Requestor User Support Manual

Alaska Prescription Drug Monitoring Program

January 2022

Version 2.7

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1 Document Overview

The PMP AWARxE *Requestor User Support Manual* provides step-by-step instructions for healthcare professionals and other users requesting data from the Alaska Prescription Drug Monitoring Program (PDMP) database. It includes such topics as:

- Registering for an account
- Creating patient requests
- Viewing request status
- Viewing patient reports
- Appointing a delegate to request and receive information on behalf of a prescriber or dispenser
- Managing your account

1.1 What is a Requestor?

A requestor is a PMP AWARxE account type held by those who use PMP AWARxE to review patients' prescription history. A requestor's primary task within the application is to determine if a patient should be prescriber, administered, or dispensed a prescription based on their prescription history. Requestors are the strongest line of defense to prevent prescription drug abuse, misuse, addiction, and diversion. Physicians and pharmacists are the most common type of requestor; however, there are a number of roles that can be classified as a requestor, and that role may be delegated to other authorized personnel. A complete list of available roles that fall into the requestor category is provided below:

Healthcare Professionals

- Dentist
- IHS Prescriber
- IHS Prescriber Delegate – Licensed
- IHS Dispenser
- HIS Pharmacist's Delegate – Licensed
- Medical Resident with Prescriptive Authority
- Nurse Practitioner/Clinical Nurse Specialist
- Optometrist
- Out-of-State Pharmacist
- Military Dispenser
- Military Pharmacist's Delegate – Licensed
- Military Prescriber
- Military Prescriber Delegate – Licensed
- Pharmacist
- Pharmacist in Charge
- Pharmacist's Delegate – Licensed
- Physician (MD, DO)
- Physician Assistant
- Podiatrist (DPM)
- Prescriber Delegate – Licensed
- VA Dispenser
- VA Pharmacist's Delegate – Licensed in AK
- VA Pharmacist's Delegate – Unlicensed in AK
- VA Prescriber
- VA Prescriber Delegate – Licensed in AK
- VA Prescriber Delegate – Unlicensed in AK
- Veterinarian

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2 Registration

This chapter provides an overview of the PMP AWARxE registration process as well as detailed instructions for registering for an account and registering for a delegate account.

2.1 Registration Overview

PMP AWARxE requires that every individual register as a separate user, using their email address as their username within the system at https://alaska.pmpaware.net. Alaska requires a manual review for account approval. A user can register as a delegate so long as they hold a license, registration, certificate, or permit under AS 08, except VA delegates, who may be unregulated under AS 08.

The delegate role is designed to allow the user to generate reports on the behalf of another, current user; for example, a registered nurse at a small doctor's office could be assigned to act as a delegate to the physician to create Narx Reports for the patients whom the physician would be seeing that day. All queries run by the delegate are attributed to the prescriber for whom they run the report. Under no circumstance may a delegate log in to their supervisor's account; they must use their own credentials.

The registration process within AWARxE is comprised of four sections: Register for an Account, User Role Selection, User Demographics, and Review Profile Details. All sections must be completed before your registration is successfully submitted for processing.

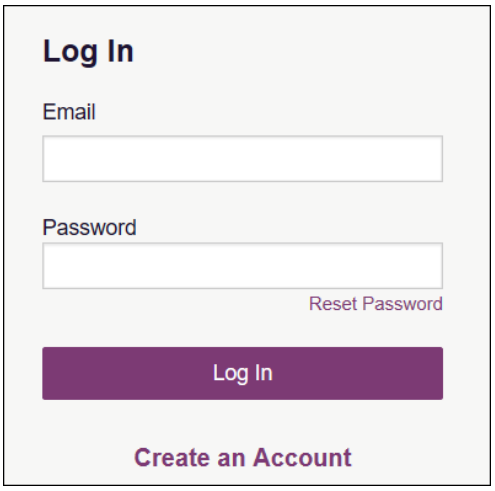
Some requestor roles, such as federal or out-of-state roles, require that a copy of a valid license in another jurisdiction be submitted to akpdmp@alaska.gov. For Indian Health Service (IHS), Veterans Administration (VA), and military roles, you must submit this documentation to the PDMP office before your account can be approved.

2.2 Registering for an Account

To submit an access request in PMP AWARxE:

1. Navigate to https://alaska.pmpaware.net/login.

   The Log In page is displayed.



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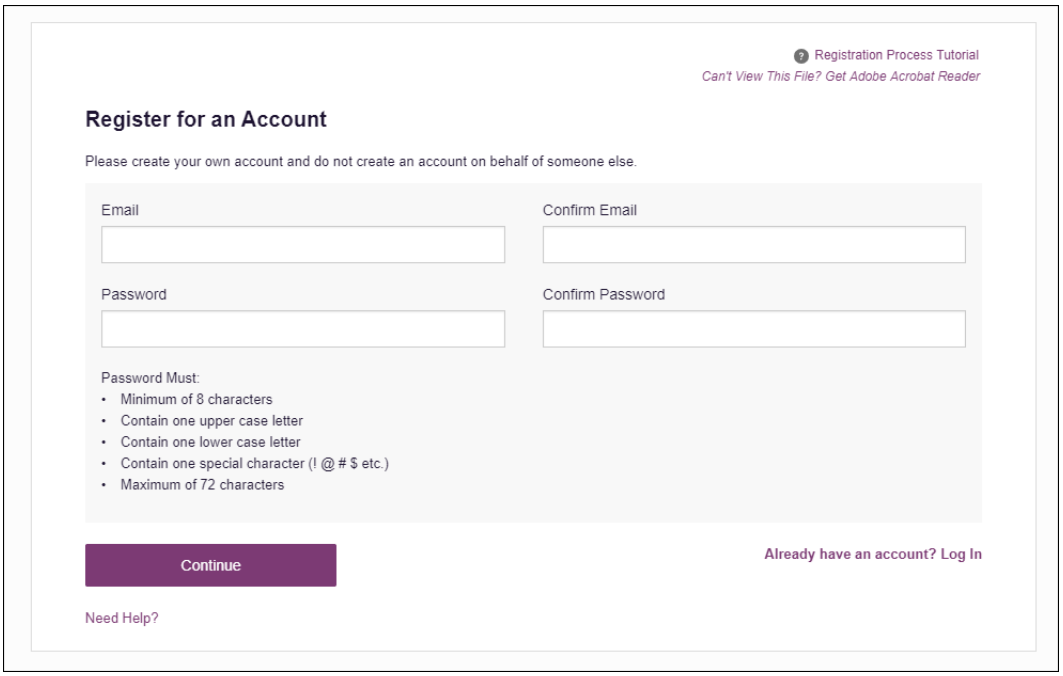
2. Click **Create an Account**.

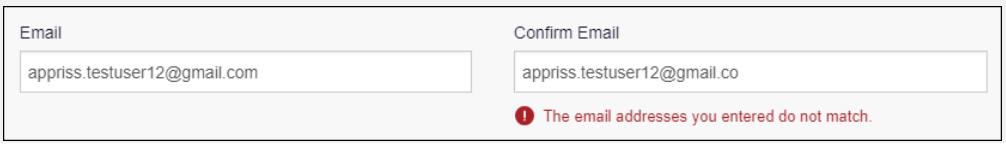
   The Register for an Account page is displayed.



Note: *A tutorial describing the complete registration process is available by clicking the* ***Registration Process Tutorial*** *link located in the top right corner of the page.*

3. Enter your current, valid email address in the **Email** field, then re-enter it in the **Confirm Email** field. The email address you provide will be your username for logging in to the system.

   Note: *If the email addresses you entered do not match, an error message is displayed.*



4. Enter a password in the **Password** field, using the password requirements provided below, then re-enter it in the **Password Confirmation** field.

   Passwords must contain:

   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) special character such as !, @, #, $, etc.*
   - *No more than 72 characters*

   Note that a checkmark appears next to each requirement as it is met.

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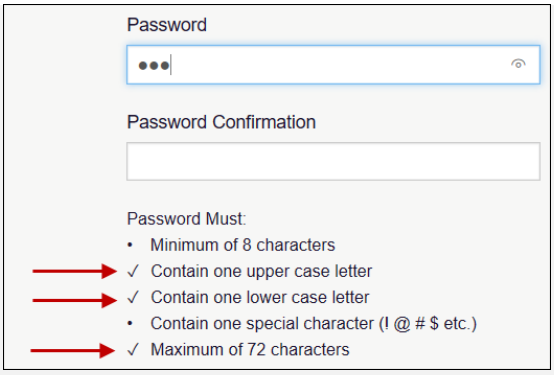
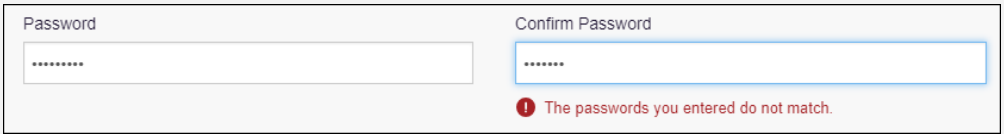
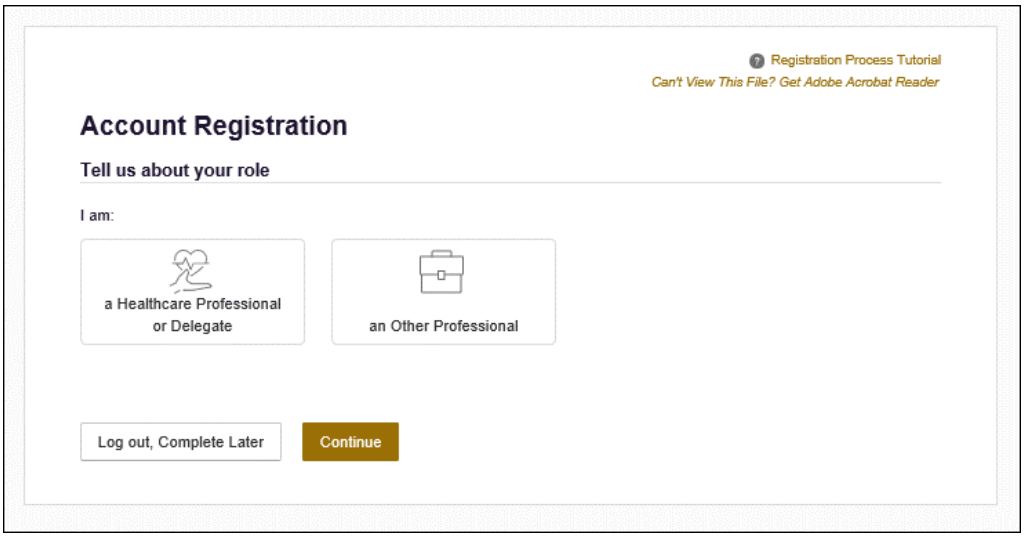


If the passwords you entered do not match, an error message is displayed.



5. Click **Continue**.

   The Account Registration: User Role Selection page is displayed as shown on the following page.



Note: *At this point in the registration process, you may click* ***Log Out, Complete Later*** *to save your login credentials and complete your registration at a later time. When you are ready to complete your registration, navigate to https://alaska.pmpaware.net, then enter the username and password you established in the previous steps.*

6. Click to select the user role category that best describes your user role type (e.g., Healthcare Professional or Delegate, Law Enforcement, etc.).

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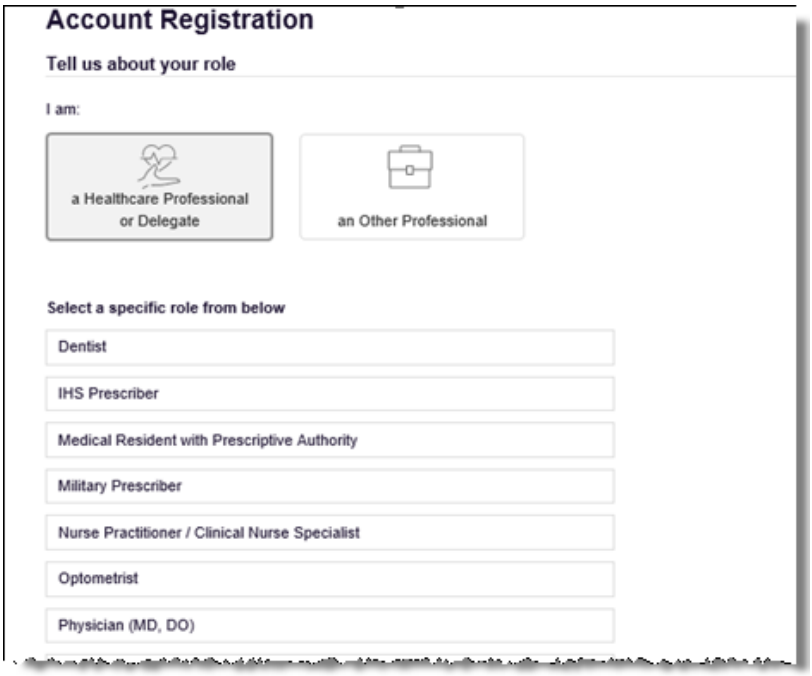
The list of available user roles in that category is displayed.

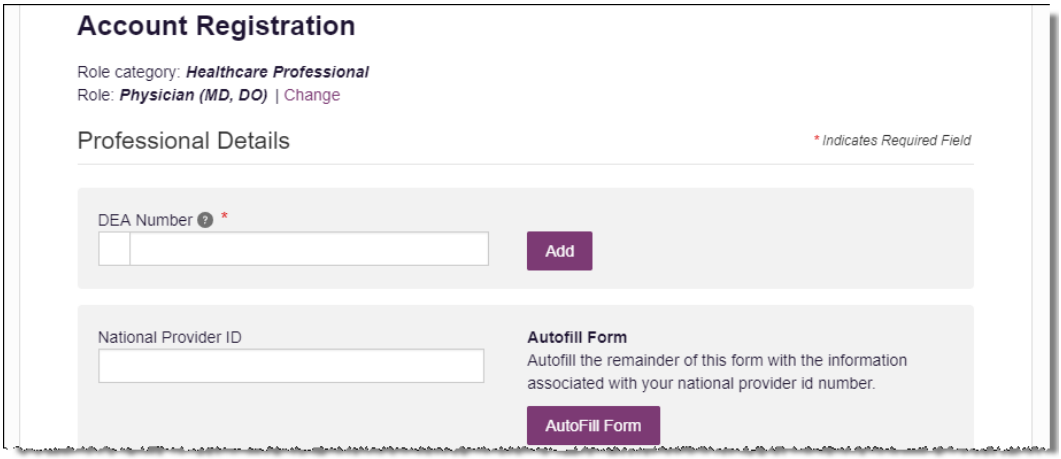


Notes:

- *The roles displayed on this page may vary depending on your state's configurations.*
- *If you are registering as a delegate, please ensure that you select the appropriate delegate user role (e.g., Prescriber Delegate, Pharmacist Delegate, etc.).*
- *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.*

7. Click to select your user role, then click **Continue**.

   The Account Registration: User Demographics page is displayed.



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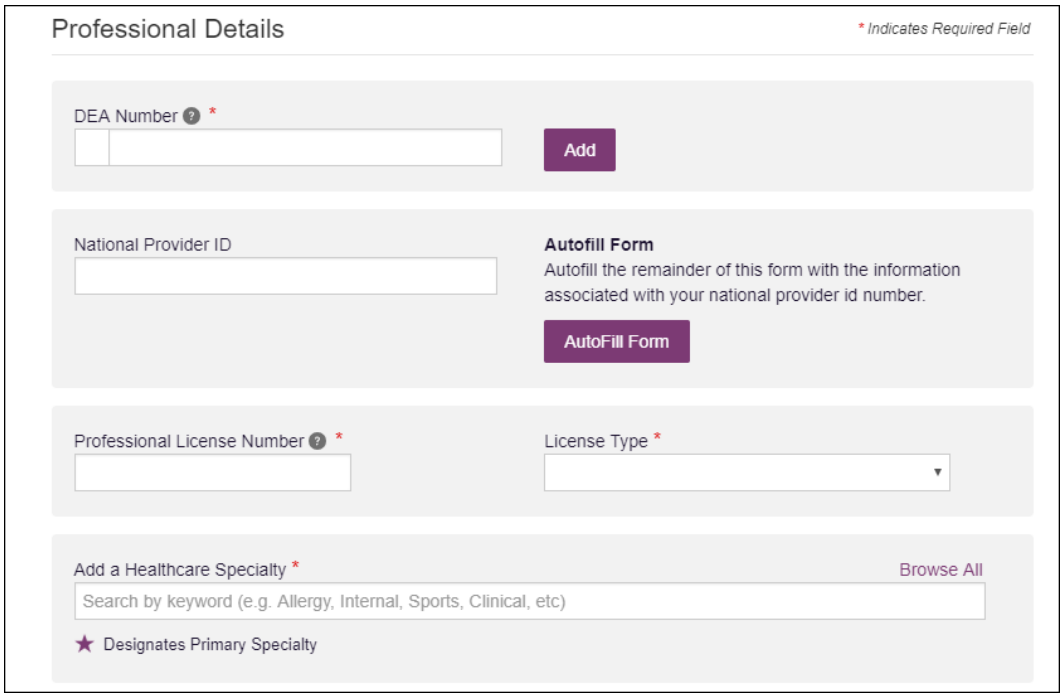
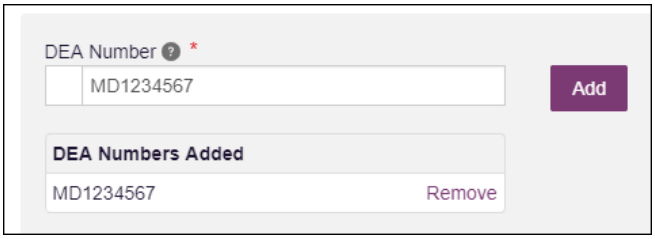
- *If you selected the wrong user role, you may click **Change**, located at the top of the page next to the user role you selected, at any time to return to the previous page and select the correct user role. Please be aware that changing your user role will cause you to lose any information you entered on the registration form.*
- *The information you are required to enter on this page may vary by state. Required fields for your state are marked with a red asterisk (*****). You may use the information provided below as a guideline; however, the same fields will not be displayed or required for every user role.*

a. The Professional Details section of this page allows you to enter such information as your DEA number, NPI number, professional license number, license type, and healthcare specialty.



- To add your DEA number, enter it in the **DEA Number** field, and then click **Add**. You may add multiple DEA numbers, if permitted by your state, by repeating this process for each DEA number you wish to add. Once you click **Add**, the DEA number is displayed beneath the **DEA Number** field. If necessary, you may click **Remove** next to a DEA number to remove it.



***Note:** Please enter all active DEA numbers, if applicable.*

- If you have an NPI number, you can enter it in the **National Provider ID** field, then click **Autofill Form** to auto-populate the form with the demographic information associated with your NPI number.

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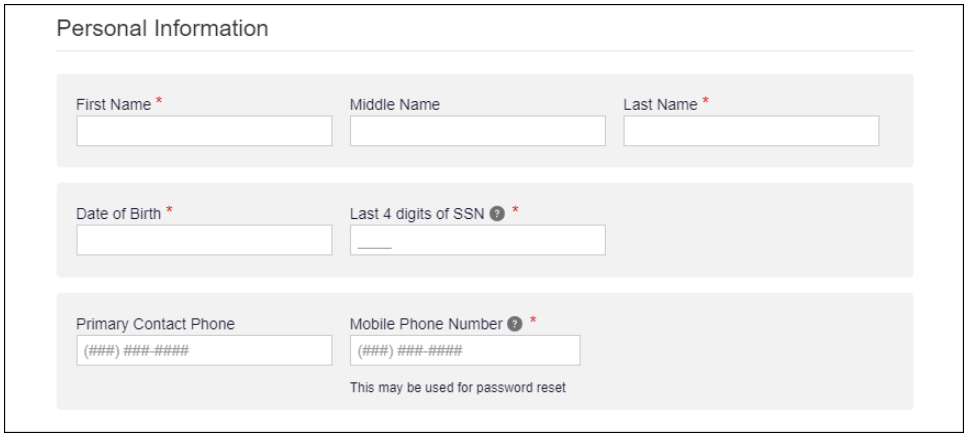
- To search for your specialty, begin typing it in the **Add a Healthcare Specialty** field. A list of specialties matching your search criteria is displayed. Click to select your specialty from the list. You may repeat this process to select multiple specialties.

Once you have selected your specialty from the list, it is displayed beneath the **Add a Healthcare Specialty** field. If necessary, you may click the "x" to remove it.

b. The Personal Information section of this page allows you to enter your personal contact information such as first and last name, date of birth, last four digits of your Social Security Number (SSN), primary contact phone number, and mobile phone number.

Note: *If the Mobile Phone Password Reset functionality is enabled for your state, you must enter your mobile number in the* ***Mobile Phone Number*** *field to use this functionality; otherwise, you will be able to reset your password via email.*



c. The Employer Information section of this page allows you to enter information about your employer such as DEA number, NPI number, name, address, phone number, and fax number.

