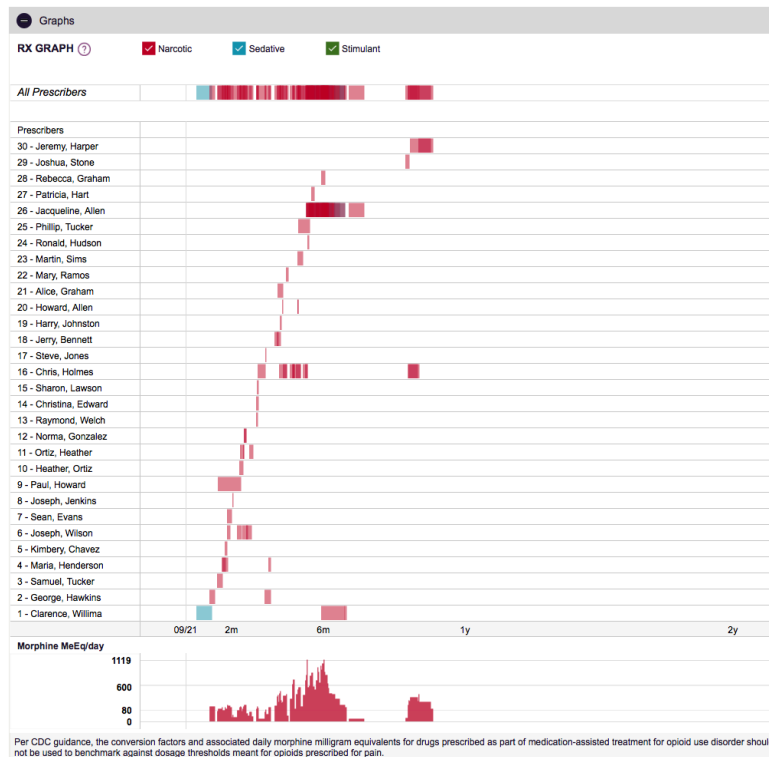
ADDITIONAL RISK INDICATORS (3)

- 1**  $\geq 4$  opioid or sedative dispensing pharmacies in any 90 day period in the last 2 years
- 1**  $\geq 5$  opioid or sedative providers in any year in the last 2 years
- 1**  $> 100$  MME total and 40 MME/day average

Explanation and Guidance

This NarxCare report is based on search criteria supplied and the data entered by the dispensing pharmacy. For more information about any prescription, please contact the dispensing pharmacy or the prescriber. NarxCare scores and reports are intended to aid, not replace, medical decision making. None of the information presented should be used as sole justification for providing or refusing to provide medications. The information on this report is not warranted as accurate or complete.

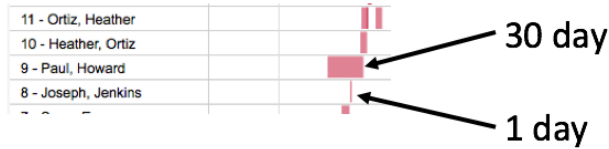
11.2.2 Rx Graph



The RxGraph is a key visualization instrument that allows providers to rapidly see important patterns and levels of use. Some key design elements include:

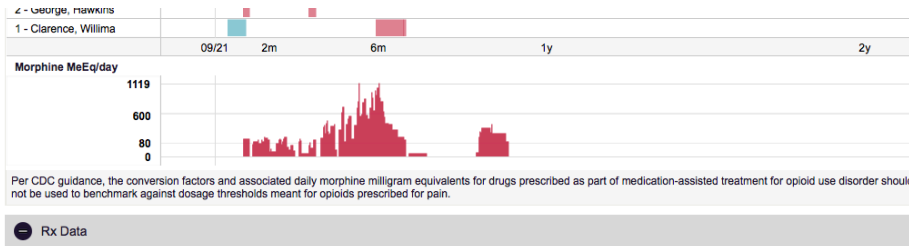
1. Prescriptions are color coded and selectable at the top of the graph:
  - a. Narcotics (opioids) = Red
  - b. Sedatives (benzodiazepines, sleep aids, etc.) = Blue
  - c. Stimulants = Green

- d. Other = Gray
- 2. The RxGraph is *reverse* time ordered. The most recent prescriptions are on the left side of the graph and the oldest are on the right side of the graph.
- 3. Each pixel in the graph represents 1 day. As a result, a 30-day prescription is represented by a rectangle about 1cm wide and a 1-3-day prescription appears as a narrow vertical bar.



- 4. The RxGraph is interactive. Prescriptions can be clicked on or dragged over to see greater detail. Providers can also be clicked on to see greater detail.

A daily morphine milligram equivalency (MME) graph is also provided for a quick longitudinal view of daily MME. Abrupt changes in daily MME are often due to overlapping prescriptions.



### 11.2.3 Prescription Detail

Each prescription dispensed to the patient is presented in a table format. Column headers are selectable. The prescriber and pharmacy fields have additional data available if the cursor is hovered over the element.

Fill Date	ID	Drug	Qty	Days	Prescriber	Pharmacy	Refill	MgEq	MgEq/Day	Pymt Type	PMP
09/15/2017	1	LORAZEPAM 1 MG TABLET	60	20	WI CLA	KROGE(1119)	0	60.00	-	Medicare	IM
09/11/2017	1	OXYCODONE-ACETAMINOPHEN 5-325	120	7	HA GEO	WAL MA(1111)	0	800.00	128.57	Comm Ins	IM
09/01/2017	1	OXYCODONE-ACETAMINOPHEN 10-325	30	7	TU SAM	KROGER 8948 THUNDER BRANCH WOOD EAST CAMBRIDGE OH 44271 DIA: KG1111119	0	64.29	64.29	Comm Ins	IM
08/28/2017	1	OXYCODONE-ACETAMINOPHEN 5-325	20	5	HE MAR		0	30.00	30.00	Medicare	IM
08/26/2017	1	OXYCODONE-ACETAMINOPHEN 5-325	20	3	CH KIM		0	50.00	50.00	Medicare	IM
08/25/2017	1	HYDROCODON-ACETAMINOPHEN 5-325	30	7	HE MAR		0	21.43	21.43	Medicare	IM
08/22/2017	1	HYDROCODON-ACETAMINOPHEN 5-325	20	4	WI JOS	RITE (5555)	0	100.00	25.00	Medicare	IM
08/20/2017	1	OXYCODONE HCL 10 MG TABLET	40	6	EV SEA	WALMA(1111)	0	600.00	100.00	Medicare	IM
08/16/2017	1	HYDROCODON-ACETAMINOPHEN 5-325	4	1	JE JOS	WALL (1119)	0	20.00	20.00	Medicare	IM

### 11.2.4 Prescriber and Pharmacy Detail

All prescriber and pharmacy identities are presented in a table with additional practice and location information available for review.

PROVIDERS						
Total Providers: 30						
Name	Address	City	State	Zipcode	DEA	
ALICE, GRAHAM	4026 IRON HOLLOW	HANNIBAL	OH	44879	AG5511111	
CHRIS, HOLMES	5805 GREEN TURNABOUT	FREDERICK	OH	45270	CH5511111	
CHRISTINA, EDWARDS	9912 DUSTY BARN RANGE	MAHONING	OH	45152	CE5511111	
CLARENCE, WILLIMASON	4256 NOBLE FOREST WALK	CHASE	OH	43129	CW5511111	
GEORGE, HAWKINS	7728 QUIET EXT	FISHER	OH	43897	GH5511111	
HAPPY, JONSTON	4618 HAZY WILLOW LEDGE	WODE	OH	45514	HJ5511111	

PHARMACIES						
Total Pharmacies: 11						
Name	Address	City	State	Zipcode	DEA	
CVS	2890 COLONIAL AVE	DAYTON	OH	45419	CV5555555	
CVS	4322 GENTLE DALE PIKE	POST BOY	OH	43062	CV5511111	
KERR	808 SLEEPY QUAIL DELL	RICHFIELD	OH	44829	KR0017120	
KERR	7731 STONY MANOR	BUTLER	OH	44436	KE1111119	
KROGER	8649 THUNDER BRANCH WOOD	EAST CAMBRIDGE	OH	44271	KG1111119	
KROGER	6518 HAZY FOX HARBOUR	GEYER	OH	44168	KK0017120	

### 11.3 Resources

The Resources tab aggregates additional functionality and provider and patient information sheets for easy access.