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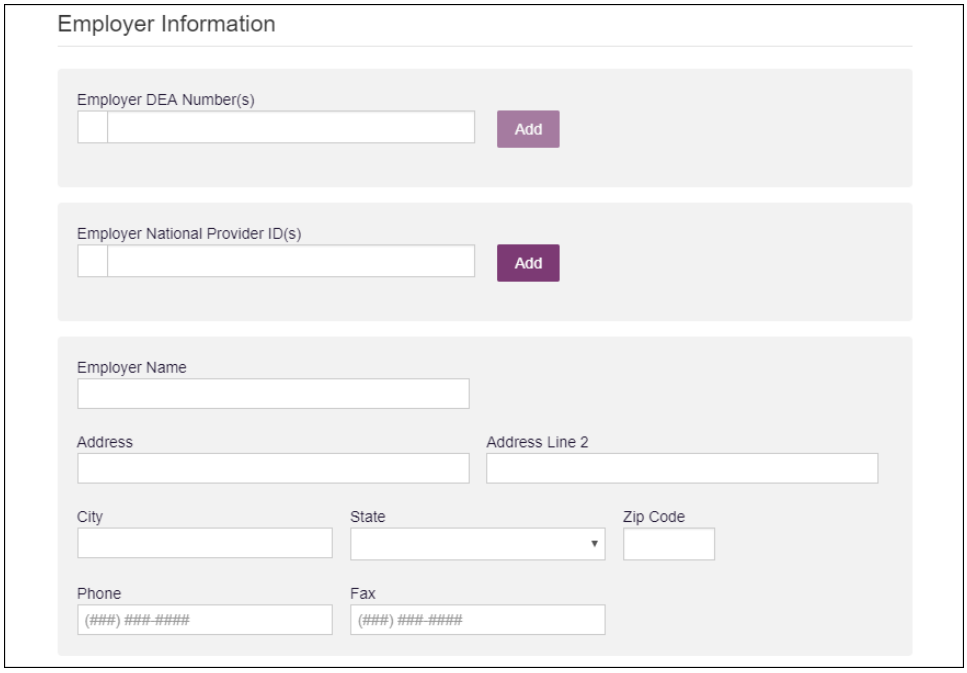
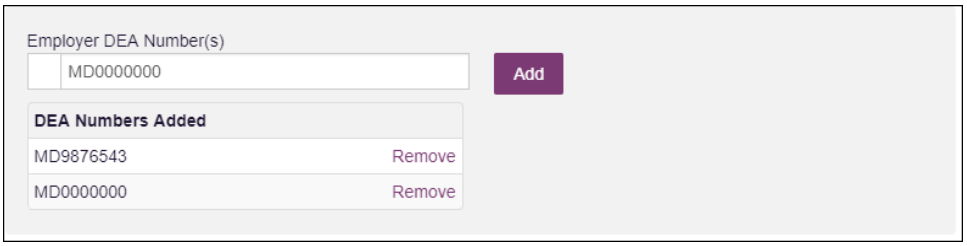
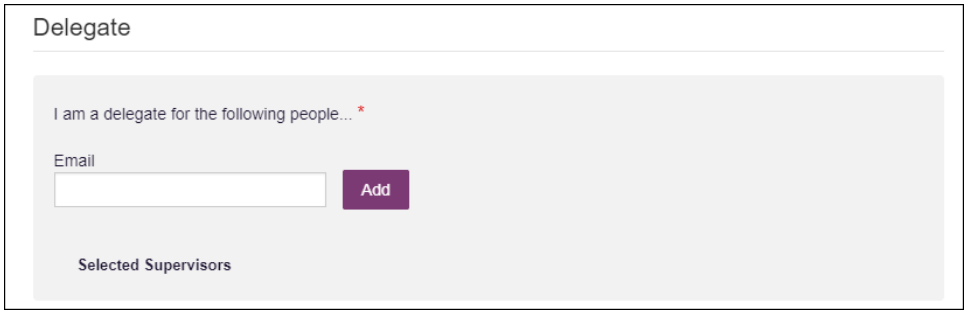


- To add your employer's DEA or NPI number, enter it in the appropriate field, and then click **Add**. You may add multiple DEA and/or NPI numbers by repeating this process for each DEA/NPI number you wish to add. Once you click **Add**, the DEA/NPI number is displayed beneath the appropriate field. If necessary, you may click **Remove** next to a DEA/NPI number to remove it.



d. If you selected a delegate user role (e.g., Prescriber Delegate, Pharmacist Delegate, etc.), you must add your supervisor(s) in the Delegate section of this page. *Note that this section is only displayed if you selected a delegate user role.*



- To add a supervisor, enter their email address in the **Email** field, and then click **Add**. You may add multiple supervisors by repeating this process. Once you click **Add**, the supervisor's email address is displayed beneath the **Email** field. If necessary, you may click the "x" to remove it.

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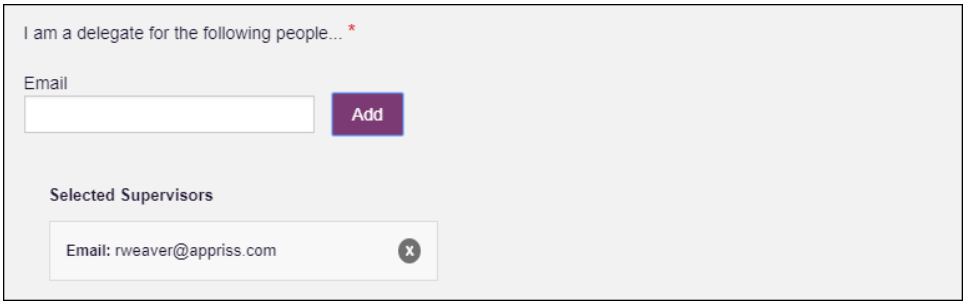


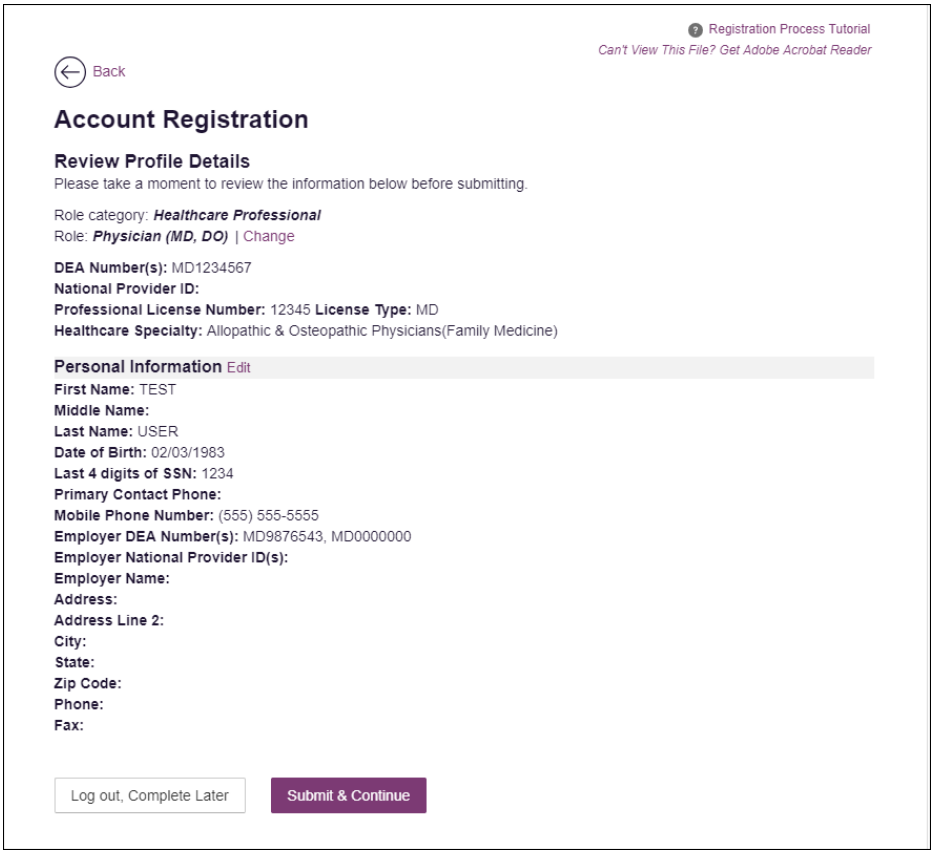
Notes:

- *The supervisor must already have an approved account with your state's PDMP.*
- *Ensure that you enter the supervisor's email address correctly and that it is a valid email address.*
- *You will not be able to perform Patient Requests on behalf of a supervisor until that supervisor has approved you as a delegate.*

8. Once you have entered all required information, click **Continue**.

Note: *At this point in the registration process, you may click* ***Log Out, Complete Later*** *to save your login credentials and complete your registration at a later time. When you are ready to complete your registration, navigate to https://alaska.pmpaware.net, then enter the username and password you established in the previous steps.*

The Account Registration: Review Profile Details page is displayed.



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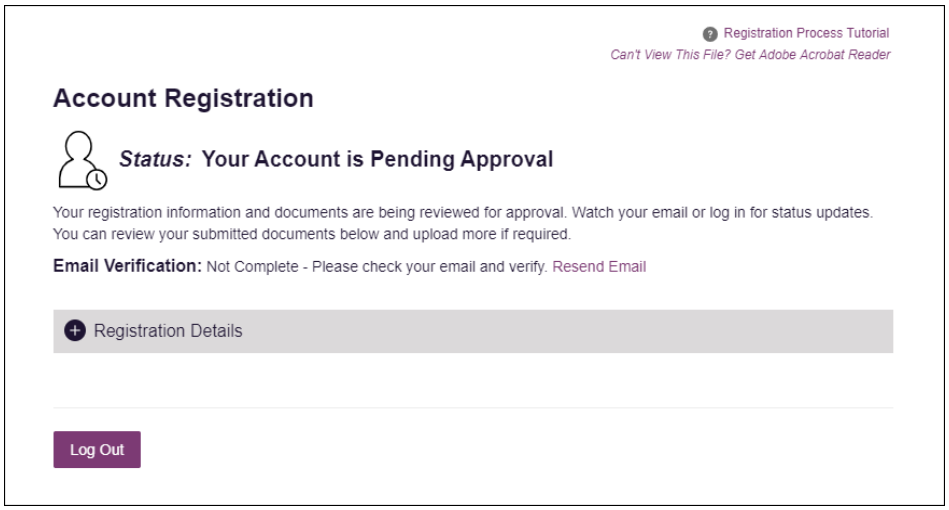
9. Review your information to ensure it is correct before submitting your registration.
   a. If you need to change your user role, click **Change**, located at the top of the page next to the role you selected. *Note that changing your user role will cause you to lose any information you entered on the registration form.*
   b. If you need to edit your personal information, click **Edit** next to the **Personal Information** section header.
10. If all information is correct, click **Submit & Continue**.

    Once you have submitted your registration, you will be notified of your account status and instructed to verify your email address.

    Note: *If you are a delegate, you must also be approved by any supervisors you have selected before you can perform a Patient Request.*

    a. The State of Alaska requires manual approval to complete your registration. Your registration status will be "Pending Approval." You may click the plus sign (+) next to **Registration Details** to view the information you submitted. *Note that your information may not be edited at this time.* Refer to Account Approval for more information.



2.3 Verifying Your Email Address

Once you have submitted your registration, PMP AWARxE sends an email to the supplied email address for verification of an active email address.

Note: *If you did not receive the email containing the verification link, you may click* ***Resend Email*** *from the Account Registration page.*

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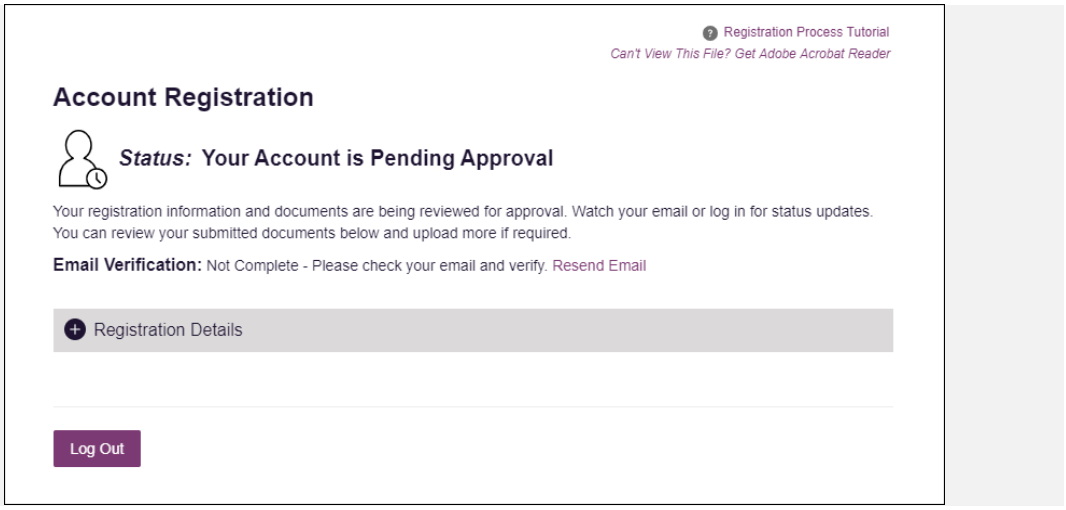
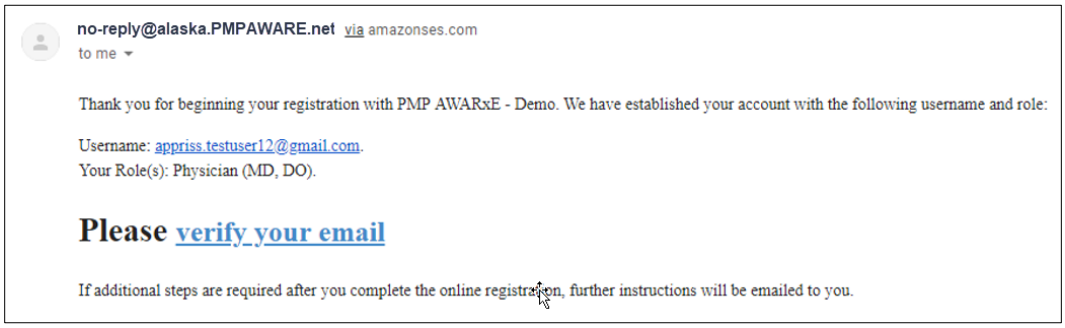


When you receive the email, it will contain a link to verify your email address. Click the **verify your email** link.



Notes:

- *The link contained within the email is only valid for 20 minutes. In the event that time has expired, clicking the link will result in a new email verification notification being sent to you. Click the link in the new email to verify your email address.*
- *If you are not able to receive HTML-formatted emails or emails with hyperlinks, please contact Appriss Support at 1-855-525-4767 .*

Once you click the link, you will be directed to PMP AWARxE, and a message will display indicating that your email address has been validated.

Note: *If your account requires approval, you will not have full access to PMP AWARxE functionality, including performing patient requests, until your account is approved. Please refer to Account Approval for more information.*

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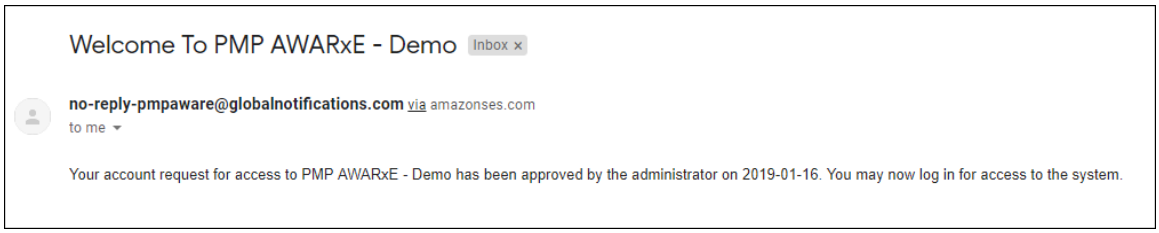
2.4 Account Approval

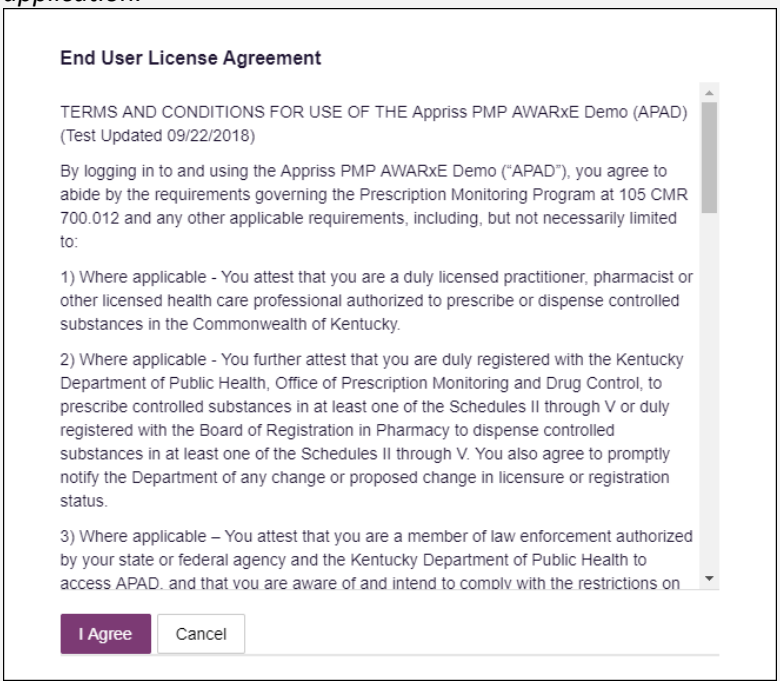
Once your licensing board has determined that all you have met all account requirements and has approved your account, you will receive an email stating that your account has been approved and is now active.



Once you receive the account approval email, you can log in to PMP AWARxE using the email address and password you created when you registered.

Notes:

- *If you no longer have the password, you can reset it by following the instructions in the Reset Password section of this document.*
- *If you are a delegate, you must be approved by any supervisors you have selected before you can perform a Patient Request.*
- *You must review and accept the End User License Agreement prior to using the application.*



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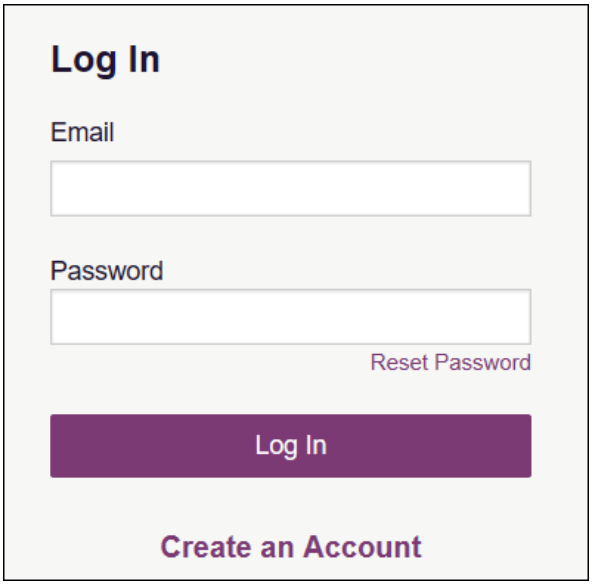
3 Basic System Functions

This chapter describes how to log in to PMP AWARxE, the Requestor Dashboard that is displayed upon logging in, and how to log out.

3.1 Log In to PMP AWARxE

1. Navigate to https://alaska.pmpaware.net.

   The Log In page is displayed.



2. Enter the email address you provided when you registered in the **Email** field.
3. Enter your password in the **Password** field.

   Note: *If you have forgotten your password, click* ***Reset Password****. You will be prompted to enter the email address registered to your account. Once you have entered a valid, registered email address, you will receive an email with a link to reset your password or a text message with a code to reset your password.*

4. Click **Log In**.

   The My Dashboard page is displayed. Please refer to the My Dashboard section for a complete description of the dashboard.

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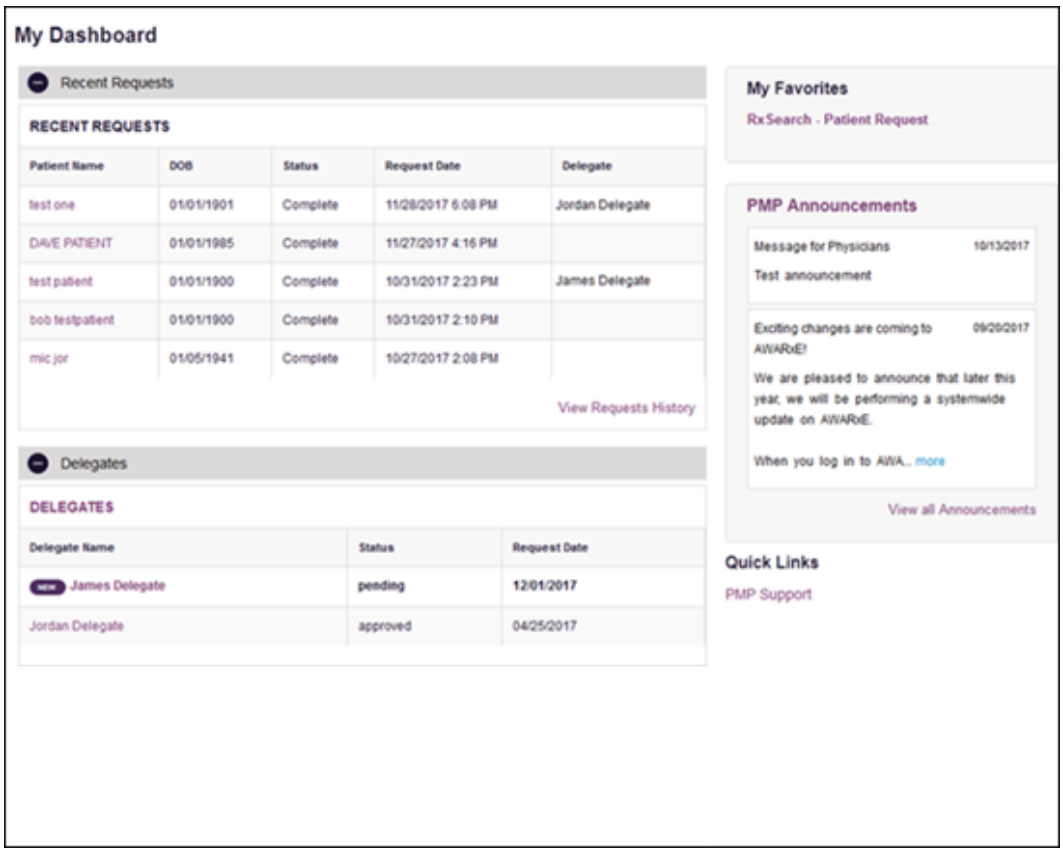
3.2 My Dashboard

Upon logging in to PMP AWARxE with an approved account, the requestor dashboard (My Dashboard) is displayed. This dashboard provides a quick summary of pertinent items within PMP AWARxE, including State Administrator announcements, your recent patient searches, patient alerts, and, if applicable, your delegate's or supervisor's status. My Dashboard can be accessed at any time by clicking **Menu** > **Dashboard** (located under **Home**).



3.2.1 Recent Requests

This section displays your most recent patient searches, including those performed by one of your delegates.

- You can view the Narx Report by clicking the patient's name.
- You can view a list of all past requests by clicking **View Requests History**. You can also access your request history at any time by clicking **Menu** > **Requests History** (located under **Rx Search**).

Note: *The report that is displayed when you click the patient's name is a historical report, meaning that it contains the data that was viewed when the report was initially run. For instructions on performing new patient Rx history searches, please refer to the* *Creating a Patient Request* *section.*

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3.2.2 Delegates/Supervisors

This section displays your delegates or supervisors, depending on your user role.