#### 11.3.1 MAT locator

An MAT locator is provided that quickly creates a list of the 30 closest providers who are listed in the Substance Abuse and Mental Health Administration (SAMHSA) buprenorphine treatment locator database. The patient's zip code is pre-populated but can be edited. Clicking on the submit button automatically generates a PDF that can be viewed and printed.

#### 11.3.2 CDC documents

A series of CDC documents pertaining to both providers and patients are available for quick reference and printing if desired.

Access to Treatment

**Mat Providers**

Find the 30 closest MAT providers for this patient. The patient's zip code is prep-populated if available. [View more information about the treatment locator.](#)

Search for providers near:

Zip Code

45320

Submit

Educational Resources

**INFORMATIONAL DOCUMENTS**

Click the associated link and print. [View more information about resources.](#)

**What You Need to Know**

**PRESCRIPTION OPIOIDS:  
WHAT YOU NEED TO KNOW**

Prescription opioids can be used to help relieve moderate to severe pain and are often prescribed following a surgery or injury or for certain health conditions. These medications can be an important part of treatment but also come with medical risks. It is important to work with your health care provider to make sure you are getting the safest, most effective care.

[WHAT ARE THE RISKS AND SIDE EFFECTS OF OPIOID USE?](#)

**Opioids and Chronic Pain**

**PROMOTING SAFER AND  
MORE EFFECTIVE PAIN MANAGEMENT**

**UNDERSTANDING PRESCRIPTION OPIOIDS**  
Opioids are a class of powerful chemicals that relieve pain by binding to receptors in the brain. Used pain medications are sometimes prescribed to help manage chronic pain.



**Pregnancy and Opioids**

**PREGNANCY AND OPIOID  
PAIN MEDICATIONS**

Women who take opioid pain medications should be aware of the possible risks during pregnancy.



## Narx Scores

### 11.4 Overview

The NarxCare application delivers several elements of discrete data and a visually enhanced, interactive PDMP report. Contained on the report, and delivered as discrete data, are three type-specific *use* scores termed Narx Scores. These Narx Scores numerically represent the PDMP data for a patient.

Narx Scores are calculated for narcotics (opioids), sedatives, and stimulants and have the following characteristics:

1. Each Score is three digits and ranges from 000-999
2. The last digit of each Score represents the number of active prescriptions of that type. For example, a Narcotic Score of 504 indicates the patient should have 4 active narcotic prescriptions according to dispensation information in the PDMP.
3. The scores *correspond* to the number of literature based risk factors that exist within the PDMP data. These risk factors include:
  - a. The number of prescribers
  - b. The number of pharmacies
  - c. The amount of medication dispensed (often measured in milligram equivalencies)
  - d. The number of times prescriptions of a similar type overlap from different prescribers.
4. The time elapsed for any risk factor serves to decrease its contribution to the score. For example, 1000 morphine milligram equivalencies (MME) dispensed within the last month will elevate the score *more than* 1000 MME dispensed 1 year ago.
5. The distribution of Narx Scores for patients found in a PDMP is approximated as follows:
  - a. 75% score less than 200
  - b. 5% score more than 500
  - c. 1% score more than 650

The Narx Scores were designed such that:

- A. Patients who use small amounts of medication with limited provider and pharmacy usage will have **low scores**.
- B. Patients who use large amounts of medications in accordance with recommended guidelines (single provider, single pharmacy, etc.) will have **mid-range scores**.
- C. Patients who use large amounts of medications while using many providers and pharmacies, and with frequently overlapping prescriptions will have **high scores**.

## 11.5 Narx Score Algorithm

### Relative Scoring

Narx Scores represent a *relative scoring* system wherein the risk factors representing use within a PDMP report are counted *and then converted* to a reference value that ranges from 0-99. These reference values correlate with a percentile measurement of that use within the PDMP population.

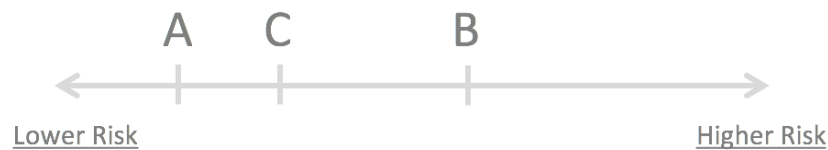
A single point measurement of total MME in the last 60 days can be used to illustrate this concept further using the following three patients:

Patient A: 160 MME

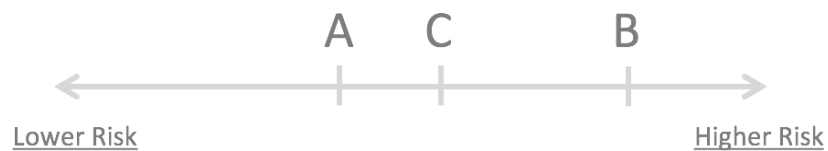
Patient B: 4800 MME

Patient C: 1050 MME

If we were to place these three patients on a line of relative risk we could intuit a linear relationship based on MME and they could be depicted as follows:



This depiction has no boundaries to the left or right so these patients could just as easily be drawn as follows:



The NarxCare algorithm uses a unique strategy to establish boundaries of use by converting all measured variables, such as 60 day MME, to a scaled value between 0 and 99. This was done by evaluating a large PDMP population and measuring the 60 day MME value for every patient. This set of data was then used to create a reference table roughly equating to a percentile in the population. If we add the scaled value to each example patient's 60 day MME we get:

Patient A: 160 MME | 20

Patient B: 4800 MME | 90

Patient C: 1050 MME | 65

If we apply these new scaled values to our risk diagram and create a left and right boundary of 0 and 99 we get:



Interestingly, the population based scaled values indicate that Patient B and C are closer to each other than might otherwise be suspected. In this case, we can also say that Patient B has used more MME in the last 60 days than 90% of the rest of the PDMP population.

### Time periods

The NarxCare algorithm evaluates a PDMP record using 4 different, overlapping time periods. In each time period the risk factor being evaluated is tabulated and then converted to a scaled value. Here is an example of a provider reference table.

Prescribers	2mo Scaled	6mo Scaled	1yr Scaled	2yr Scaled
0	0	0	0	0
1	19	12	8	6
2	36	22	16	11
3	51	32	23	16
4	64	41	30	21
5	75	49	37	26
6	85	57	43	30
And so on ...				

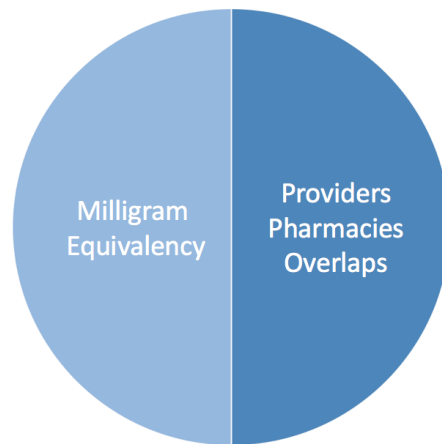
These reference tables exist for all the risk factors being evaluated, and cover all 4 time periods. In general, as the raw value count (i.e. number of prescribers) increases, so does the reference value (up to 99 maximum). As the time period increases the scaled value decreases.



Prescriber Count	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
Pharmacy Count	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
Morphine MME	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
Sedative LME	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
Overlap Days	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
0	0	0	0	0
1	3	2	1	1
2	6	4	3	2
3	9	5	4	3
4	11	7	6	4
5	14	9	7	5
6	16	10	8	6
And so on ...				

### Weighting

A Narx Score is calculated as a weighted average of the scaled values. A 50% weighting is applied to the milligram equivalencies with the remaining risk factors making up the other 50%.



This type of weighting results in several reliable relationships. If we think of milligram equivalency as *consumption* and the combination of providers, pharmacies, and overlaps collectively as *behaviors*, we can intuit the following score categories.

	<u>Consumption</u>	<u>Behaviors</u>	<u>Narx Score</u>
Patient A	Low	Low	Low
Patient B	Low	High	Mid
Patient C	High	Low	Mid
Patient D	High	High	High

It is important to understand that there are several different patterns of user that can result in the same score. It is always necessary to look at the actual PDMP data to determine what use patterns exist that have resulted in the Narx Score presented.

### Algorithm and Score Computation

The steps involved with calculating a Narx Score are as follows:

1. Determine the raw values for all time periods for all variables
2. Convert all raw values to scaled values
3. Average the scaled values for each risk factor for all time periods
4. Determine weighted average
5. Add (concatenate) the number of active prescriptions.