- If you are a supervisor, you can quickly change a delegate's status from the dashboard by clicking the delegate's name. Once you click the delegate's name, the Delegate Management page is displayed, and you can approve, reject, or remove a delegate from your profile.
- You can click **Delegates**, located at the top of the section, to access the Delegate Management page. The Delegate Management page can also be accessed at any time by clicking **Menu** > **Delegate Management** (located under **My Profile**). For additional information regarding delegate management, please refer to the Delegate Management section.

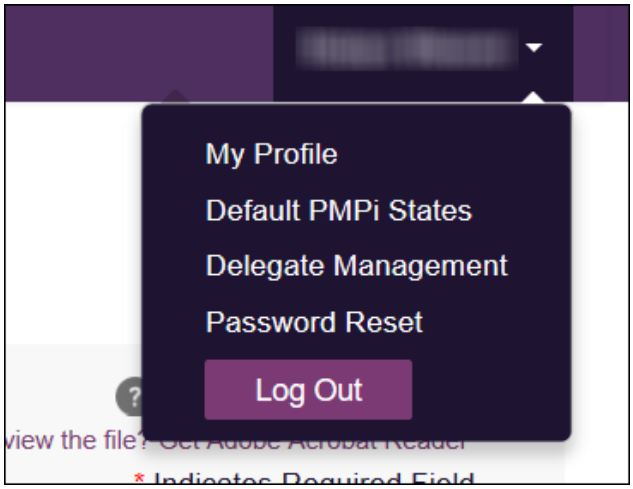
3.2.3 Announcements and Quick Links

This section displays announcements from your State Administrator as well as links to webpages outside of AWARxE that may be of use to you.

- The quick view only displays the first few lines of text; however, you can click **PMP Announcements**, located at the top of the section, to display the full announcement text. You can access the Announcements page at any time by clicking **Menu** > **Announcements** (located under **Home**).
- The announcements displayed in this section are configured by your State Administrator. Announcements can be configured as role-specific, meaning that a user whose role is "physician" may have an announcement, whereas a user whose role is "delegate" may not.
- Quick links are also configured by your State Administrator. Any links configured will be visible toward the bottom right of the dashboard in the **Quick Links** section.

3.3 Log Out of PMP AWARxE

To log out of the system, click the arrow next to your username (located in the top right corner of the page), and then click **Log Out**.



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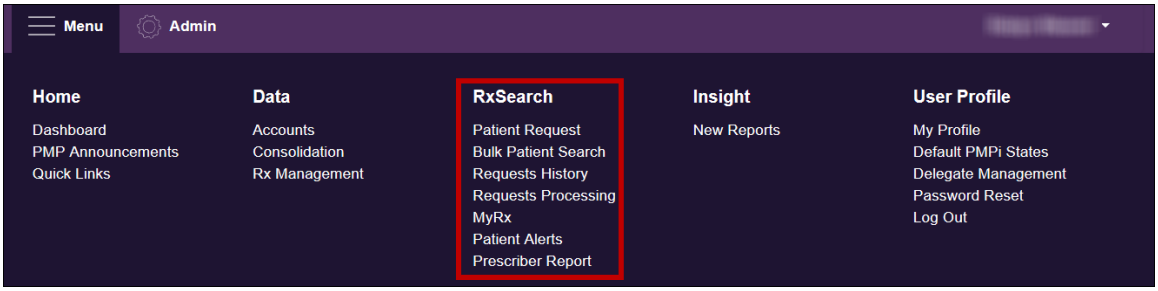
4 RxSearch

The RxSearch section of the PMP AWARxE menu contains the query functions available to you. These functions may include:

- Creating a patient request
- Viewing a patient request
- Performing a bulk patient search
- Viewing historical requests
- Viewing a report of prescriptions attributed to you
- Viewing patient alerts

Note: *You may not have access to all of the reports listed above. The functions available under* ***RxSearch*** *may vary depending on your user role and the settings enabled by your State Administrator. If you do not have access to a report and you think you should, please contact your State Administrator.*



4.1 Creating a Patient Request

The Patient Request "review" or "query" allows you to create a report that displays the prescription drug activity for a specific patient for the specified timeline. Requests must be performed prior to prescribing, administering, or dispensing any federally scheduled II–IV controlled substances unless exempt under state law.

1. Log in to PMP AWARxE.
2. Click **Menu** > **Patient Request**.

   The Patient Request page is displayed as shown on the following page.

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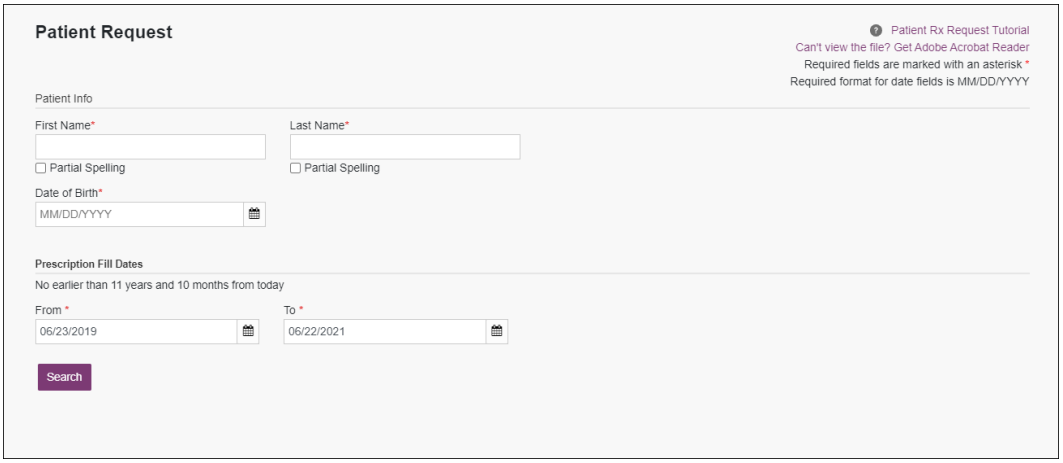
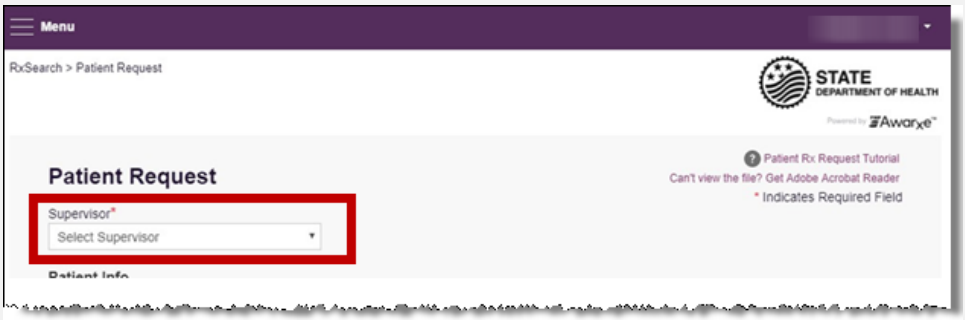


Note: *A tutorial describing the complete patient request creation process is available by clicking the* ***Patient Rx Request Tutorial*** *link located in the top right corner of the page.*

3. Enter the required information, noting that required fields are marked with a red asterisk (*). At a minimum, you must complete the following fields:

Field Name	Notes
Patient Info	
First Name	Enter the patient's complete first and last name; Or Click the **Partial Spelling** checkbox to search by a partial first and/or last name. This option can be helpful when searching hyphenated names or names that are often abbreviated, such as "Will" vs. "William." ***Note:*** *The Partial Spelling function requires at least three letters. If the patient's name contains only one or two letters, please do not attempt a partial search.*
Last Name	
Date of Birth	Use the *MM/DD/YYYY* format, or select a date from the calendar that is displayed when you click in this field.
Prescription Fill Dates	
From	Use the *MM/DD/YYYY* format, or select a date from the calendar that is displayed when you click in these fields.
To	

Note: *If you are a delegate, you must select a supervisor from the* ***Supervisor*** *field, located above the Patient Info section of the page.*



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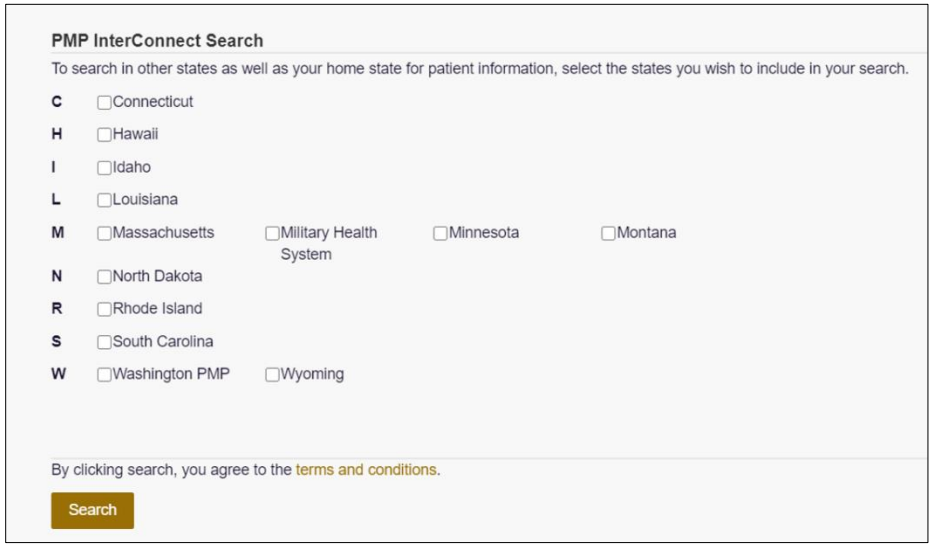
If no supervisors are available, please contact your supervisor(s) to approve your account or add the supervisor under My Profile. Current supervisors and their statuses are displayed on your dashboard. Refer to the Delegates/Supervisors section of My Dashboard or the My Profile section for further instructions.

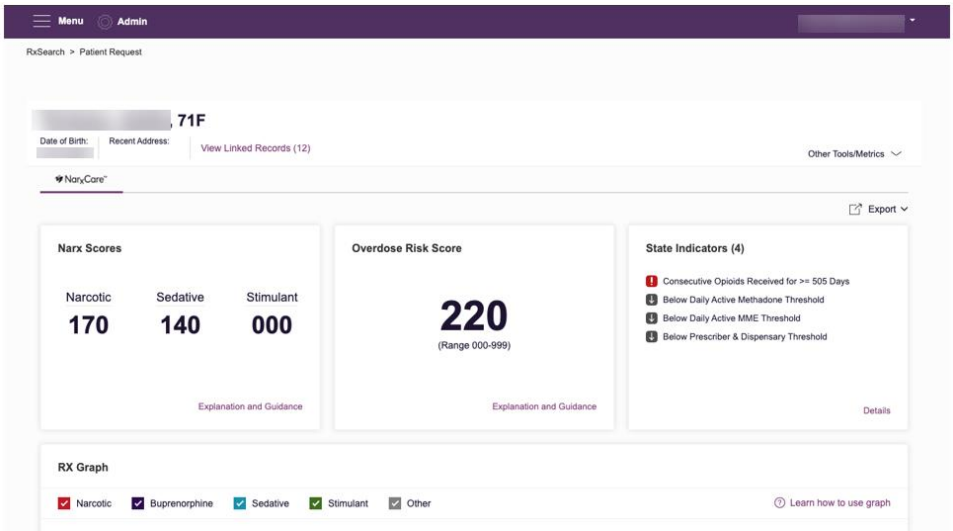
4. If you would like to review a patient's prescription information from other states, click the checkbox next to the desired state(s) in the PMP InterConnect Search section of the page.



Notes:

- *Partial search is not available when searching other states. If you have selected partial search, the PMP InterConnect Search section will be removed from the bottom of the page.*
- *If a state is not included on the list, data sharing with that state is not currently in place, or your user role does not allow for data sharing.*

5. Once you have entered all the required search criteria, click **Search**.
   a. If your search results return a single patient, the Narx Report is displayed. Refer to the Viewing a Narx Report section for more details regarding the report.



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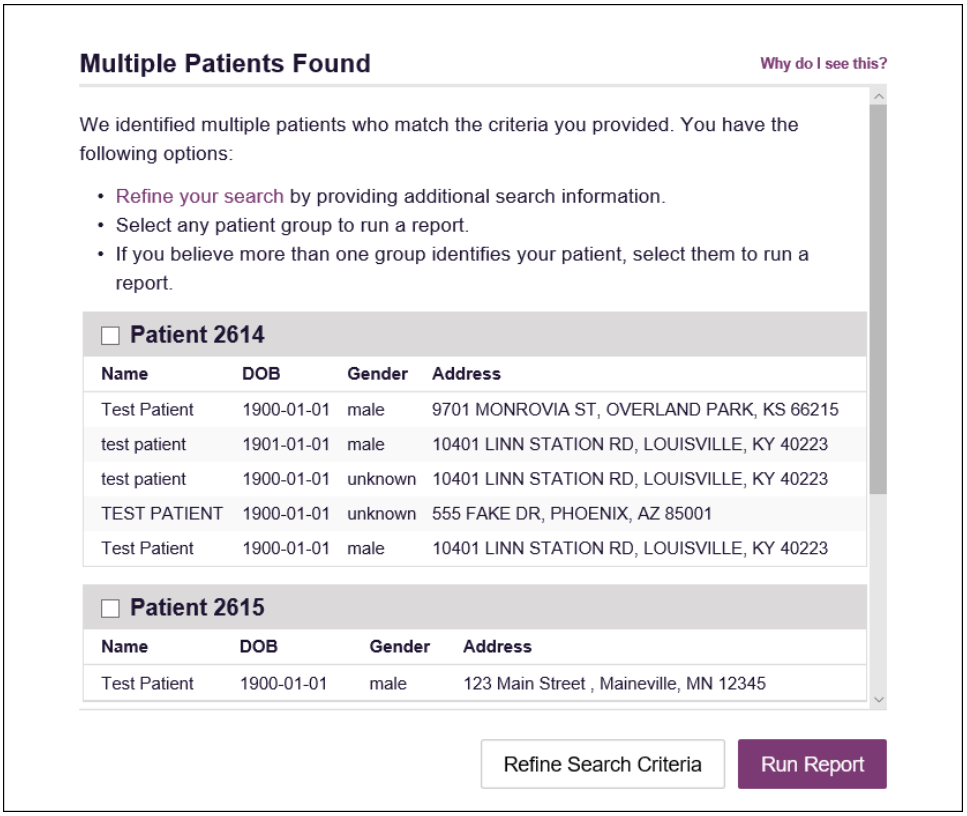
***Note:** If you need a PDF or CSV version of the report, you can click **Download PDF** or **Download CSV**, located in the top right corner of the report.*

b. If the search could not determine a single patient match, a message is displayed indicating that multiple patients were found.
   - If you searched for an exact patient name and multiple patients were found, refer to the Multiple Patients Identified section.
   - If you searched for a partial patient name and multiple patients were found, refer to the Partial Search Results section.

c. If your search does not return any results, a message is displayed indicating that either no patient matching your search criteria could be identified or the patient was identified but no prescriptions were found. Refer to the No Results Found section for more information.

4.1.1 Multiple Patients Identified

1. If you searched for an exact patient name and multiple patients were found, a message is displayed indicating that multiple patients matching your search criteria have been identified.



2. From this window, you can:
   a. Click **Refine Search Criteria** to return to the Patient Request page, refine your search criteria, and re-run the report.
   b. Select one or more of the patient groups displayed, and then click **Run Report**.

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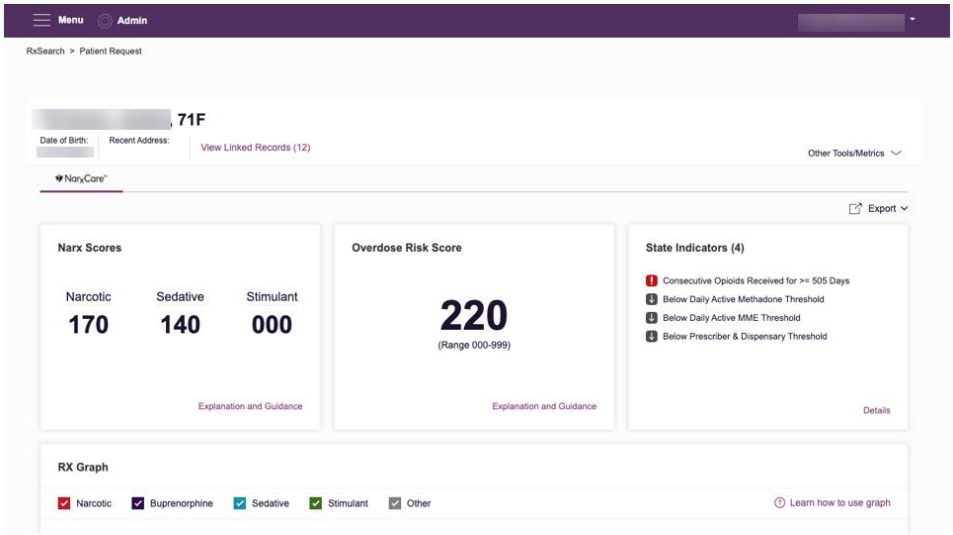
The Narx Report for the patient group(s) you selected is displayed.



c. Select one or more of the patient groups displayed, then select the **Make a Suggestion** checkbox to notify your State Administrator of the need to research and consolidate/deconsolidate patients. Enter your comments regarding the patient group(s), and then click **Run Report** to submit your suggestion and continue running your report.

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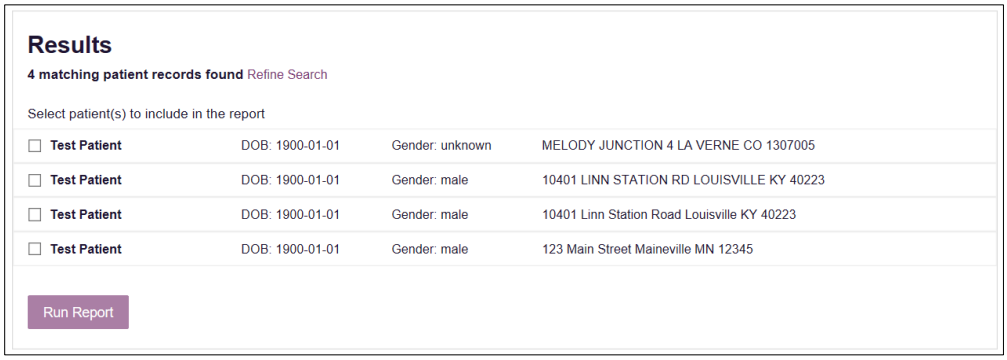
4.1.2 Partial Search Results

1. If you searched for a partial patient name and multiple patients were found, a message is displayed indicating that multiple patients match your search criteria.

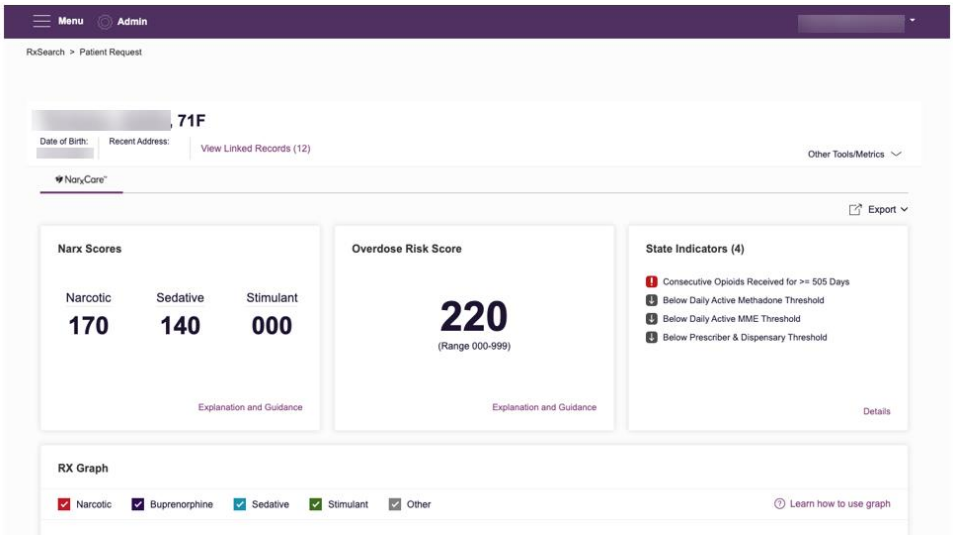


2. From this window, you can:
   a. Click **Refine Search** to return to the Patient Request page, refine your search criteria, and re-run the report;

      Or

   b. Select one or more of the patients displayed, and then click **Run Report**.

      The Narx Report for the patient(s) you selected is displayed as shown on the following page.



4.1.3 No Results Found

1. If your search criteria could not be matched to any patient records, a message is displayed indicating that no matching patient could be identified.

Or

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2. If your search criteria matches a patient record but the patient has no prescriptions within the specified timeframe, a message is displayed indicating that the patient was found but no prescriptions were found.

3. Click **Change Date Range** to return to the Patient Request page, enter a different date range, and re-run the report.

Notes:

- *Be sure to verify that all information entered on the request was entered correctly (e.g., verify that the first and last names were entered in the correct fields, verify the patient's birthdate, etc.).*
- *If **Partial Search** was not originally selected, you can click the **Partial Search** checkbox to expand your search results.*
- *You can enter additional demographic information, such as a ZIP code, to perform a fuzzy search.*

4.2 Viewing a Narx Report

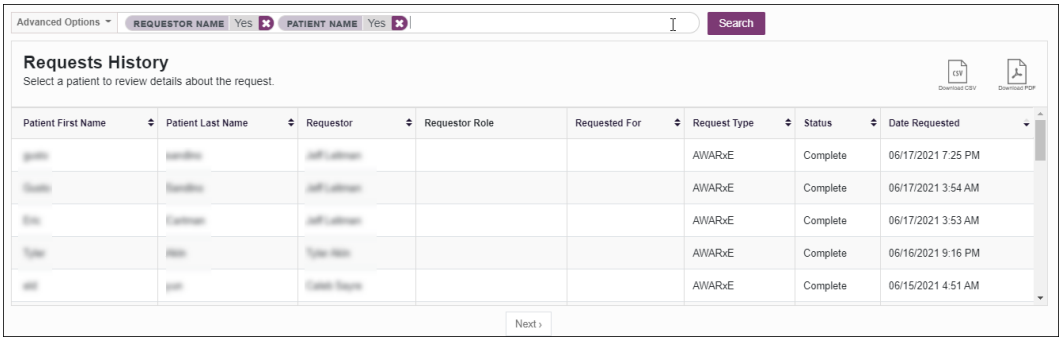
Once your search results are returned, the Narx Report is automatically displayed. For complete information on the Narx Reports, and for more information on the NarxCare application, please refer to Appendix A: NarxCare.