Using a sample patient as an example to illustrate the calculation of a Narcotic Score:

1. Determine the raw values for all time periods for all variables.

	60 days	6 mos	1 year	2 years
Prescribers	6	9	15	15
Pharmacies	4	4	6	6
MME	1640	5408	7358	7364
LME	0	0	0	0
Overlaps	17	55	65	65

2. Convert all raw values to scaled values.

	60 days	6 mos	1 year	2 years
Prescribers	85	76	84	64
Pharmacies	78	56	62	49
Morphine milligram eq	74	87	88	87
Lorazepam milligram eq	0	0	0	0
Overlaps	41	70	64	52

3. Average the scaled value for each risk factor for all time periods.

	60 days	6 mos	1 year	2 years	<b>Avg</b>
Prescribers	85	76	84	64	<b>77</b>
Pharmacies	78	56	62	49	<b>61</b>
MME	74	87	88	87	<b>84</b>
LME	0	0	0	0	<b>0</b>
Overlaps	41	70	64	52	<b>57</b>

4. Calculate the weighted average.

	60 days	6 mos	1 year	2 years	Avg	Wt	
Prescribers	85	76	84	64	77	1	<b>77</b>
Pharmacies	78	56	62	49	61	1	<b>61</b>
MME	74	87	88	87	84	3	<b>252</b>
LME	0	0	0	0	0	1	<b>0</b>
Overlaps	41	70	64	52	56	2	<b>114</b>
<b>Weighted Average (sum/8)</b>							<b>63</b>

5. Add (concatenate) the number of active prescriptions

	60 days	6 mos	1 year	2 years	Avg	Wt	
Prescribers	85	76	84	64	77	1	77
Pharmacies	78	56	62	49	61	1	61
MME	74	87	88	87	84	3	252
LME	0	0	0	0	0	1	0
Overlaps	41	70	64	52	56	2	114
Weighted Average (sum/8)							63
Number of Active Narcotic Prescriptions							<u>2</u>
<b>Narcotic Score</b>							<b>63<u>2</u></b>

## 11.6 Clinical Application

### In work-flow use

Narx Scores are intended to be delivered into workflow automatically as discrete data and be easily viewable within a patient's record. Many systems choose to place the scores in the patient header, or alongside the patient's vital signs.

Narx Scores are best viewed at the beginning of a patient encounter, as such they should be obtained at or near the time a patient is registered.

### General Considerations

- The primary purpose of providing Narx Scores is to raise provider awareness to the associated PDMP data available for review.
- Concerning Narx Scores are intended to trigger a *discussion*, **not a decision**. If a Narx Score raises concern the recommended course of action is to evaluate the PDMP data, review any additional pertinent data, and discuss any concerns with the patient.
- Just as there is no single blood pressure that can be considered *normal* for all people, there is no Narx Score that is *normal*. A Narx Score must be applied to the clinical scenario before evaluating appropriateness. For example, a blood pressure of 120/80 can simultaneously be:
  - Inappropriate for a 2-month-old infant
  - Appropriate for a 20-year-old woman
  - Inappropriate for an elderly patient with an average daily blood pressure of 200/100
- Narx Scores are distributed within the PDMP population as follows:
  - 75% of patients score below 200
  - 5% of patients score above 500
  - 1% of patients score above 650
  -

### Example Use Cases

Narx Scores can be used to great effect in certain clinical scenarios. Again, the recommended course of action is to seek additional information and discuss concerns with the patient.

**Case A** – An 17y/o male basketball player with other significant history presents with a severe ankle sprain. His Narx Scores are:

Narcotic  
000

Sedative  
000

Stimulant  
000

**Important consideration:** If considered for an opioid due to the severity of injury, this may be the patient's first exposure to the effects of an opioid. Recommend thorough review of the risks and benefits with the patient and consideration of an informed consent process.

**Case B** – an 81 y/o female presents with decreased level of consciousness following a fall where she suffered a closed head injury. Her Narx Scores are:

<u>Narcotic</u> 341	<u>Sedative</u> 501	<u>Stimulant</u> 000
------------------------	------------------------	-------------------------

**Important Consideration:** Many elderly patients are on chronic opioids and benzodiazepines. The use of opioids and benzodiazepines for this patient may have contributed to her fall. The patient may be taking enough medication to develop anxiety seizures due to benzodiazepine withdrawal, complicating the medical picture.

**Case C** – A 36 y/o male patient with mild chronic back pain frequently treated with opioids presents for a medication refill. On review of the PDMP record the patient has been to 17 different prescribers in the last year. His Narx Scores are:

<u>Narcotic</u> 671	<u>Sedative</u> 240	<u>Stimulant</u> 000
------------------------	------------------------	-------------------------

**Important Consideration:** Many patients obtain medications through multiple different providers. This can be due to the patient being seen in a clinic that is staffed by different providers, or can be due to *access to care* issues requiring visits to urgent care centers or emergency departments.

Score Based Guidance

<u>Score/Range</u>	<u>Notes</u>	<u>Recommendations*</u>
000	This may be the first prescription of this type for the patient.	Discuss risks/benefits of using a controlled substance. Consider informed consent.
010-200	Approximately 75% of scores fall in this range.  Occasionally, patients in this score range have a remote history of high usage (> 1 year ago).	Review use patterns for unsafe conditions.  Discuss any concerns with patient. See guidance below

If previously high usage exists with recent abstinence, consider risk/benefits of new prescriptions

201-650	Approximately 24% of scores fall in this range.	Review use patterns for unsafe conditions.  Discuss any concerns with patient. See guidance below.
> 650	Approximately 1% of scores fall in this range.  Some patient records may have a score in this range and <i>still be within prescriber expectations</i> .  Many patient records include some level of multiple provider episodes, overlapping prescriptions, or elevated milligram equivalency.	Review use patterns for unsafe conditions.  If multiple providers involved in unsafe prescribing discuss concern with patient and consider contacting other providers directly.  If multiple pharmacies involved in unsafe prescribing discuss concern with patient and consider pharmacy lock-in program.  If overlapping medications of same or different type, discuss concern with patient and consider taper to lower dose and/or discontinuation of potentiating medications.  If patient has evidence of a substance use disorder, consider inpatient admit or referral for outpatient evaluation and treatment.

## 12 Overdose Risk Score

### 12.1 Overview

The NarxCare application delivers several elements of discrete data and a visually enhanced, interactive PDMP report. Contained on the report, and delivered as discrete data, is an Overdose Risk Score (ORS). This score numerically represents the risk of unintentional overdose death.

The ORS has the following characteristics:

1. The Score is three digits and ranges from 000-999
2. Risk approximately doubles for every 100-point increase in the score.
3. Using patients who score 0-199 as a referent group the odds ratio associated with successive 100 point bins is as follows: [new table coming]

ORS	Odds Ratio of Unintentional Overdose Death
000-199	1
200-299	10
300-399	12
400-499	25
500-599	44
600-699	85
700-799	141
800-899	194
900-999	329