You may also access your previously requested Narx Reports at any time by clicking **Menu** > **Requests History**. Refer to the Requests History section for more information.

4.3 Requests History

1. To view a previously created Narx Report, click **Menu** > **Requests History**.

   The Requests History page is displayed.



Notes:

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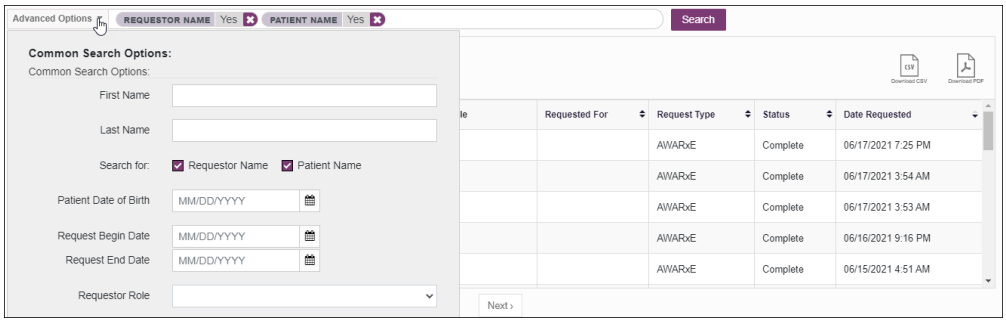
- *You can only view reports you or your delegate(s) have created.*
- *Reports are available in your Reports History for 30 days. After 30 days, they are automatically removed from your history.*

2. From this page, you can:
   a. Click **Advanced Options** to filter the list of requests.



   b. Click **Download PDF** or **Download CSV** to export your search history, if this functionality has been configured by your State Administrator.
   c. Click a patient name to view the details of that request in a detail card at the bottom of the page.

   - Click **View** to display the results of the previously submitted request. Refer to Viewing a Narx Report for details regarding Narx Reports.

     Note: *The results of previous requests are not updated with new information. The results displayed are the results at the time the original search was performed.*

   - Click **Refresh** to generate a new Narx Report for the selected patient. The Patient Request page will be displayed with the patient's information automatically populated. Refer to Creating a Patient Request for complete instructions on generating new requests.

4.4 Bulk Patient Search

The Bulk Patient Search functionality is similar to the Patient Request functionality; however, it allows you to enter multiple patients at once rather than one at a time. You can enter patient names manually or via CSV file upload.

To perform a Bulk Patient Search:

1. Click **Menu** > **Bulk Patient Search**.

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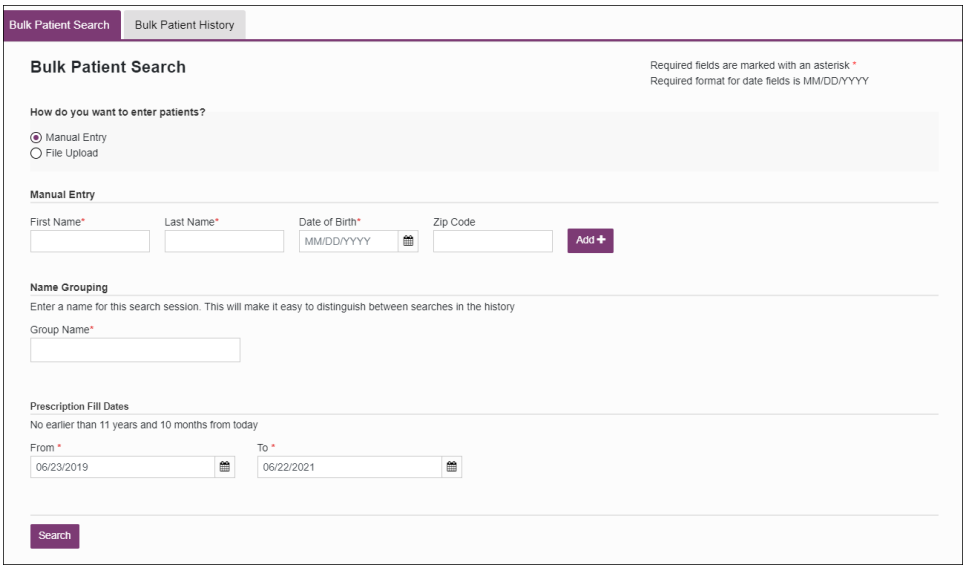
The Bulk Patient Search page is displayed.



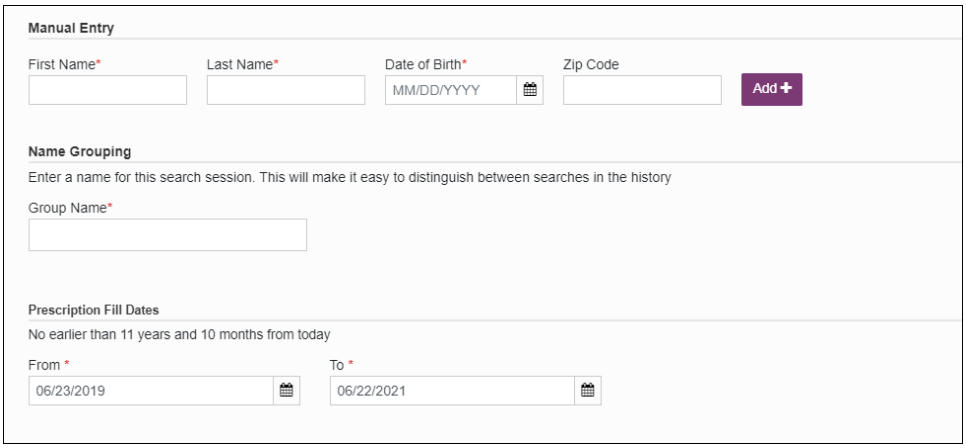
a. If you wish to enter patients manually, continue to step 2;

   Or

b. If you wish to enter patients via CSV file upload, continue to step 6.

2. Ensure that **Manual Entry** is selected in the **How do you want to enter patients?** field at the top of the page.

The Manual Entry search is displayed.



3. Complete the following required fields:
   - **First Name** – enter the patient's complete first name
   - **Last Name** – enter the patient's complete last name
   - **DOB** – enter the patient's date of birth using the *MM/DD/YYYY* format, or select a date from the calendar that is displayed when you click in this field

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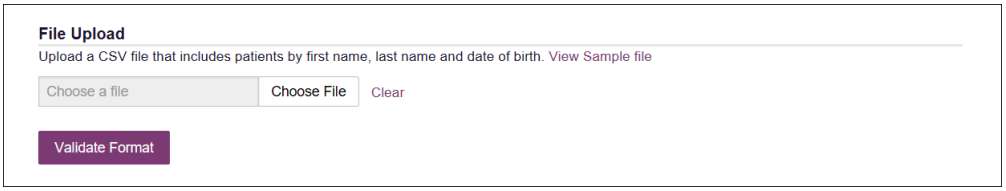
Note: *You may also enter the patient's ZIP code; however, it is not recommended.*

4. Once you have entered the patient's information, click **Add** to add an additional patient.
5. Repeat steps 2-3 until all patients have been entered.

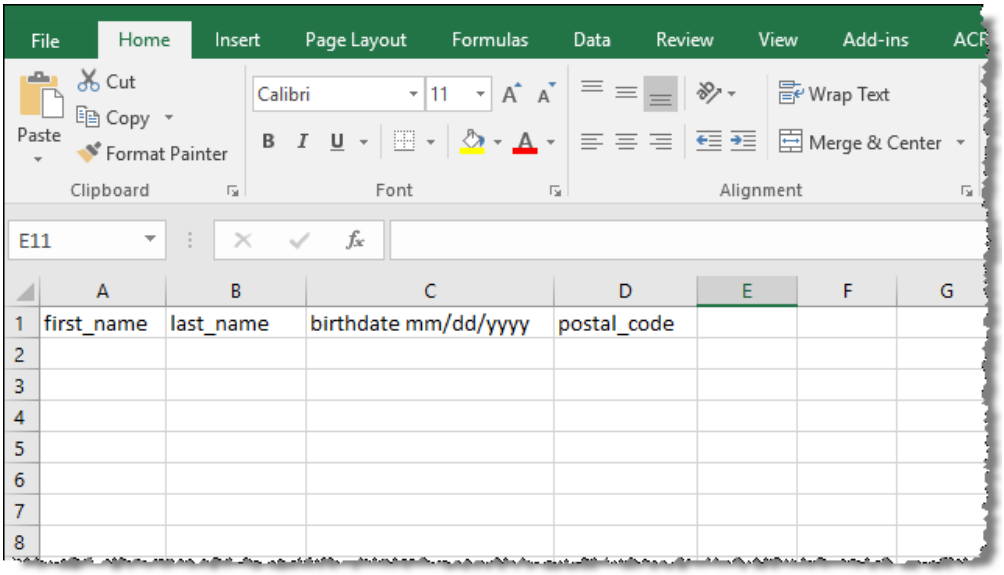
Note: *Once you have finished entering patients, continue to step 14.*

6. Click the **File Upload** radio button in the **How do you want to enter patients?** field at the top of the page.

The File Upload search is displayed.



7. Click **View Sample File** to download the sample CSV file.
8. Open the sample CSV file and complete the required fields.



Notes:

- *The patient's complete first name, last name, and date of birth (using the MM/DD/YYYY format) are required.*
- *You may enter the patient's ZIP code; however, it is not recommended.*

9. Once you have entered all patient information, save the file to your computer.

Note: *When naming your file, do not include spaces.*

10. Click **Choose File**, then select the file you created in step 9.

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11. Click **Validate Format** to download a validation report and ensure all records were entered correctly.
12. Once you open the validation report, any errors in your data will be listed in the **Errors** column. Please correct the errors and resubmit the corrected file. Note that if the **Errors** column is blank, the data is acceptable.

    Examples:

    - *File with errors:*

first_name	last_name	birthdate	postal_code	errors
john		1/1/1950		Last name can't be blank
first_name	last_name	birthdate	postal_code	errors
	smith	1/1/1960		First name can't be blank
first_name	last_name	birthdate	postal_code	errors
sally	smith			Birthdate can't be blank
first_name	last_name	birthdate	postal_code	errors
ronald	smith	1/1/1970		

    - *File with no errors:*

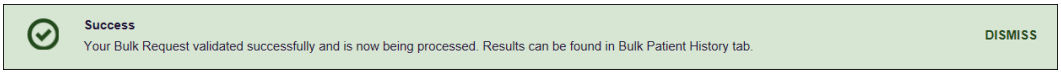
first_name	last_name	birthdate	postal_code	errors
john	smith	1/1/1950		
first_name	last_name	birthdate	postal_code	errors
adam	smith	1/1/1960		
first_name	last_name	birthdate	postal_code	errors
sally	smith	1/1/1970		

13. Repeat steps 10-12 until all errors have been corrected. Once all errors have been corrected and your file is validated, or if your file has no errors, continue to step 14.
14. Enter a name for your search session in the **Group Name** field.

    Note: *Providing a group name will help you more easily distinguish between searches in the Bulk Patient History tab.*

15. Enter the timeframe for which you wish to search in the **From** and **To** fields using the **MM/DD/YYYY** format.
16. If you wish to include other states in your search, click the checkbox next to the desired state(s) in the PMP Interconnect Search section of the page.
17. Click **Search**.

    A message is displayed indicating that your search is being processed.



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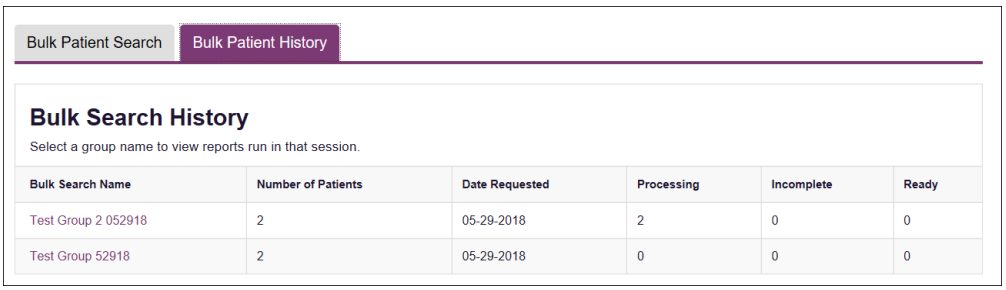
4.4.1 Viewing Bulk Patient Search Results

1. To obtain the results of a Bulk Patient Search, or to view previous searches, click the **Bulk Search History** tab (**Menu** > **Bulk Patient Search** > **Bulk Patient History**).

The Bulk Search History page is displayed.

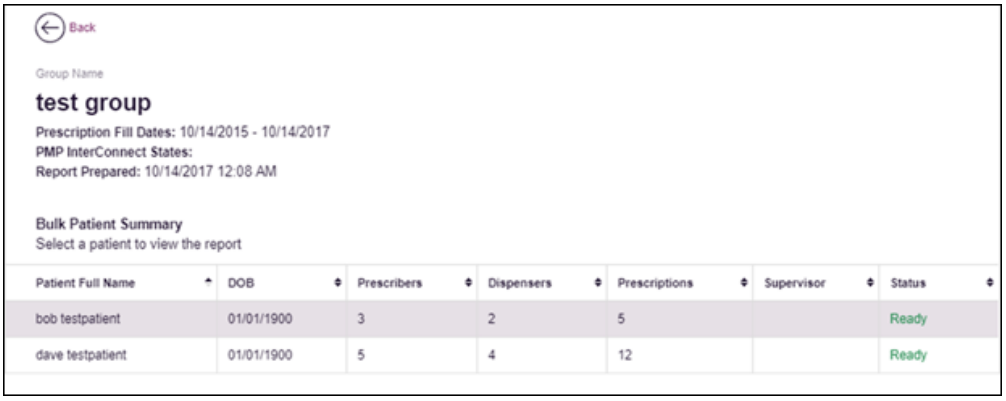


Bulk Search Name	Number of Patients	Date Requested	Processing	Incomplete	Ready
Test Group 2 052918	2	05-29-2018	2	0	0
Test Group 52918	2	05-29-2018	0	0	0

Notes:

- *The **Number of Patients** column provides the total number of patients included in your search.*
- *The **Processing** column provides the total number of searches remaining to be processed. If the number is "0," your search is complete.*
- *The **Incomplete** column provides the number of patient records that could not be found.*
- *The **Ready** column provides the number of patient search results available.*

2. Click the **Bulk Search Name** to view the results of that search.



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

3. Click a patient name to display that patient's search details.

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The search details are displayed below the table.

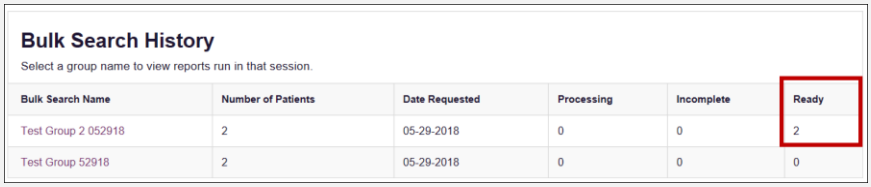
4. From this page, you can:
   - Click **View** to display the Narx Report.

     Note: *For more information on viewing report results, please refer to [Viewing a Narx Report](#).*

   - Click **Refresh** if you are reviewing a previous report and wish to run a current report.

Note: *If the Bulk Search History page indicates that all patient records are ready (screenshot a), but you click the search results and a patient's status is displayed as "incomplete" (screenshot b), it is likely that the search returned multiple results for that patient.*

(a)



(b)

To resolve this and view the report:

1. *Click the patient's name.*
   The patient search details are displayed.

2. *Click **Try Again**.*
   The Patient Request page is displayed.
3. *Refer to [Multiple Patients Identified](#) to run the report.*

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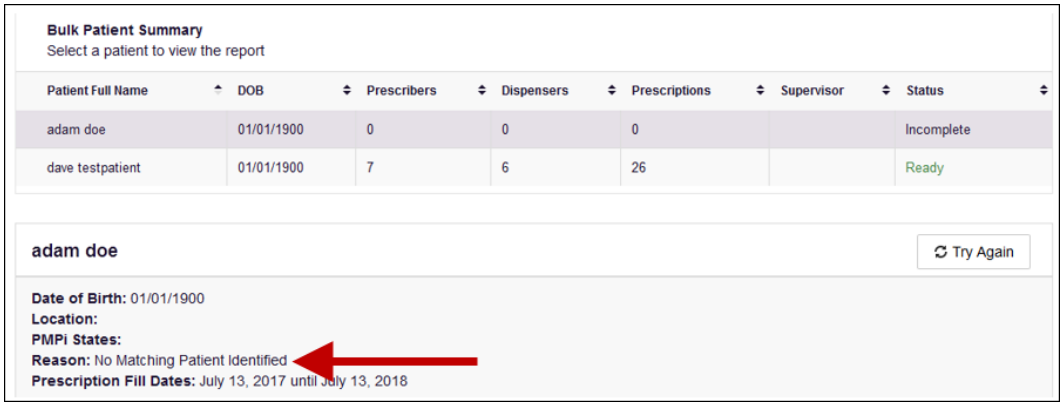
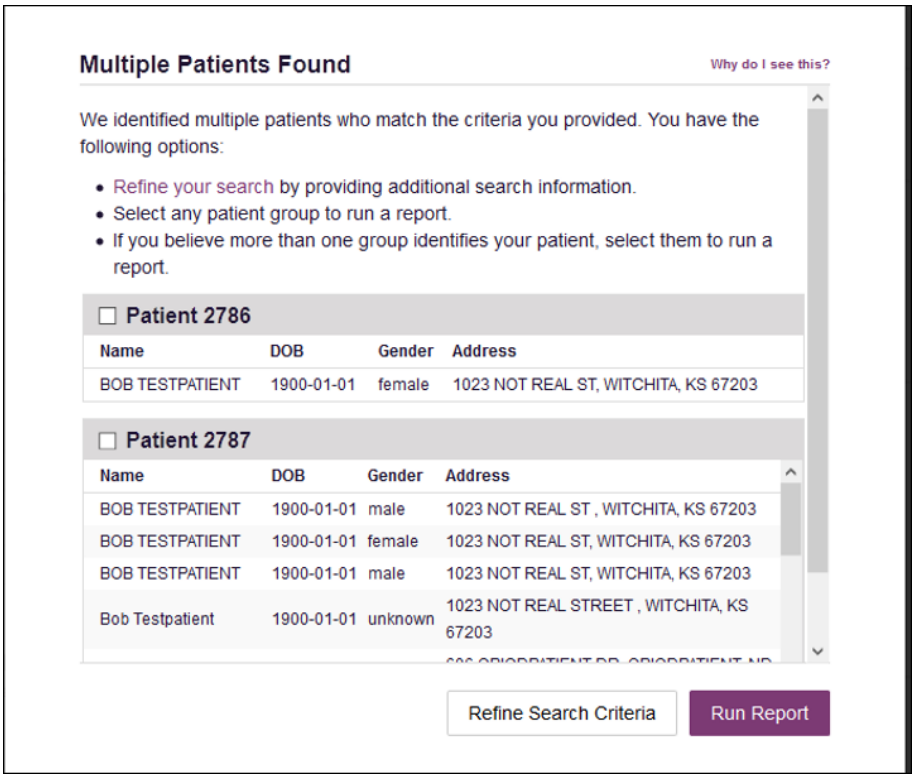
4.4.2 Incomplete Bulk Patient Search Results

The **Status** column for an individual patient may indicate **Incomplete** for two reasons: **No Matching Patient Identified** or **Multiple Patient**. Upon clicking the patient's name, the reason is listed in the **Reason** field of the search details.



1. **No Matching Patient Identified.** The system was not able to locate a patient matching your search criteria. Click **Try Again** to open the Patient Request page where you can perform a partial search or modify your search criteria.
2. **Multiple Patient.** The system identified multiple patients matching your search criteria. Click **Try Again** to open the Patient Request page, then click **Search** at the bottom of the page. The Multiple Patients Found window will display prompting you to select the patients for whom you wish to run a report. The Multiple Patients Found window is shown on the following page.



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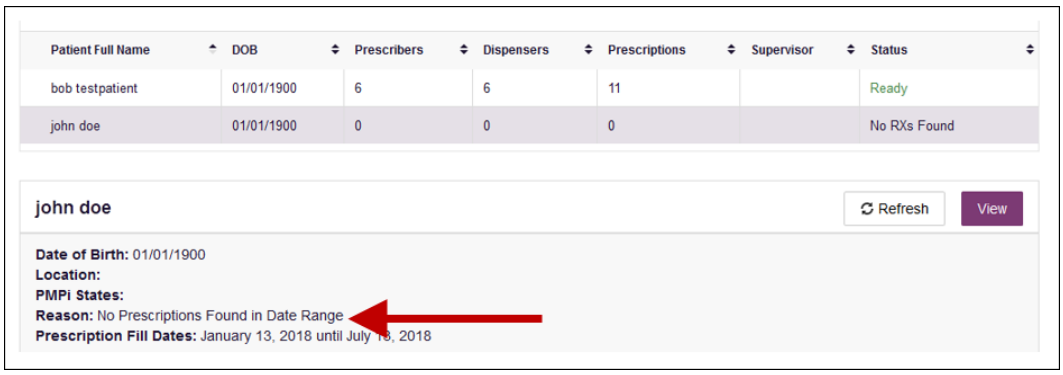
Select the correct patient(s), and then click **Run Report** to view the Narx Report. For more information on viewing report results, please refer to Viewing a Narx Report.

4.4.3 No Prescriptions Found in Bulk Patient Search

If the **Status** column indicates **No RXs Found** for a patient, the patient exists in the database, but no prescriptions were reported for the patient in your report timeframe. Upon clicking the patient's name, **No Prescriptions Found in Date Range** will be indicated in the **Reason** field.



You may click **View** if you need to export the blank report, or you may click **Refresh** to display the Patient Request page where you can change the date range and run a new report.