### 12.2 ORS Algorithm

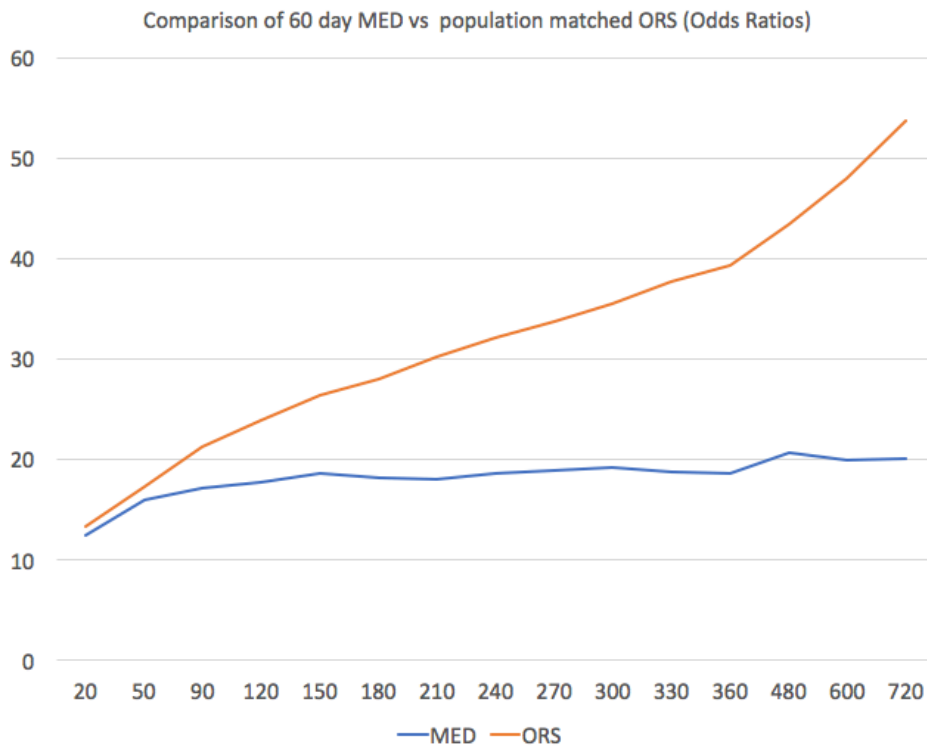
The ORS algorithm was derived using machine learning and other predictive techniques applied to a large case series of over 5,000 unintentional overdose deaths. For the first version of the score, more than 70 PDMP variables were evaluated with 12 chosen for the final model. Subsequent revisions of the model have included evaluation of 1,000s of variables, and efforts to include non-PDMP data such as criminal justice information, claims data, overdose registry data, etc. are ongoing. A specific characterization of the current variables and coefficients is beyond the scope of this document. In general, the variables that have shown to be predictive of unintentional overdose death include:

- The number of pharmacies visited per unit time
- Maximum morphine milligram equivalency (MME) in the last year
- The number of prescribers in the last 2 years
- Various slopes of opioid and sedative use
- Various slopes of prescriber usage

This section will be updated when new types of variables are incorporated and/or new sets of data are included.

### 12.3 Clinical Application

The ORS is intended to eventually provide a holistic estimate of overdose risk. At the current time, the risk assessment does not incorporate any data other than PDMP usage. This aligns the clinical application of the score with other sources of overdose risk assessment based on PDMP data such as number of pharmacies visited in the last 90 days, or daily morphine equivalent dose (MED). The ORS performs much better than estimates using only one variable. For example, when comparing the utility of average MED in the last 60 days to the ORS, one can easily see that while MED does have a dose response curve, the ORS has markedly higher performance.





The absolute risk of death from unintentional overdose is very low in the population of patients found in a PDMP. Even though the annual unintentional overdose death rate is unacceptably high, measured in the thousands for many states, the number of people using controlled substances in those same states are in the multiple millions. Patients on elevated doses of medication are also prevalent and have a low overall incidence of unintentional overdose death. For example, in evaluating average daily MED over a period of 60 days in one state, the following death rates were found:

60-day MED avg	Decedents	Living	Death Rate
90 MED	1,008	162,231	0.6%
150 MED	722	94,681	0.8%
480 MED	144	13,693	1.0%

The results of this analysis equate the Center for Disease Control’s (CDC) recommended maximum 90 MED for chronic opioid use to an expected death rate of just 0.6%. It isn’t until you get to an avg MED of 480 that the death rate reaches 1% and at that level there are over 13,000 patients in the PDMP database.

One method of incorporating the ORS into clinical practice is to use a value of 650 as a threshold approximately equivalent to the CDC’s recommended maximum of 90 MED. Just as patients who are above 90 MED are often evaluated for dose reduction, patients above a score of 650 may similarly be considered for:

1. Substance Use Disorder evaluation and treatment (if appropriate)
2. Discontinuation of potentiating drugs (if present)
3. Dose reduction
4. Provider Lock-in
5. Pharmacy Lock-in
6. Consideration of non-opioid therapy

### Score Based Guidance

The overdose risk score (ORS) can be applied to clinical practice in a manner analogous to daily morphine equivalent dose (MED). The CDC opioid prescribing guidelines recommend naloxone be considered at 50 MED and that most patients should be treated at a dose of 90 MED or less. Using an equivalent population methodology, the following ORS ranges can be associated with CDC MED based guidance.

<u>Score</u>	<u>Approximate CDC MED Equivalent</u>	<u>Guidance*</u>
< 010-440	< 50 MED	<p>Consider other sources of risk beyond PDMP data.</p> <p>See below</p>
450 - 650	50 MED (or more)	<p>Consider naloxone prescription</p> <p>See below</p>
> 650	90 MED (or more)	<p>Consider naloxone prescription</p> <p>Review use patterns for unsafe conditions.</p> <p>If multiple providers involved in unsafe prescribing discuss concern with patient and consider contacting other providers directly.</p> <p>If multiple pharmacies involved in unsafe prescribing discuss concern with patient and consider pharmacy lock-in program.</p> <p>If overlapping medications of same or different type, discuss concern with patient and consider taper to lower dose and/or discontinuation of potentiating medications.</p> <p>If patient has evidence of a substance use disorder, consider inpatient admit or referral for outpatient evaluation and treatment.</p>

## 13 Additional Risk Indicators

### 13.1 Overview

The NarxCare application delivers several elements of discrete data and a visually enhanced, interactive PDMP report. Contained on the report, and delivered as discrete data, are a set of Additional Risk Indicators. These indicators may be determined by the state PDMP and are felt to have stand-alone value.

This section is intended to aggregate important information from multiple sources of data. These data sources may include PDMP data, claims data, overdose registry data, continuity of care documents, and criminal justice.

There are currently three PDMP based indicators:

- More than 5 providers in any 365-day period
- More than 4 pharmacies in any 90-day period
- More than 40 MED average and more than 100 MME total at any time in the previous 2 years

These indicators are based on the following literature:

**Provider red flag:** Hall AJ, Logan JE, Toblin RL, et al. Patterns of Abuse Among Unintentional Pharmaceutical Overdose Fatalities. *JAMA*.2008;300(22):2613-2620. doi:10.1001/jama.2008.802.

**Pharmacy red flag:** Zhou Yang, Barth Wilsey, Michele Bohm, et al. Defining Risk of Prescription Opioid Overdose: Pharmacy Shopping and Overlapping Prescriptions Among Long-Term Opioid Users in Medicaid. *The Journal of Pain* , Volume 16 , Issue 5 , 445 – 453.

**40 MED red flag:** Leonard Paulozzi, Edwin Kilbourne, Nina Shah, et. al. A History of Being Prescribed Controlled Substances and Risk of Drug Overdose Death. *Pain Medicine* Jan 2012, 13 (1) 87-95; DOI: 10.1111/j.1526-4637.2011.01260.x.

### 13.2 Clinical Application

PDMP based indicators typically corroborate any concerns raised by Narx Scores and Overdose Risk Score (ORS).

When available, additional risk indicators sourced from non-PDMP data sources may represent other dimensions of risk such as past heroin use, substance use disorder, previous overdose, etc.

When non-PDMP indicators become routinely available, they will be modeled into the ORS and it may then be the case that a patient may have low Narx Scores (due to low use of prescribed controlled substances) BUT have an elevated ORS (due to high risk associated with non-PDMP data).

In all cases, if a provider determines that inappropriate risk exists for a patient, they should seek additional information, discuss the risk concern with the patient, and choose appropriate medical care options that are in the best interest of the patient.

Indicator Based Guidance

<u>Indicator</u>	<u>Guidance*</u>
More than 5 providers in any year (365 days)	Review use patterns for unsafe conditions.  If multiple providers involved in unsafe prescribing discuss concern with patient and consider contacting other providers directly.
More than 4 pharmacies in any 90 day period	Review use patterns for unsafe conditions.  If multiple pharmacies involved in unsafe prescribing discuss concern with patient and consider pharmacy lock-in program.
More than 40 MED per day average and more than 100 MME total	Review use patterns for unsafe conditions.  consider taper to lower dose and/or discontinuation of potentiating medications.
If all 3 indicators present	Review use patterns for unsafe conditions.  If multiple providers involved in unsafe prescribing discuss concern with patient and consider contacting other providers directly.  If multiple pharmacies involved in unsafe prescribing discuss concern with patient and consider pharmacy lock-in program.  If overlapping medications of same or different type, discuss concern with patient and consider taper to lower dose and/or discontinuation of potentiating medications.  If patient has evidence of a substance use disorder, consider inpatient admit or referral for outpatient evaluation and treatment.