4.5 My Rx

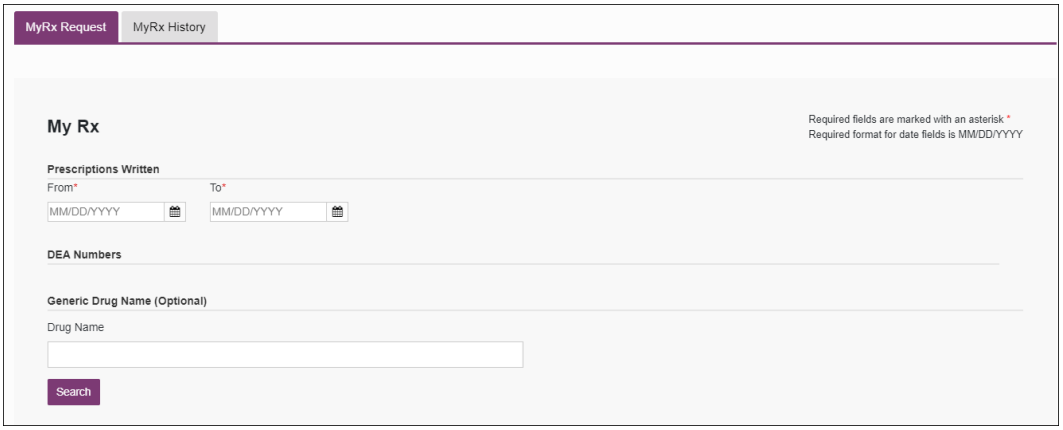
If you have a DEA number associated with your AWARxE account, My Rx allows you to run a report that displays the filled prescriptions for which you were listed as the prescriber.

Note: *This functionality is only available if you have a DEA number associated with your user profile.*

To run the My Rx report:

1. Click **Menu** > **My Rx**.

   The My Rx search page is displayed.



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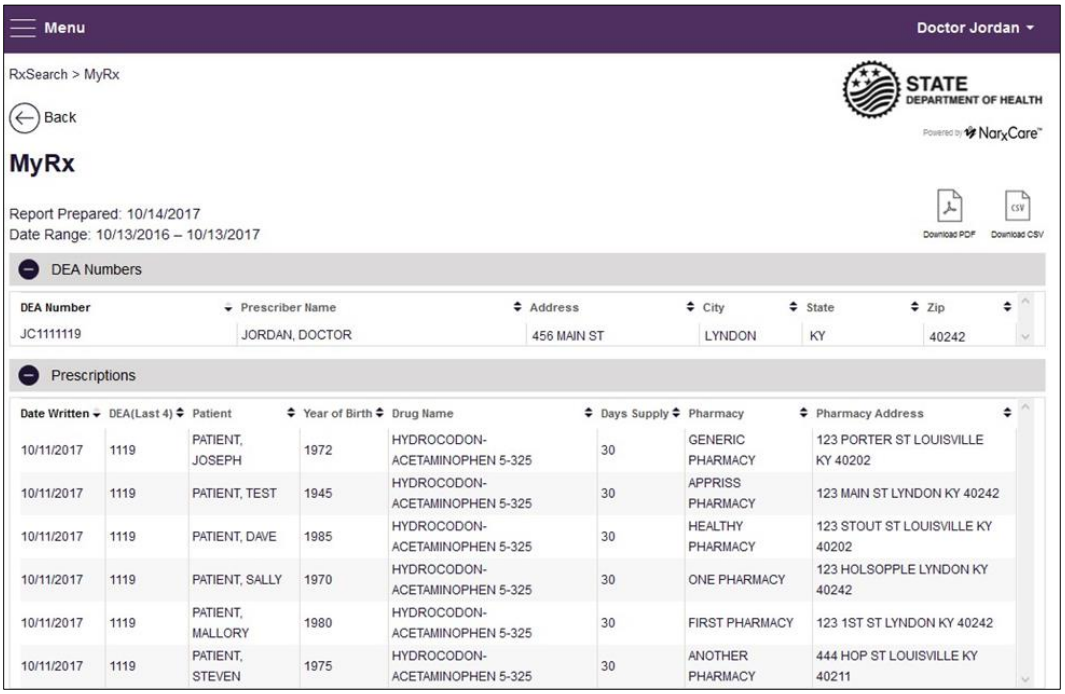
2. Enter the date range for your search in the **From** and **To** fields using the *MM/DD/YYYY* format.
3. Click the checkbox next to the DEA number(s) for which you wish to run a report.
4. If you wish to search for a specific drug, enter the generic drug name in the **Drug Name** field.
5. Click **Search**.

   Your report results are displayed. If configured by your PMP Administrator, you may click **Download PDF** or **Download CSV** to export your report results.



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5 Rx Management

The Rx Management page, located under **Menu** > **Data**, allows certain roles to manage prescriptions within PMP AWARxE. If you are a dispenser, you can correct dispensation errors, modify inaccuracies on existing prescriptions (e.g., incorrect prescriber information), add new prescriptions, and review prescription history for the pharmacy.

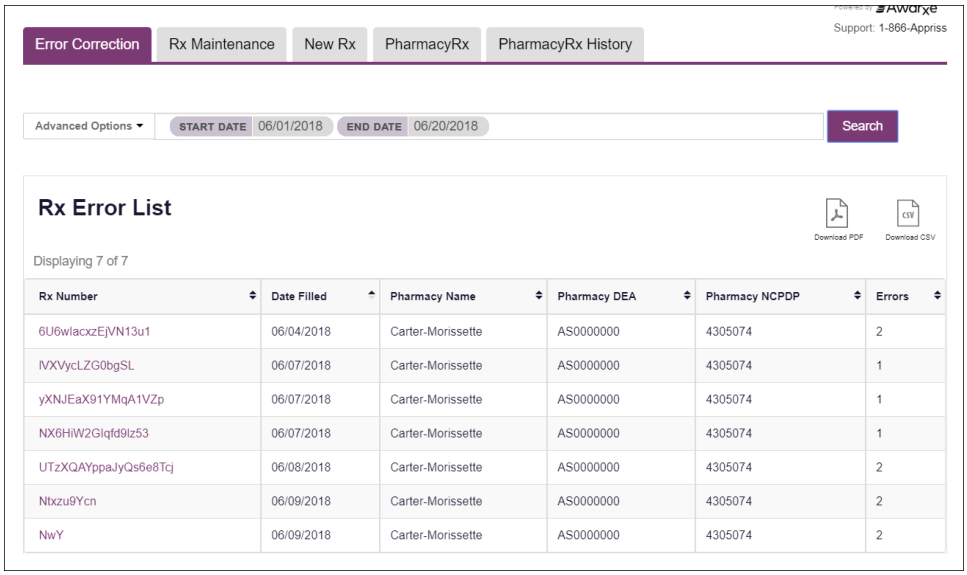
At this time, prescribers do not have the ability to manually correct a prescription error. Prescribers wishing to correct an error must first check with the dispensing pharmacy to confirm the data was entered correctly. If the data is incorrect, the pharmacy can resubmit the data through their pharmacy software or manually through the Error Correction page. Both prescribers and pharmacists must submit a request to the State Administrator at akpdmp@alaska.gov to correct data within 72 hours of identifying a prescription error.

Notes:

- *Depending on the settings enabled by your State Administrator for the portal in general and for specific roles types, different options may be available. The screenshots and descriptions in the following sections are all inclusive. If an option is not available, then it has not been enabled by your State Administrator.*
- *In order to utilize this functionality, you must have an Employer Identifier on your account and agree that you are responsible for correcting/maintaining prescription information of the employer Identifier for submission to PMP AWARxE. This must be done during registration. If you have already registered and do not have any Pharmacy Identifiers available for selection, please contact your State Administrator to have the necessary Identifiers added and to agree to the terms of use.*

5.1 Error Correction

The Error Correction page displays a list of erroneous records submitted by you or by your employer, if applicable. To access the Error Correction page, click **Data** > **RxManagement** > **Error Correction**.



Rx Number	Date Filled	Pharmacy Name	Pharmacy DEA	Pharmacy NCPDP	Errors
6U6wlacxzEjVN13u1	06/04/2018	Carter-Morissette	AS0000000	4305074	2
lVXVycLZG0bgSL	06/07/2018	Carter-Morissette	AS0000000	4305074	1
yXNJEaX91YMqA1VZp	06/07/2018	Carter-Morissette	AS0000000	4305074	1
NX6HiW2GIqfd9lz53	06/07/2018	Carter-Morissette	AS0000000	4305074	1
UTzXQAYppaJyQs6e8Tcj	06/08/2018	Carter-Morissette	AS0000000	4305074	2
Ntxzu9Ycn	06/09/2018	Carter-Morissette	AS0000000	4305074	2
NwY	06/09/2018	Carter-Morissette	AS0000000	4305074	2

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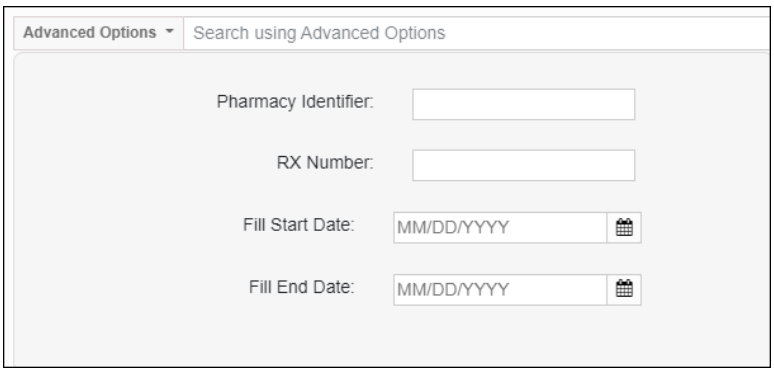
From this page, you can search for specific records and/or correct the errors.

Note: *Error correction within AWARxE is only available for prescriptions submitted via SFTP, file upload, or real-time submission to PMP Clearinghouse. Any prescriptions submitted via Universal Claim Form cannot be submitted to PMP AWARxE with a validation error, as the error must be corrected prior to submission.*

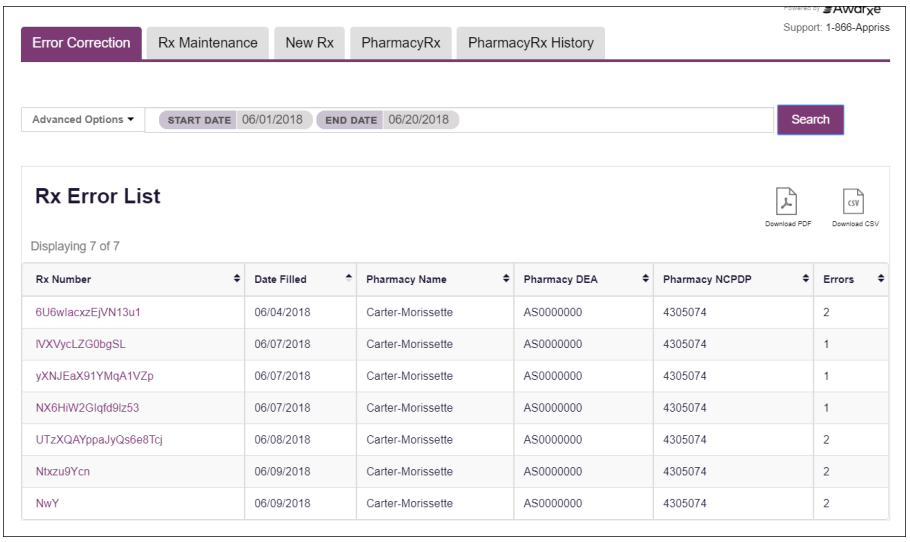
5.1.1 Search for a Record

1. From the Error Correction tab, click **Advanced Options**.



2. Enter your search criteria in the appropriate field(s). You may search by any or all of the following:
   - Pharmacy Identifier
   - RX Number
   - Fill Start Date
   - Fill End Date
3. Click **Search**.

   A list of records matching your search criteria is displayed as shown on the following page.



Rx Number	Date Filled	Pharmacy Name	Pharmacy DEA	Pharmacy NCPDP	Errors
6U6wIacxzEjVN13u1	06/04/2018	Carter-Morissette	AS0000000	4305074	2
lVXVycLZG0bgSL	06/07/2018	Carter-Morissette	AS0000000	4305074	1
yXNJEaX91YMqA1VZp	06/07/2018	Carter-Morissette	AS0000000	4305074	1
NX6HiW2Glqfd9lz53	06/07/2018	Carter-Morissette	AS0000000	4305074	1
UTzXQAYppaJyQs6e8Tcj	06/08/2018	Carter-Morissette	AS0000000	4305074	2
Ntxzu9Ycn	06/09/2018	Carter-Morissette	AS0000000	4305074	2
NwY	06/09/2018	Carter-Morissette	AS0000000	4305074	2

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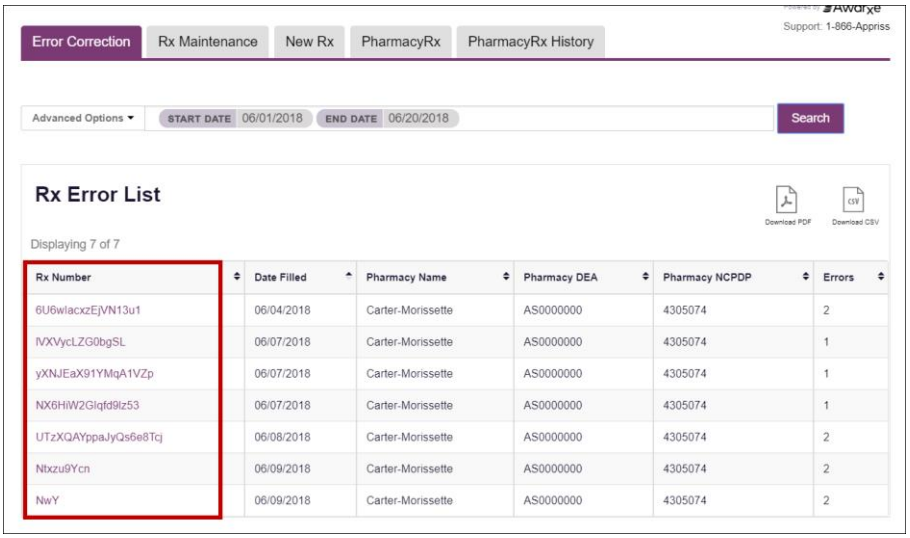
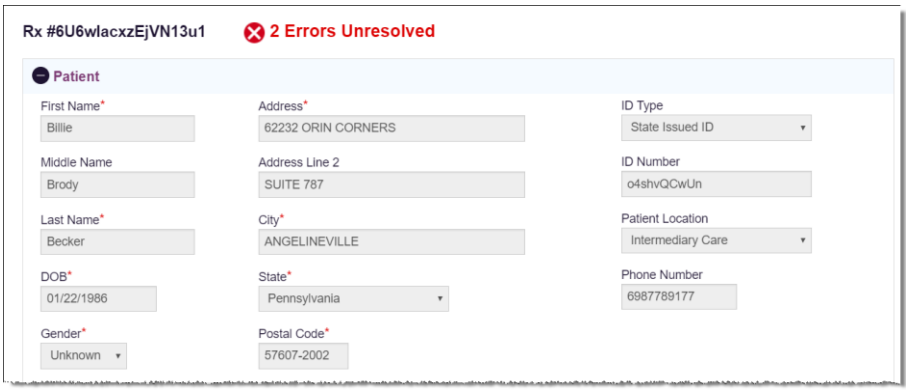
5.1.2 Correct an Error

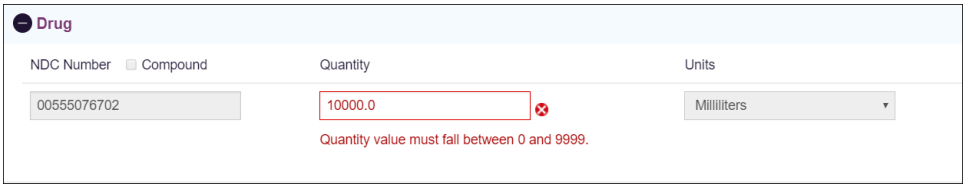
1. From the Error Correction page, click the link in the **Rx Number** column for the record you wish to correct.



The record is displayed. *Note that the number of errors in the record is displayed at the top of the page.*



2. Scroll through the record to locate the error(s). Fields containing errors are red, and the specific error message is displayed below the field.



3. Correct the error(s), and then click **Submit**.
   a. If all errors have been resolved, the record is submitted.

      Or

   b. If there are still errors on the page, the number of errors is displayed at the top of the page. Repeat steps 2-3 until all errors have been corrected.

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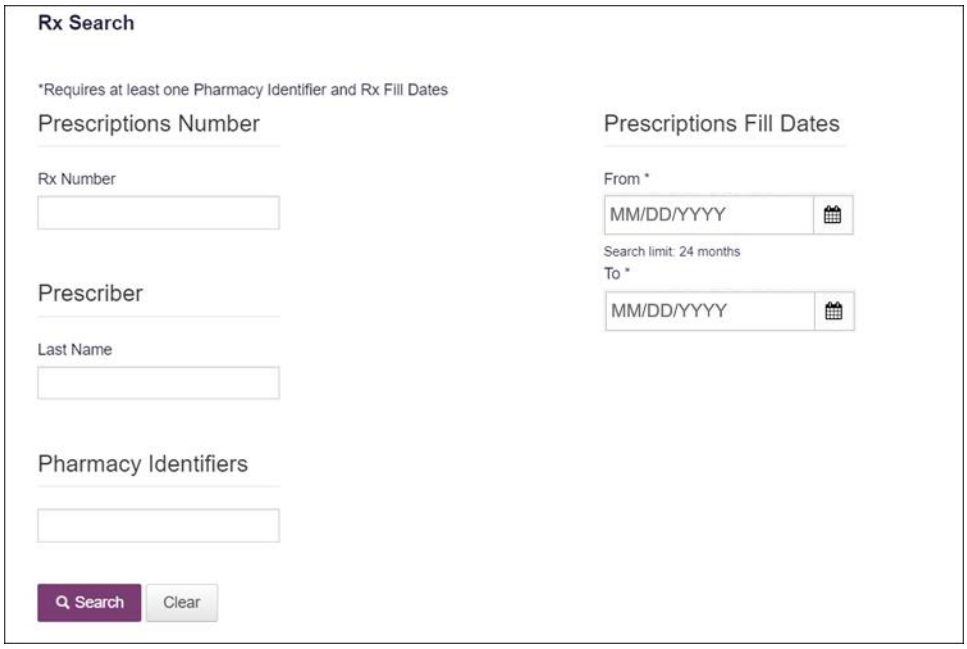
5.2 Rx Maintenance

Rx Maintenance allows you to search for a specific prescription record and correct or void that record. To access the Rx Maintenance page, click **Data** > **Rx Management** > **Rx Maintenance**.

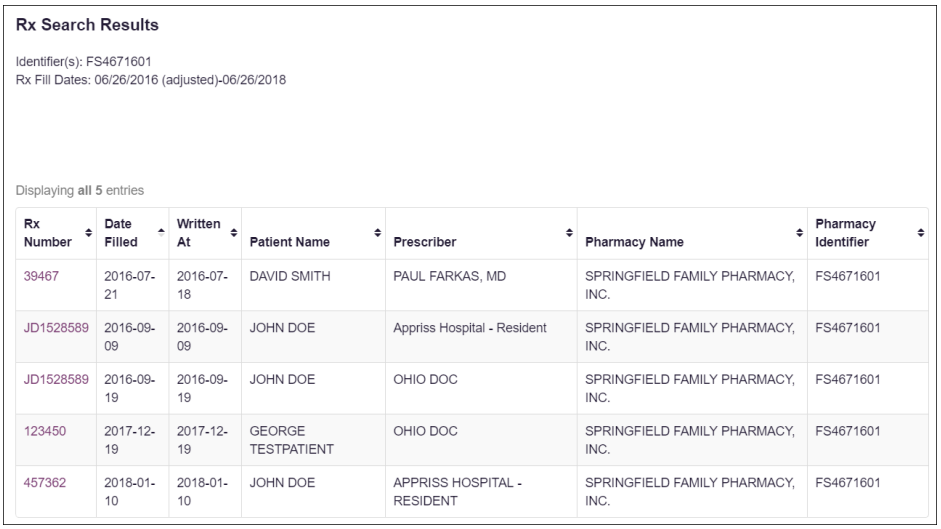


5.2.1 Correcting Prescriptions

To search for and correct a prescription record:

1. Complete the fields on the Rx Search page. Note that the **Pharmacy Identifiers** and **Prescription Fill Dates** fields are required.
2. Click **Search**.

   Your search results are displayed.



Rx Number	Date Filled	Written At	Patient Name	Prescriber	Pharmacy Name	Pharmacy Identifier
39467	2016-07-21	2016-07-18	DAVID SMITH	PAUL FARKAS, MD	SPRINGFIELD FAMILY PHARMACY, INC.	FS4671601
JD1528589	2016-09-09	2016-09-09	JOHN DOE	Appriss Hospital - Resident	SPRINGFIELD FAMILY PHARMACY, INC.	FS4671601
JD1528589	2016-09-19	2016-09-19	JOHN DOE	OHIO DOC	SPRINGFIELD FAMILY PHARMACY, INC.	FS4671601
123450	2017-12-19	2017-12-19	GEORGE TESTPATIENT	OHIO DOC	SPRINGFIELD FAMILY PHARMACY, INC.	FS4671601
457362	2018-01-10	2018-01-10	JOHN DOE	APPRISS HOSPITAL - RESIDENT	SPRINGFIELD FAMILY PHARMACY, INC.	FS4671601

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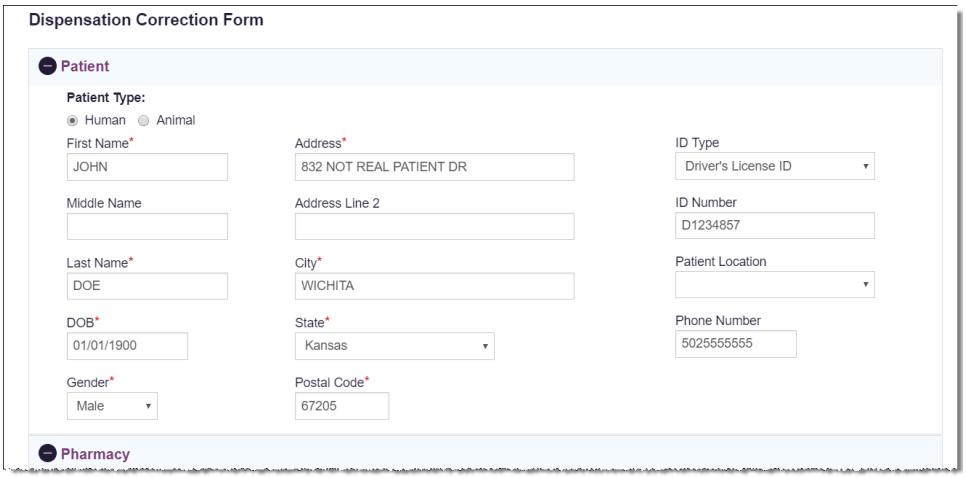
3. Click the link in the **Rx Number** column for the record you wish to view and/or correct.

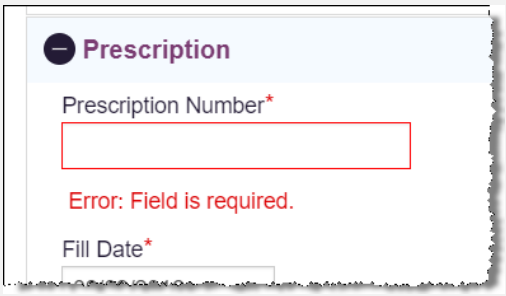
   The Dispensation Correction Form page is displayed.



4. Make the necessary corrections, then click **Submit**.

   If all fields pass validation, a message is displayed indicating that the record was successfully submitted.

   Note: *If any fields do not pass validation, an error message is displayed indicating that errors exist. Click* ***OK*** *on the error message, then scroll through the form to locate the errors. Fields containing errors are red, and the specific error message is displayed below the field.*



   Once all errors have been corrected, click ***Submit****.*

5.2.2 Voiding Prescriptions

If you need to void a prescription:

1. Perform steps 1-3 in the Correcting Prescriptions section to locate the prescription.
2. Scroll down to the bottom of the Dispensation Correction page and click **Void**.

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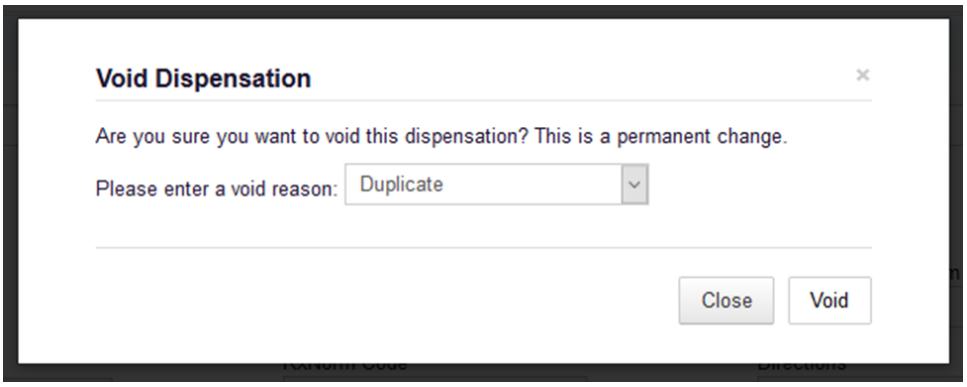
The Void Dispensation window is displayed asking you to confirm that you wish to void the record.



3. Select the reason you wish to void the record from the **Please enter a void reason** drop-down, then click **Void**.

Note: *Voiding a record is a permanent change. In the event a record is voided that should not have been, you will need to resubmit the record.*

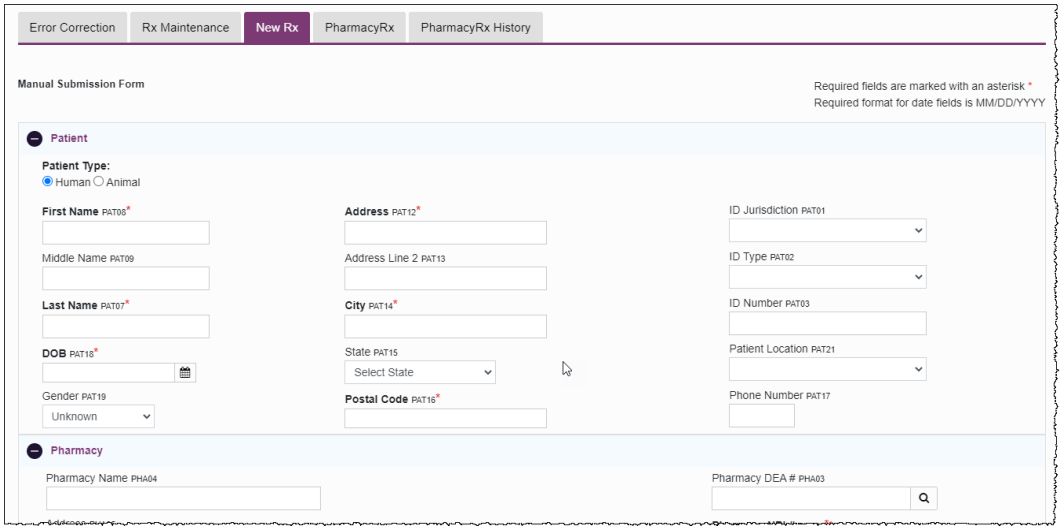
5.3 New Rx

You can manually enter your prescription information into the Alaska PDMP database using the Manual Submission Form within the PMP AWARxE web portal. This form allows you to enter patient, prescriber, dispenser, and prescription information.

Please refer to the *Data Submission Guide for Dispensers* for the complete list of reporting requirements.

Note: *This form cannot be saved and must be completed near the time of creation to avoid loss of information.*

To access the New Rx page, click **Data** > **Rx Management** > **New Rx**.



To enter a new dispensation:

1. Complete the required fields.

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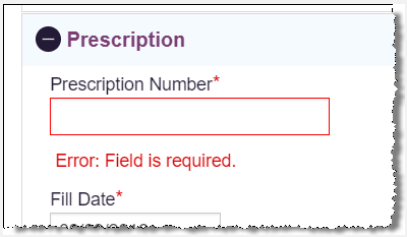
Notes:

- *A red asterisk (*****) indicates a required field.*
- ***If you are entering a compound**, click the **Compound** checkbox in the Drug Information section of the page, complete the required fields for the first drug ingredient, then click **Add New** to add additional drug ingredients.*

2. Once you have completed all required fields, click **Submit**.

   If all fields pass validation, a message is displayed indicating that the record was successfully submitted.

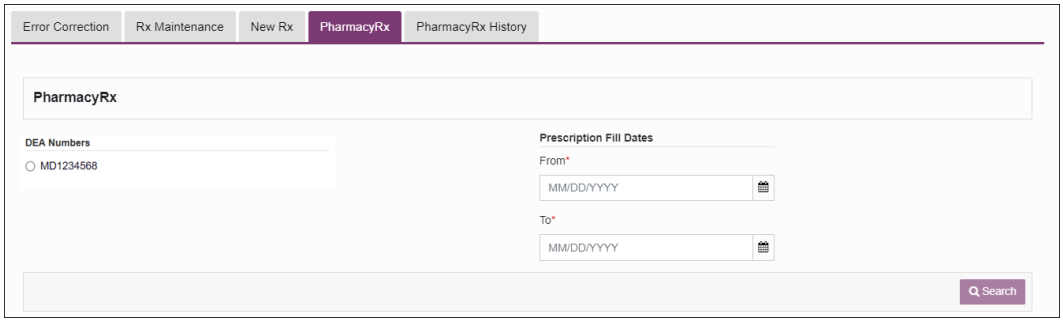
***Note:** If any fields do not pass validation, the number of errors is displayed at the top of the page. Scroll through the form to locate the errors. Fields containing errors are red, and the specific error message is displayed below the field.*



*Once all errors have been corrected, click **Submit**.*

5.4 PharmacyRx

If you have a DEA number associated with your AWARxE account, PharmacyRx allows you to run a report that displays all dispensations associated with that DEA number. To access the PharmacyRx page, click **Data** > **Rx Management** > **PharmacyRx**. This feature is only available for pharmacists, pharmacist's delegates, and pharmacists-in-charge.



To perform a PharmacyRx search:

1. Click the radio button next to the DEA number for which you wish to generate the report.
2. Select the date range for the report in the **From** and **To** fields, using the *MM/DD/YYYY* format, or select a date from the calendar that is displayed when you click in these fields.
3. Click **Search**.

   Your report results are displayed. If configured by your PDMP Administrator, you may click **Download PDF** or **Download CSV** to export your report results.

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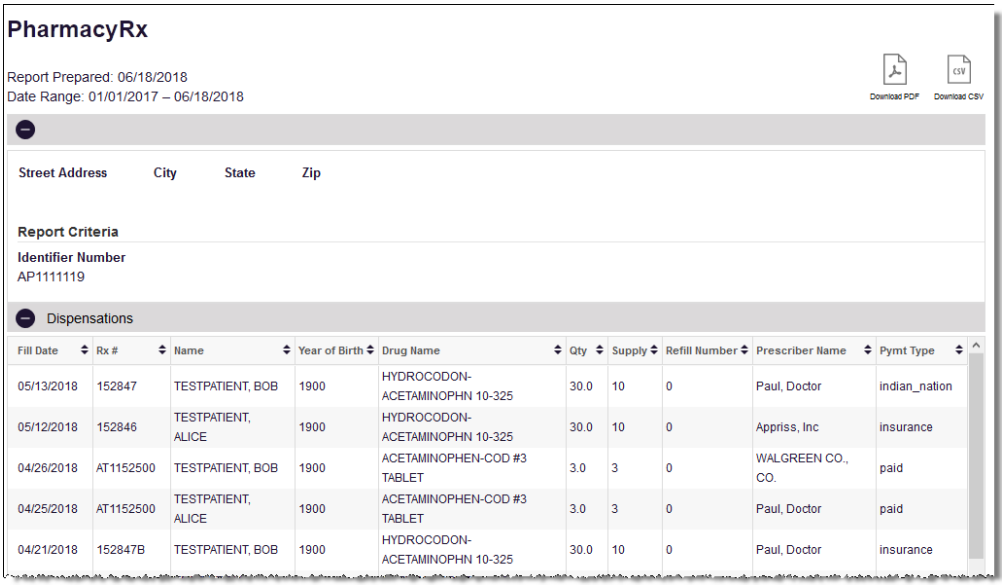

PharmacyRx

Report Prepared: 06/18/2018
Date Range: 01/01/2017 – 06/18/2018

Download PDF Download CSV

Street Address	City	State	Zip

Report Criteria

Identifier Number
AP1111119

Dispensations

Fill Date	Rx #	Name	Year of Birth	Drug Name	Qty	Supply	Refill Number	Prescriber Name	Pymt Type
05/13/2018	152847	TESTPATIENT, BOB	1900	HYDROCODON-ACETAMINOPHN 10-325	30.0	10	0	Paul, Doctor	indian_nation
05/12/2018	152846	TESTPATIENT, ALICE	1900	HYDROCODON-ACETAMINOPHN 10-325	30.0	10	0	Appriss, Inc	insurance
04/26/2018	AT1152500	TESTPATIENT, BOB	1900	ACETAMINOPHEN-COD #3 TABLET	3.0	3	0	WALGREEN CO., CO.	paid
04/25/2018	AT1152500	TESTPATIENT, ALICE	1900	ACETAMINOPHEN-COD #3 TABLET	3.0	3	0	Paul, Doctor	paid
04/21/2018	152847B	TESTPATIENT, BOB	1900	HYDROCODON-ACETAMINOPHN 10-325	30.0	10	0	Paul, Doctor	insurance

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6 User Profile

The User Profile section of the PMP AWARxE menu allows you to manage your AWARxE user profile, including:

- Viewing and updating your profile information
- Set your default PMP InterConnect states
- Managing your delegate account(s)
- Updating or resetting your password

6.1 My Profile

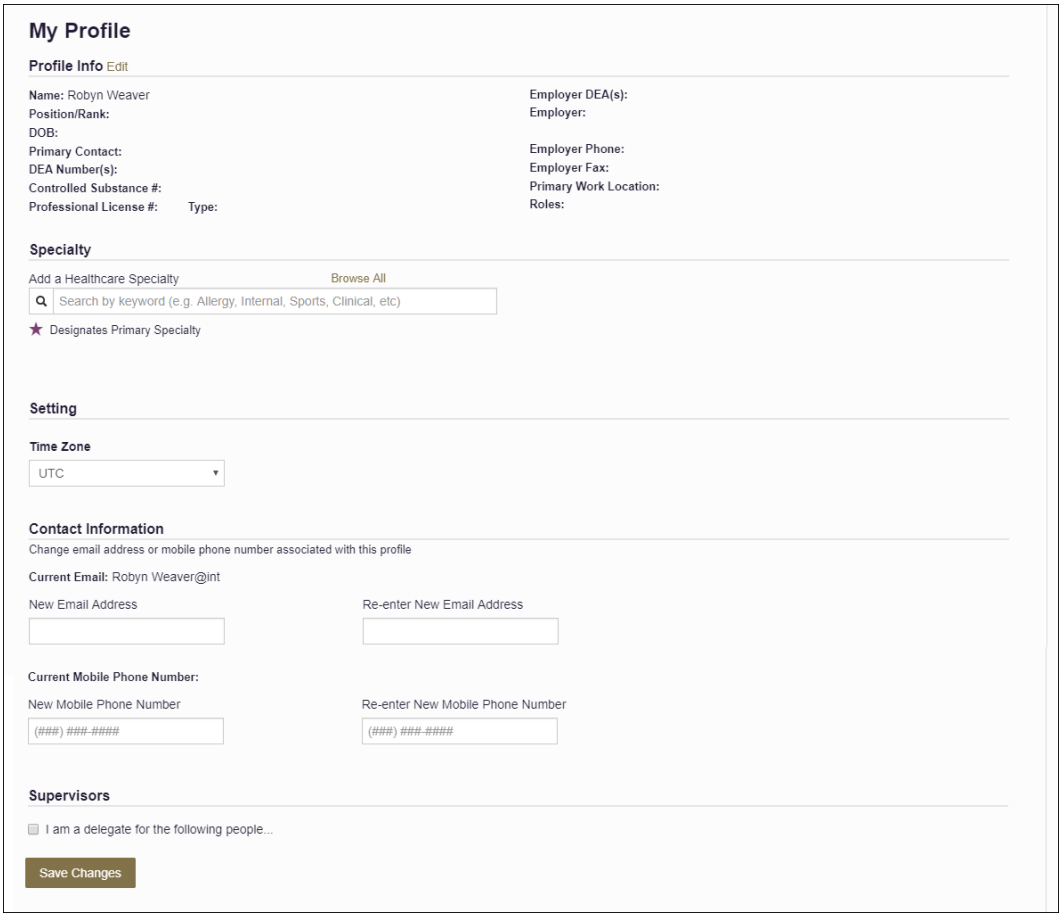
My Profile allows you to view your account demographics, including user role, license numbers, etc. as well as update your email address, mobile phone number, healthcare specialty, time zone, and supervisor(s) (if you are a delegate).

Note: *If you need to update your personal or employer information (including DEA/NPI/NCPDP numbers), please contact your licensing board.*

To update your account:

1. Click **Menu** > **My Profile**.

   The My Profile page is displayed.



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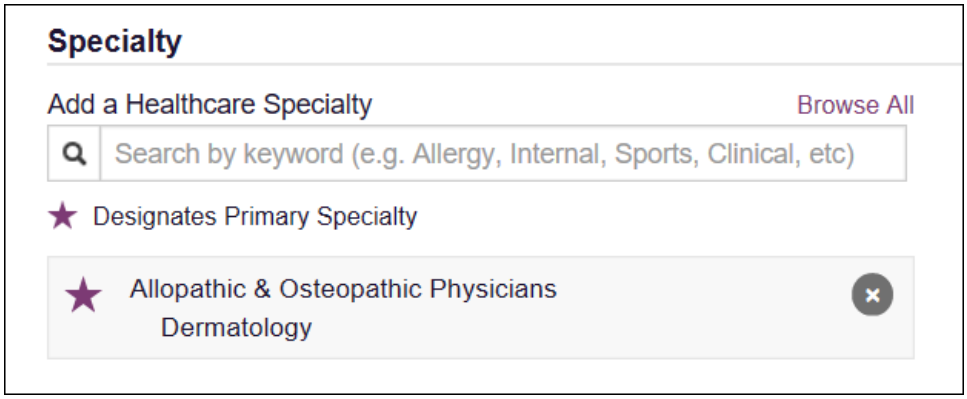
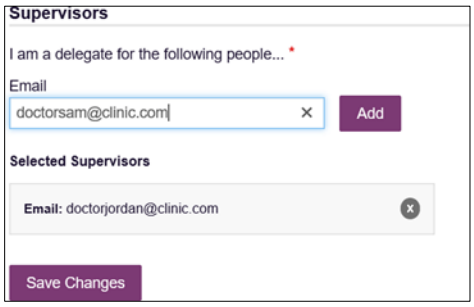
2. Update your information as necessary. The following notes may be helpful in updating your information:
   - **Healthcare Specialty:** You can add or update your healthcare specialty in the Specialty section of the page. Search for your specialty by typing a few characters into the **Healthcare Specialty** field, or click **Browse All** to view all available specialties and select yours from the list. If you have multiple specialties, you can designate your primary specialty by clicking the star icon to the left of the specialty. To remove a specialty, click the "x" button to the right of the specialty.



   - **Updating Time Zone:** To update your time zone, select the correct time zone from the **Time Zone** drop-down.
   - **Adding Supervisors:** If you are a delegate, you may add supervisors to or remove supervisors from your account in the Supervisors section of the page. To add a supervisor, enter the supervisor's email address, and then click **Add**. To remove a supervisor, click the "x" button next to the supervisor.



   - **Contact Information:** You may update the email address and mobile phone number associated with your account in the Contact Information section of the page.

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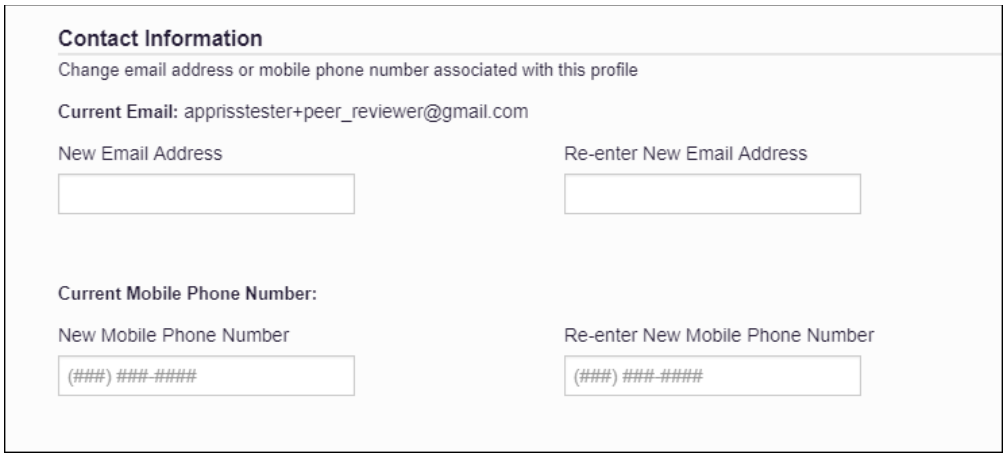

- To update the email address associated with your account, enter the new email address in the **New Email Address** field, then re-enter it in the **Re-enter Email Address** field. Once your changes have been saved, you will receive an email asking you to verify the new email address. Please ensure that you click the link in the verification email to verify your new email address. *Note that the verification link is only valid for 20 minutes. If you click the verification link after it has expired, you will be sent a new link.*
- To update the mobile phone number associated with your account, enter the new phone number in the **New Mobile Phone Number** field, then re-enter it in the **Re-enter New Mobile Phone Number** field.

  Note: *You must have a mobile phone number on file to utilize the mobile password reset functionality.*

3. Once you have made all necessary changes, click **Save Changes**.

6.2 Setting Default PMP InterConnect States

PMP AWARxE is configured to integrate with PMP InterConnect to expand your search capabilities when researching a patient's prescription history. This feature allows you to configure states to be selected by default when performing a Patient Request. To set your default PMP InterConnect states:

1. Click **Menu** > **Default PMPi States**.

   The Default InterConnect PMPs page is displayed.

2. Click the checkbox next to the state(s) you would like to be selected by default when performing a Patient Request.

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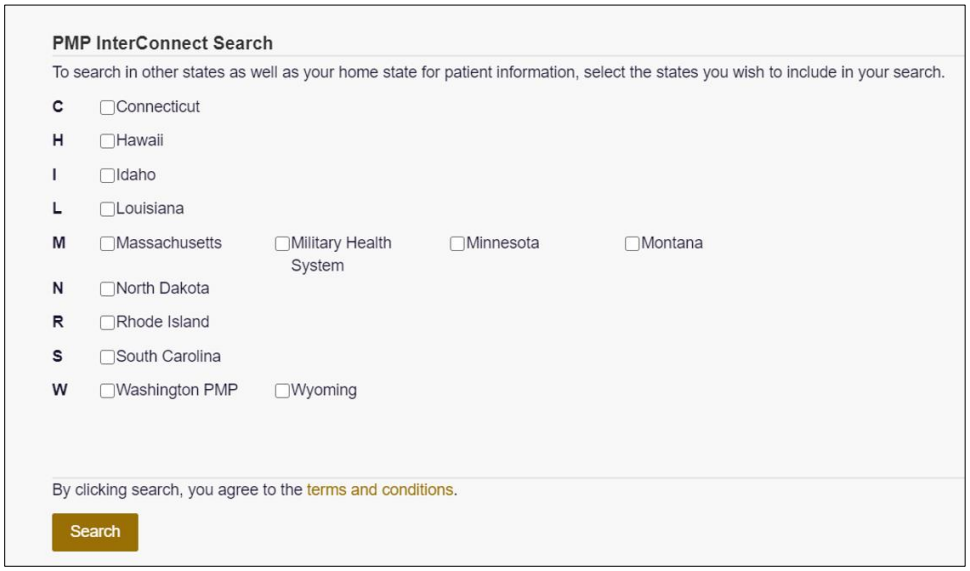
3. Click **Update Defaults**.

   Your selections are saved and will be selected by default when you create a Patient Request.

   Note: *You can de-select default states as necessary—selecting default states does not require you to search for those states every time.*

6.2.1 Using PMP InterConnect with a Patient Rx Search

1. When creating a new Patient Request, the list of available PMP InterConnect states is provided at the bottom of the page.



   Note: *Available states are dependent upon your state's configurations and your user role.*

2. Click to select the state(s) from which you wish to obtain results. You may also click **Select All** to select all available states.
3. Once you click Search, PMP AWARxE submits the request to the selected states' PMP InterConnect systems. Results from those states are then blended into the final Narx Report.

   Notes:

   - *The report does not separate prescription information on a state-by-state basis. It incorporates all information from all sources into a single report.*
   - *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.*

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6.3 Delegate Management

If you are a supervisor, the Delegate Management function allows you to approve or reject new delegates, or remove existing delegates from your account.

6.3.1 Approving and Rejecting Delegates

If a user registers as a delegate and selects you as their supervisor, you will receive email notification that a delegate account is pending your approval.

Note: *If the request is not acted upon, the system will send follow-up emails advising you that action is still required.*

Once you have received the email notification:

1. Log in to PMP AWARxE.
2. Click **Menu** > **Delegate Management**.

   The Delegate Management page is displayed.

Note: *New delegates are identified with a status of "Pending."*

3. Click the delegate's name to display their information in the detail card at the bottom of the page.

4. Click **Approve** to approve the delegate;

   Or

5. Click **Reject** to reject the delegate. If rejected, the delegate will be removed.

6.3.2 Removing Delegates

If you need to remove a delegate from your account:

1. Click **Menu** > **Delegate Management**.

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The Delegate Management page is displayed.

Delegate Management

Select a delegate to review details.

First	Last	Role	Delegate Status	Date Requested	Date Verified
Jordan	Delegate	Prescriber Delegate - Unlicensed	Pending	04/06/2018	
Adam	Delegate	Prescriber Delegate - Unlicensed	Approved	04/06/2018	04/11/2018

2. Click the delegate's name to display their information in the detail card at the bottom of the page.
3. Click **Remove**.

   Upon removal, the delegate's status will be returned to "Pending." The delegate is not removed from your delegate list.

Notes:

- *If you need to add the user again at a later date, select the former delegate, then click **Approve** to add them to your account.*
- *If you need to completely dissociate a delegate from your account, select the former delegate, then click **Reject**. Rejecting a delegate will remove them from your account.*
- *It is your responsibility to regularly maintain your delegate list and remove access if it is no longer necessary.*

6.4 Password Management

Your AWARxE password expires every 180 days. There are two ways you can manage your password:

1. You can proactively change your password within the application before it expires by updating your current password.
2. If your password has already expired, or if you have forgotten your password, you can reset your password. *Note that you can reset your password via email or mobile phone, if you have a mobile phone number on file. Please refer to the My Profile section of this document for instructions on adding a mobile phone number to your account.*

6.4.1 Updating a Current Password

If your password has not expired, but you would like to proactively reset it, you can do so within the AWARxE application.

***Note:** This functionality requires that you know your current password and are logged into PMP AWARxE.*

To update your password:

1. Click **Menu** > **Password Reset**.

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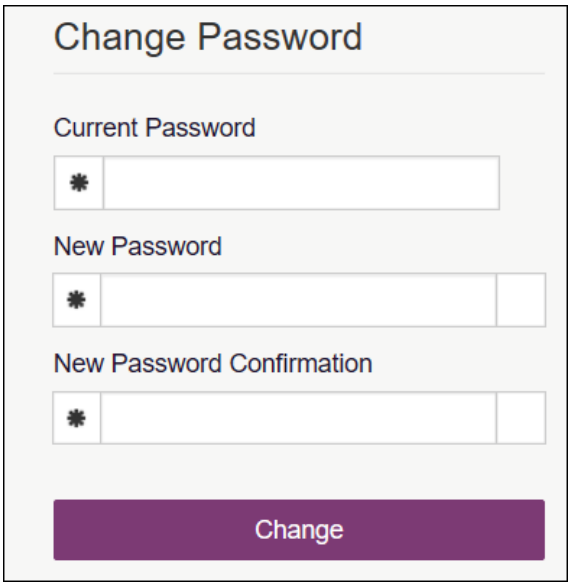
The Change Password page is displayed.



2. Enter your current password in the **Current Password** field.
3. Enter a new password in the **New Password** field, then re-enter it in the **New Password Confirmation** field. The password guidelines are provided below.

   Passwords must contain:

   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) number*
   - *One (1) special character such as !, @, #, $, etc.*
4. Click **Change**.

   Your password is updated, and you will use the new password the next time you log in to the system.

6.4.2 Resetting a Forgotten Password

1. If you have forgotten your password or your password has expired, navigate to https://alaska.pmpaware.net.

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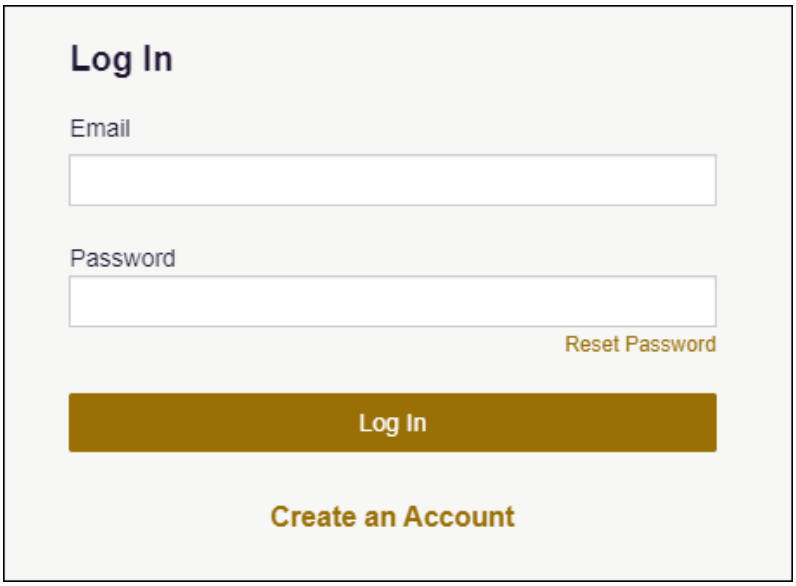
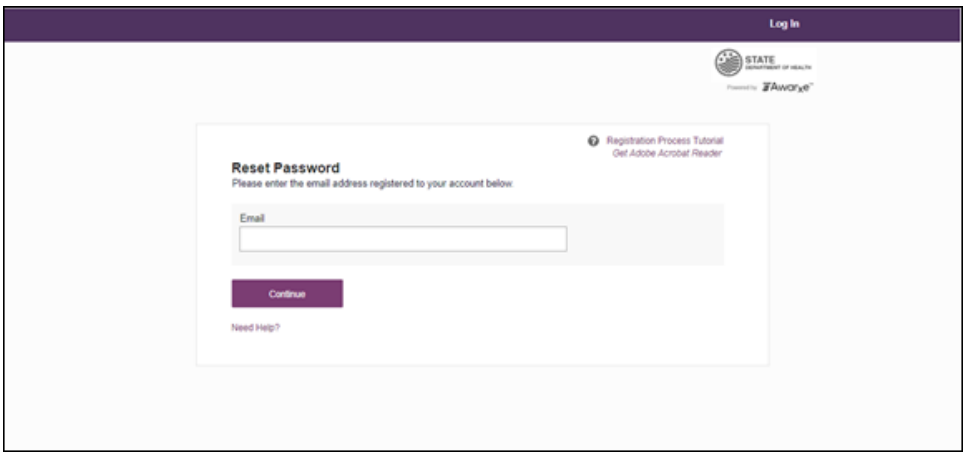
The Log In page is displayed.



2. Click **Reset Password**.

   The Reset Password page is displayed.



3. Enter the email address associated with your account, then click **Continue**.

   You will be prompted to select how you want to reset your password.

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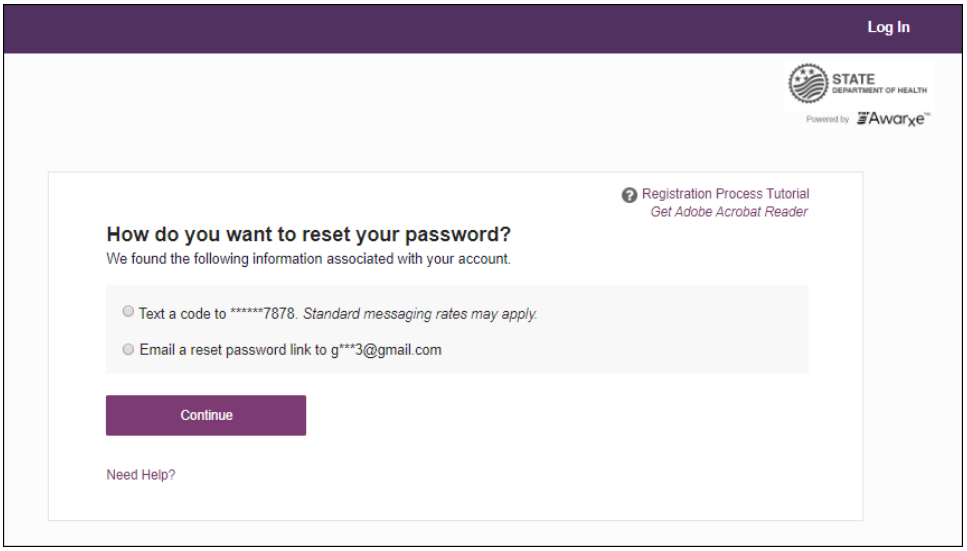
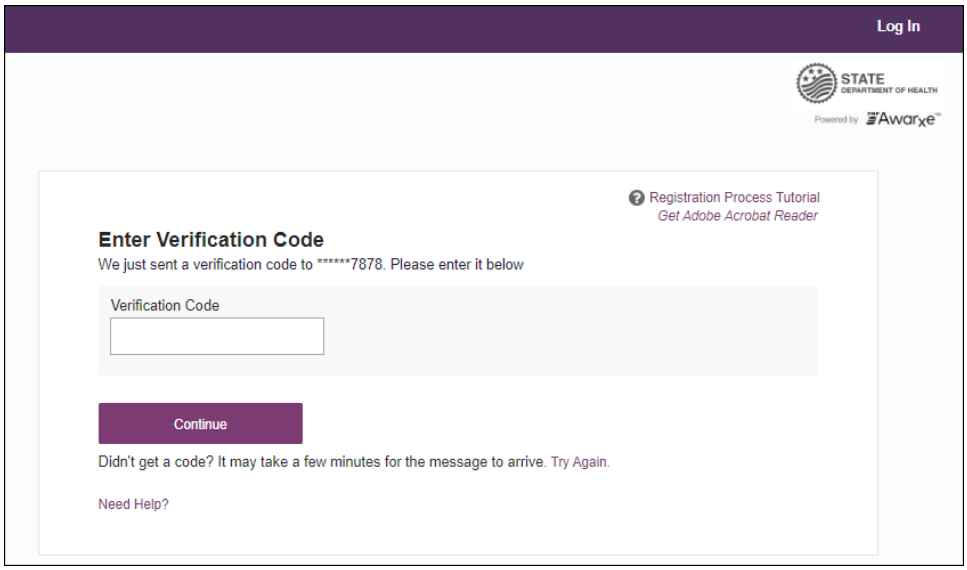


4. Select whether you would like to reset your password via a code texted to your mobile phone or via an email containing a link to reset the password.

   Note: *Resetting your password via mobile phone requires that you have a mobile phone number stored in the system. Please refer to My Profile for information on adding your mobile phone number to your account. If you do not have a mobile phone number stored in the system, and you cannot remember your password or it has expired, please select the email option.*

5. Click **Continue**.
   a. If you selected the mobile phone option, a verification code is sent to your mobile phone, and you are prompted to enter that code.



   Once you have received the verification code, enter it, then click **Continue**.

   OR

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b. If you selected the email option and the email address you provided is valid and registered, you will receive an email containing a link to reset your password. Once you have received the email, click the link.

Once you have entered the verification code or clicked the link in the email, the Change Password page is displayed.

6. Enter a new password in the **New Password** field, then re-enter it in the **New Password Confirmation** field. The password guidelines are provided below.

Passwords must contain:

- *At least eight (8) characters*
- *One (1) uppercase letter*
- *One (1) lowercase letter*
- *One (1) special character such as !, @, #, $, etc.*

You cannot re-use any of your last 12 passwords.

7. Click **Change**.

Your password is updated, and you will use the new password the next time you log in to the system.

Notes:

- *If you use the email option, the password reset link is only active for 20 minutes. After the time has expired, you will need to repeat steps 1-5 to generate a new password reset email.*
- *If you use the mobile reset option, the validation code is only active for 20 minutes. In addition, only the most recent code is valid (e.g., if you requested a validation code twice, only the second code would be valid).*
- *Per our security protocol, PMP AWARxE will not confirm the existence of an account. If you do not receive an email at the email address provided, follow the steps below:*
  1. Ensure you entered a valid email address.
  2. Check your Junk, Spam, or other filtered folders for the email.
  3. If the email address is correct but you have not received the email, contact your PMP Administrator to request a new password or determine what email address is associated with your account.
  4. Add the following email addresses and domains to your contacts list, or contact your organization's IT support to have them added as safe senders:
  (a) no-reply-pmpaware@globalnotifications.com
  (b) no-reply@alaska.pmpaware.net
  (c) globalnotifications.com
  (d) amazonses.com

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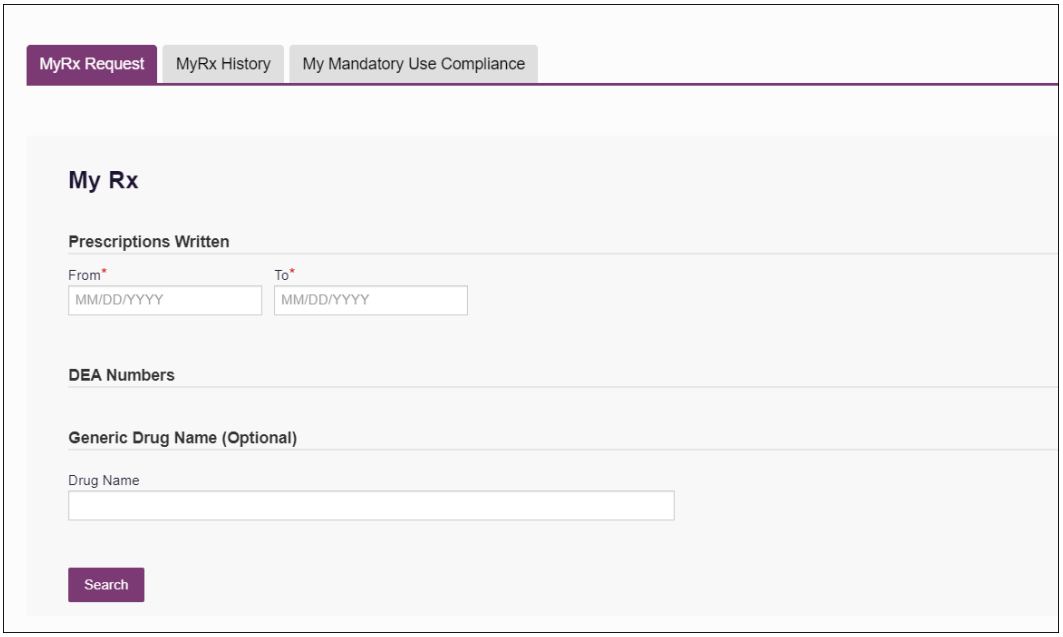
7 Mandatory Use Compliance

The Mandatory Use Compliance Module allows you to request a report on which patients were prescribed scheduled II, III, and IV drugs for more than a three-day supply and were not queried by you or your delegate(s).

7.1 Reviewing Your Own Compliance

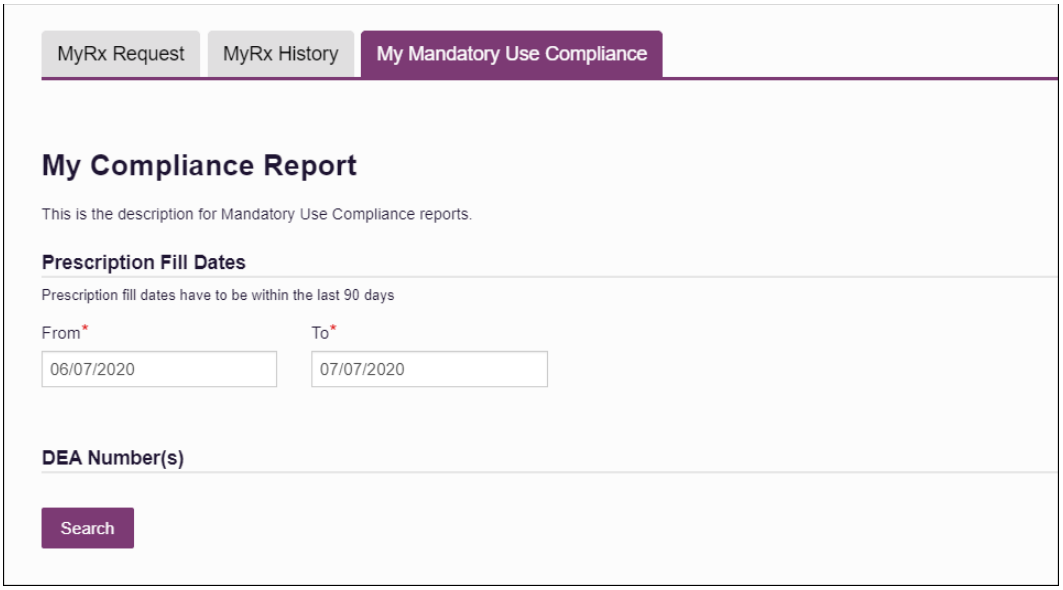
1. Click **Menu** > **MyRx**.

   The My Rx page is displayed.



2. Click the **My Mandatory Use Compliance** tab.

   The My Compliance Report page is displayed.



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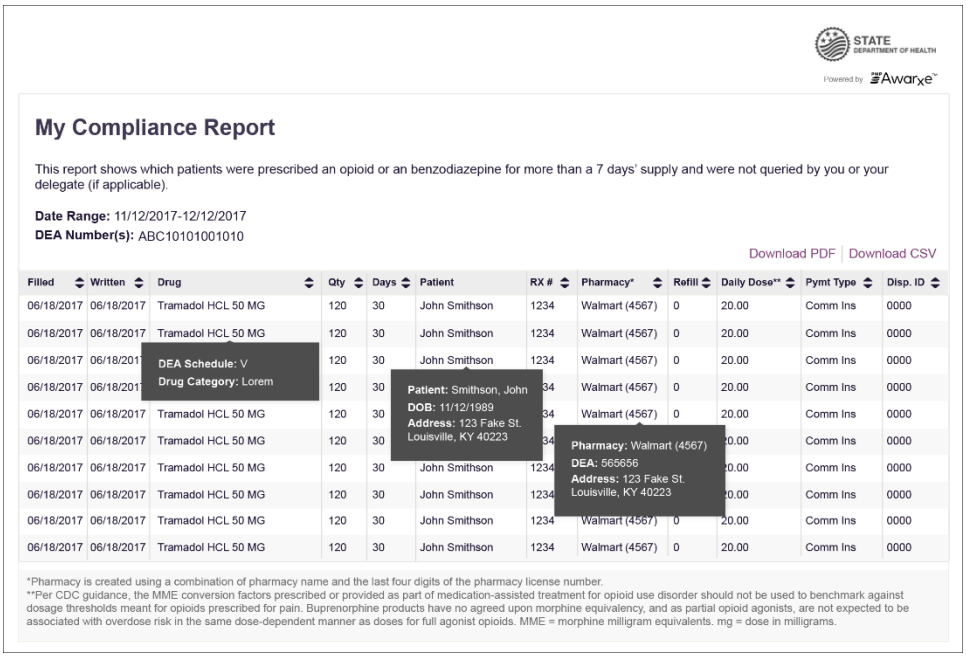
3. Enter the search timeframe in the **From** and **To** fields.

   Note: *The dates auto-populate to search for the last month; however, you can change the dates to meet your search needs.*

4. If you have more than one personal DEA number associated with your profile, select the DEA for which you would like to generate a report.
5. Click **Search**.

   Your report results are displayed.



STATE DEPARTMENT OF HEALTH
Powered by Awarxe

My Compliance Report

This report shows which patients were prescribed an opioid or an benzodiazepine for more than a 7 days' supply and were not queried by you or your delegate (if applicable).

Date Range: 11/12/2017-12/12/2017
DEA Number(s): ABC10101001010

Download PDF | Download CSV

Filled	Written	Drug	Qty	Days	Patient	RX #	Pharmacy*	Refill	Daily Dose**	Pymt Type	Disp. ID
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30	John Smithson	1234	Walmart (4567)	0	20.00	Comm Ins	0000
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30	John Smithson	1234	Walmart (4567)	0	20.00	Comm Ins	0000
06/18/2017	06/18/201		120	30	John Smithson	1234	Walmart (4567)	0	20.00	Comm Ins	0000
06/18/2017	06/18/201		120	30		34	Walmart (4567)	0	20.00	Comm Ins	0000
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30		34	Walmart (4567)	0	20.00	Comm Ins	0000
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30		34			20.00	Comm Ins	0000
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30	John Smithson	1234			20.00	Comm Ins	0000
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30	John Smithson	1234			20.00	Comm Ins	0000
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30	John Smithson	1234	Walmart (4567)	0	20.00	Comm Ins	0000
06/18/2017	06/18/2017	Tramadol HCL 50 MG	120	30	John Smithson	1234	Walmart (4567)	0	20.00	Comm Ins	0000

*Pharmacy is created using a combination of pharmacy name and the last four digits of the pharmacy license number.
**Per CDC guidance, the MME conversion factors prescribed or provided 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. Buprenorphine products have no agreed upon morphine equivalency, and as partial opioid agonists, are not expected to be associated with overdose risk in the same dose-dependent manner as doses for full agonist opioids. MME = morphine milligram equivalents. mg = dose in milligrams.

   Your search results:

   - Include an opioid or benzodiazepine issued for more than a three-day supply
   - Display searches conducted by you or your delegate(s)
   - Display the date filled, date written, drug, quantity, units, days' supply, patient name, prescription number, pharmacy, refill number, payment type, and dispensation ID

7.2 Exemptions to Reviewing

1. You may be exempt from reviewing prescription history under AS 17.30.200(k); however, this function does not allow filtering by specialties that may be exempt from reviewing (e.g., emergency physician) or for practice locations that also allow exemptions (e.g., inpatient facilities).
2. Pharmacists are not required to review. Because they do not hold DEA registration numbers, this functionality is not available to pharmacists.

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8 Assistance and Support

8.1 Technical Assistance

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

- Contact Appriss Health at 1-855-5AK-4PMP (1-855-525-4767);

  OR
- Create a support request at the following URL:

  https://pmpawarxe.zendesk.com/hc/en-us/

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

8.2 Administrative Assistance

If you have administrative questions about the Alaska PDMP, please contact:

Board of Dental Examiners
Phone: (907) 465-2542
Email: boardofdentalexaminers@alaska.gov

State Medical Board, Including Physician Assistants
Phone: (907) 269-8163
Email: medicalboard@alaska.gov

Alaska Board of Nursing
Phone: (907) 269-8161
Email: boardofnursing@alaska.gov

Board of Examiners in Optometry
Phone: (907) 465-2541
Email: boardofoptometry@alaska.gov

Board of Pharmacy
Phone: (907) 465-2589 or (907) 465-1039
Email: boardofpharmacy@alaska.gov

Board of Veterinary Examiners
Phone: (907) 465-1037
Email: boardofveterinaryexaminers@alaska.gov

Mailing address and fax:
Alaska Prescription Drug Monitoring Program
PO Box 110806
Juneau, Alaska 99801
Fax: 907-465-2974
Email: akpdmp@alaska.gov

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9 Document Information

9.1 Disclaimer

Appriss has made every effort to ensure the accuracy of the information in this document at the time of printing; however, information is subject to change.

9.2 Change Log

Version	Date	Chapter/Section	Change Made
1.0		N/A	N/A; initial publication
2.0	08/21/2019	Global	Updated to current document template
		4.1/Creating a Patient Request	Updated to reflect upgrade to NarxCare
		4.2/Viewing a Narx Report	
		Appendix A/ NarxCare	Added new appendix with NarxCare information
2.1	12/04/2019	3.2.1/Patient Alerts	Removed sections
		4.6/Patient Alerts	
		Appendix A/ Additional Indicators	Renamed the section “Additional Indicators” (previously “Additional Risk Indicators”) to reflect the addition of the Clinical Alerts feature
			Added information about Clinical Alerts and how to view detailed information regarding those alerts
2.2	04/28/2020	2.1/Registration Overview	Updated language regarding step one of the registration process to read, “First, a requesting user must create credentials online at https://alaska.pmpaware.net, then must submit the paper PDMP Initial Registration application and payment (PDF form #08-4760) found at pdmp.alaska.gov or its online version using the profession license service, MYLICENSE, at MyAlaska.”
		4.1/Creating a Patient Request	Updated PMP InterConnect screenshot
		6.2.1/Using PMP InterConnect with a Patient Rx Search	
		6.4/Password Management	Corrected password expiration timeframe to 180 days

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Version	Date	Chapter/Section	Change Made
2.3	06/08/2020	2/Registration	Replaced registration instructions with updated registration process
		7/Mandatory Use Compliance	Added new chapter
2.4	04/26/2021	4.1.1/Multiple Patients Identified	Added information about submitting a suggestion for patient consolidation to the State Administrator
		5.1/My Profile	Added instructions for adding a mobile phone number to account profile
		5.3.2/Resetting a Forgotten Password	Added instructions for resetting a password via mobile phone
		8.2/Administrative Assistance	Updated AK PDMP contact information
		Appendix B/ Communications Module	Added new appendix with information about the Communications Module
2.5	07/02/2021	Global	Updated screenshots as necessary to reflect updates made to the system to ensure that it is ADA compliant
2.6	8/23/2021	4.2	Updated screenshots within Section 4 to reflect the new NarxCare Tiles layout
		Appendix A: NarxCare	Updated screenshots and information contained within the appendix to reflect the new Tiles layout
2.7	1/3/2022	General	Updated information for State's registration process and Zendesk link.

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Appendix A: NarxCare

Introduction to NarxCare

All approved users have access to an advanced patient support tool called NarxCare. In addition to the existing functionality and the current patient PMP report, NarxCare offers a representation of the data in an interactive format to help physicians, pharmacists, and care teams access and more quickly and easily comprehend the data to aid in clinical decisions and provide improved patient safety and outcomes. NarxCare also provides tools and resources that support patients' needs and connect them to treatment, when appropriate.

With this platform, healthcare providers have access to all of the features and functions of NarxCare with a consistent look and feel for users who access the solution through theweb portal. It also enables delivery of NarxCare within Electronic Health Record (EHR) and Pharmacy Management Systems for those prescribers and dispensers in who choose to access NarxCare through integration within their healthcare IT system.

This appendix is intended to provide an overview of the NarxCare platform that provides a breakdown of the report.

Why NarxCare?

NarxCare is a platform to help clinicians identify, prevent, and manage substance use disorder (SUD). We know that safe prescribing practices must be part of a multi-dimensional response to this public health crisis. It allows prescribers and dispensers to identify patients who may be at risk for prescription drug addiction and resources that clinicians can utilize to ensure that patients can be provided with the care they need. The NarxCare platform is user friendly, fast, easily integrated into a patient's electronic medical record, and interoperable with other states. We view NarxCare as an important component in our response to the current opioid crisis.

How Does NarxCare Work?

NarxCare aggregates historical and active prescription data and presents color-coded, interactive, visual representations of the data. In addition, the NarxCare report has a **Resources** section that includes a Medical Assistance Treatment (MAT) locator, CDC educational resources. These resources can be used to help patients in need at the right time, in a meaningful way, and quickly and easily at the point of care.

Who Has Access to NarxCare?

NarxCare is available to the end user, whether accessing via the web portal or integrated EHR system or pharmacy software.

NarxCare Layout

The NarxCare report interface is displayed as tiles containing specific prescription information. The tiles displayed may vary depending on the display configured by your PMP administrator. The following overview provides common tiles you may see on your report.

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Header	, 17M Date of Birth: Recent Address: Louisville, KY 40212 View Linked Records (6)
Scores & Indicators	**Narx Scores** Narcotic 794 Sedative 391 Stimulant 221 Explanation and Guidance **Overdose Risk Score** 993 (Range 000-999) Explanation and Guidance **State Indicators (4)** Patient is participating in a specialized docket to address a diagnosed substance use disorder. Hx of previous overdose (3) Daily Active MME >= 115 Overlapping Opioid & Benzodiazepine Details
RX Graph	**RX Graph** Narcotic Buprenorphine Sedative Stimulant Other Learn how to use graph All Prescribers Prescribers 8 - Sharon Marsh 7 - Trey Parker 6 - Wendy Testaburger 5 - Trey Parker 4 - Matt Stone 3 - Kenny Mccormick 2 - M'kay Mackey, MD 1 - Randy Marsh Timeline 11/20 2m 6m 1y 2y Disclaimer
RX Summary	**Morphine Milligram Equivalent Prescribed Over Time** Last 30 Days Last 60 Days Last 90 Days Last 1 Year Last 2 Years 34 MME per Day Avg. 340 MME per RX Disclaimer **Lorazepam MgEq (LME) Prescribed Over Time** Last 30 Days Last 60 Days Last 90 Days Last 1 Year Last 2 Years 0.5 LME Per Day Avg. 15 LME mg Per Rx Disclaimer **Buprenorphine (mg) Prescribed Over Time** Last 30 Days Last 60 Days Last 90 Days Last 1 Year Last 2 Years 2 mg Per Day Avg. 60 Avg mg Per Rx Disclaimer **RX Summary** Summary: Total Prescriptions 70; Total Private Pay 3; Total Prescribers 8; Total Pharmacies 8 Opioids* (excluding Buprenorphine): Current Qty 137; Current MME/day 55.00; 30 Day Avg MME/day 32.50 Buprenorphine*: Current Qty 48; Current mg/day 2.00; 30 Day Avg mg/day 2.00
RX Summary Expanded	**RX Summary Expanded** **Narcotics** (excluding Buprenorphine): 30 Day Avg. MME 34.00; 90 Day Avg. MME 25.72; Rx Count/12 Months 3; Prescriber #/6 Months 3; Pharmacy #/6 Months 2; Current Quantity 137 **Buprenorphine**: 30 Day Avg. mg/day 2.00; 90 Day Avg. mg/day 1.29; Rx Count/12 Months 1; Prescriber #/6 Months 1; Pharmacy #/6 Months 1; Current Quantity 48 **Sedatives**: 30 Day Avg. LME 0.50; 90 Day Avg. LME 0.50; Rx Count/12 Months 1; Prescriber #/6 Months 1; Pharmacy #/6 Months 1; Current Quantity 22 **Stimulants**: 30 Day Avg. mg/day 0.00; 90 Day Avg. mg/day 0.00; Rx Count/12 Months 1; Prescriber #/6 Months 1; Pharmacy #/6 Months 1; Current Quantity 9

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Prescription Detail

Prescriptions Column Settings

Total: 70 | Private Pay: 3 Showing 1-15 of 70 Items View 15 Items 1 of 5

Filled	Written	ID	Drug	QTY	Days	Prescriber	RX #	Dispenser	Refill	Daily Dose*	Pymt Type	PMP
11/13/2014	11/08/2014	4	Oxycodone-Acetaminophen 5-325	80.00	40	We Tes		Cos (3475)	0	15.00 MME	-	CO
11/01/2014	11/01/2014	6	Hydrocodone-Acetamin 10-325 Mg	90.00	30	Tr Par		Wal (2435)	1	30.00 MME	-	CO
10/31/2014	10/26/2014	6	Vyvanse 60 Mg Capsule	30.00	30	Tr Par		Wal (2435)	0		-	CO
10/10/2014	10/10/2014	6	Buprenorphine 2 Mg Tablet Sl	90.00	90	Sh Mar		Kp (F123)	0	2.00 mg	-	IN
10/05/2014	10/05/2014	6	Hydrocodone-Acetamin 10-325 Mg	90.00	90	Tr Par		Wal (2435)	0	10.00 MME	-	CO
09/17/2014	09/17/2014	6	Oxycodone-Acetaminophen 5-325	30.00	3	Tr Par		Wal (2435)	0	75.00 MME	-	CO
09/17/2014	09/17/2014	6	Phentermine 37.5 Mg Tablet	30.00	30	Tr Par		Wal (2435)	0		-	CO
09/13/2014	09/08/2014	4	Oxycodone-Acetaminophen 5-325	30.00	10	Ke Mcc		Cos (3475)	0	22.50 MME	-	CO
09/12/2014	09/10/2014	2	Sk-Oxycodone/apap 5/325 Tab	90.00	22	Ma Sto		Wal (6992)	1	30.68 MME	Military/VA	CO

Providers

Providers Column Settings

Total: 8 Showing 1-8 of 8 Items View 15 Items 1 of 1

Name	Address	City	State	Zipcode	Phone
		North Park	CO	4l113	
		South Park	CO	80134	
		South Park	CO	80134	
		North Park	CO	85134	
		South Park	CO	80434	
		South Park	CO	80134-4321	
		South Park	CO	80134	
		South Park	CO	80134	-

Showing 1-8 of 8 Items View 15 Items 1 of 1

Pharmacies

Pharmacies Column Settings

Total: 8 Showing 1-8 of 8 Items View 15 Items 1 of 1

Name	Address	City	State	Zipcode	Phone
Some-Care Pharmacy, BBC (2682)	252 Eastport Hwy Ste C	North Parwk	CO	43621	(225) 212-4800
Walgreens #5261 (6992)	19028 Lincoln Ave	South Park	CO	80134	(303) 805-4021
Walgreen Co. (2435)	Dba: Walgreens # 05262, 100 Main Street	South Park	CO	80134	-
Costco Pharmacy 1022 (3475)	Costco Wholesale Corporation, 18414 Cottonwood Drive	South Park	CO	80134	-
Walgreen Co. (2435)	Dba: Walgreens # 05261, 19028 Lincoln Ave	South Park	CO	80134	-
Dan's Pharm. (4444)	Dba: Dans Pharm # 123	East Park	CO	80444	(123) 123-4122
Bill's Pharm. (2888)	Dba: Bills Pharm # 523	East Park	CO	80441	(532) 223-4122
Kp (F123)	Wholepaycheck	Sodosopa	CO	80445	-

Showing 1-8 of 8 Items View 15 Items 1 of 1

NarxCare helps providers make better-informed decisions when it comes to identifying, preventing, and managing substance use disorders. An overview of each section can be found below.

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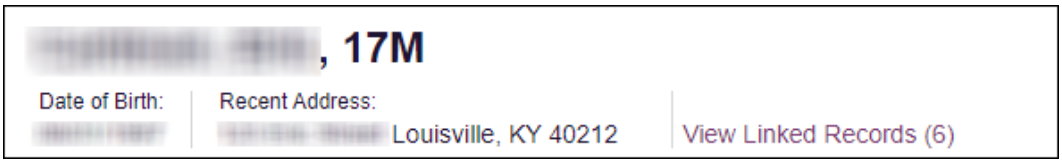
NarxCare Report Details

Report Header

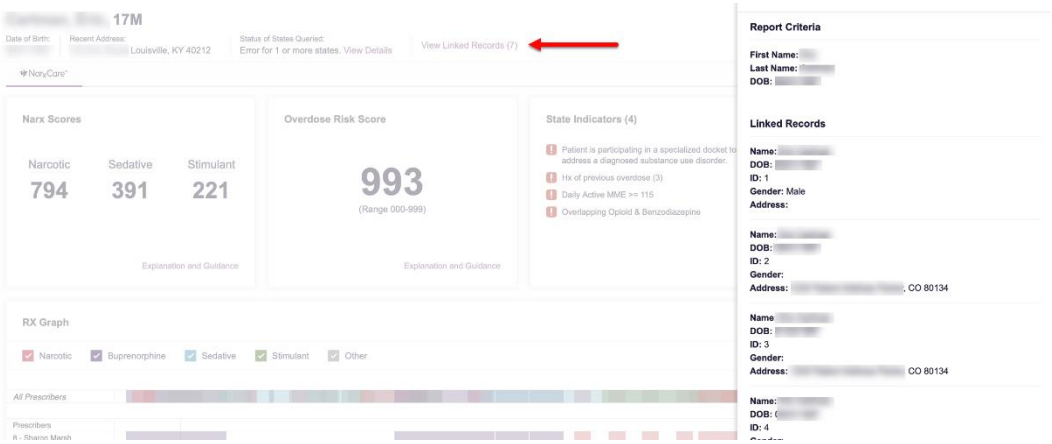
The NarxCare Report page heading contains several report and account-level controls:

- **Drop-down menu bar:** Clicking **Menu** allows you to navigate to all functional areas of AWARxE. For NarxCare users, the menu, which is shown on the following page, contains additional training links as well as a link to the NarxCare user guide. You can click your username for quick access to account management options such as **My Profile**, **Delegate Management**, and **Password Reset**.

- **Patient identifying information:** The patient's name, age in years, and gender are displayed as the report header above the report tiles. Additional patient information, such as date of birth and address, can be found below this header. This information will remain visible as you scroll through the report.



You can click **View Linked Records** to display all records linked to the selected patient.



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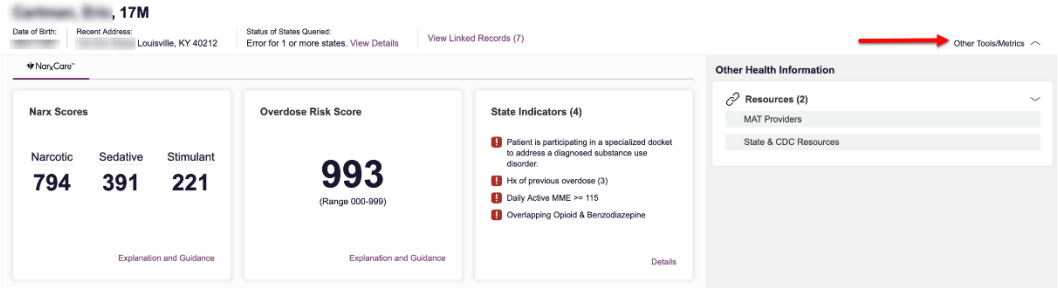
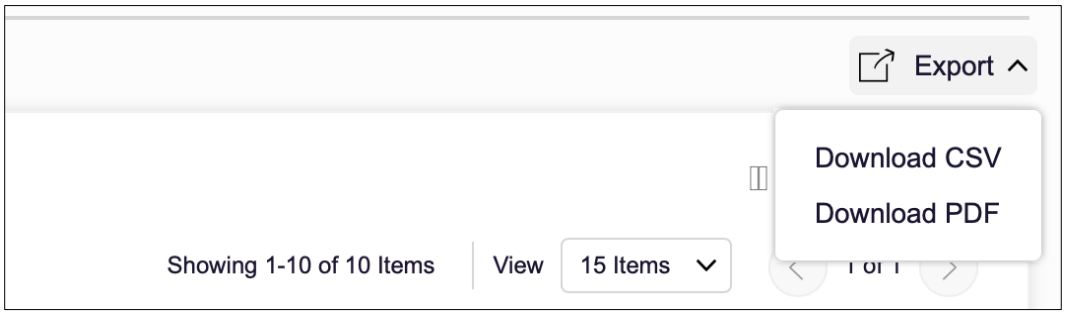
- **Other Tools/Metrics:** You can click on the **Other Tools/Metrics** drop-down, located on the right side of the page, to display the **Resources** link, which contains links to MAT providers and State & CDC resources that may be useful in managing patient referrals or reviewing CDC guidelines. Please refer to the Other Tools/Metrics section of this appendix for more information on these resources.



- **Report download links:** If you need to download a PDF or CSV version of the report, click the **Export** drop-down, then click **Download PDF** or **Download CSV**.



Report Body

The body of the NarxCare Report information is aimed at rapidly raising awareness of risk and prescription use patterns, and when required, individual prescription detail. This information is presented as tiles, many of which are interactive and will display additional information upon clicking or hovering over links and graphs within the individual tiles.

Note: *The list of tiles described below is not comprehensive; it provides a list of the most common tiles. You may not see all of the tiles described below; however, you may also see additional tiles not described below. The tiles displayed to you are configured by your PMP administrator.*

- **Scores and additional risk indicators:** The NarxCare Report includes a series of type-specific use scores, NarxCare Scores, Overdose Risk Score, and Additional Risk Indicators, which are located in the Risk Indicators section of the 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 systems choose to display these data inthe patient header, face sheet, or alongside patient vital signs.

Note: *Please refer to the Narx Scores, Overdose Risk Score, and Additional Risk Indicators sections of this document for more information on those scores and indicators.*

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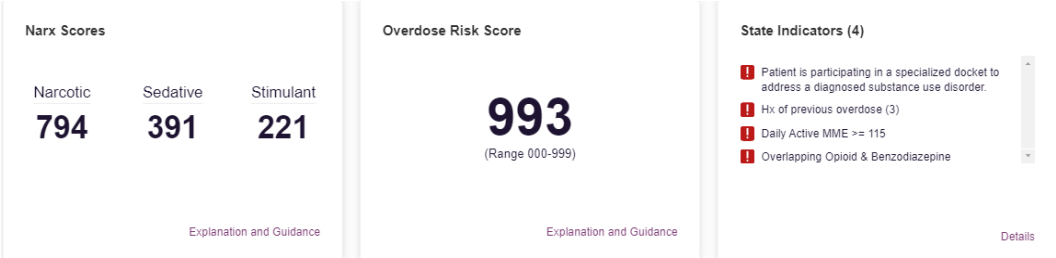

- **State Indicators:** The State Indicators tile displays Clinical Alerts as configured by your PMP Administrator. The Clinical Alerts feature delivers custom alerts and notifications to prescribers to alert them when patients meet or exceed the specified thresholds. *Note that the alerts that are available to you and the thresholds associated with those alerts are configured by your PMP Administrator.* The Clinical Alerts that may be displayed in this section are listed in the table below.

Alert Type	Description
Prescriber & Dispenser Thresholds	Generates an alert when the number of prescribers and dispensers specified by your PMP Administrator is met or exceeded within a set time period
Daily Active MME Threshold	Generates an alert when the daily active morphine milligram equivalent (MME) is greater than or equal to the value specified by your PMP Administrator
Opioid & Benzodiazepine Threshold	Generates an alert when opioids and benzodiazepines are prescribed within the time period set by your PMP Administrator
Daily Active Methadone Threshold	Generates an alert when the daily active MME for methadone is greater than or equal to the value specified by your PMP Administrator
Opioid Consecutive Days Threshold	Generates an alert when opioids have been received daily for longer than the time period set by your PMP Administrator

If configured by your PMP Administrator, this section may also display below-threshold alerts indicating that the patient has not met or exceeded the thresholds associated with that alert.

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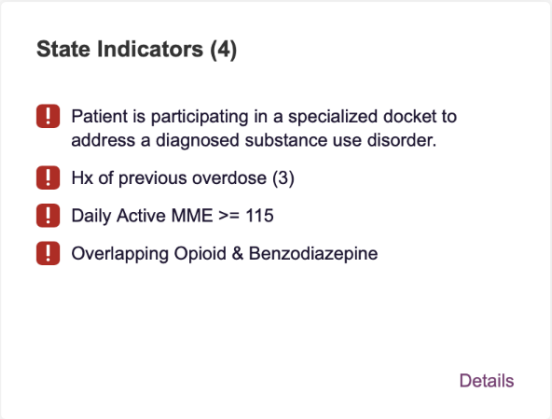
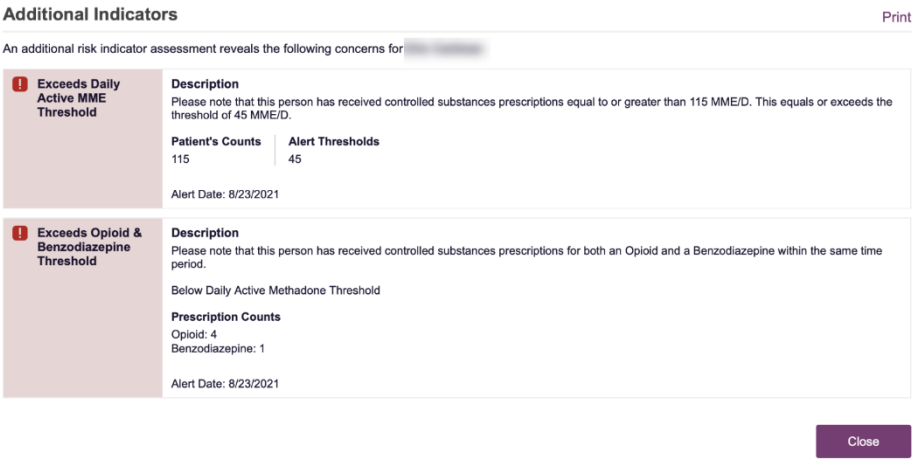
Alerts for thresholds that have been met or exceeded are displayed in **red**.

Alerts for thresholds that have not been met (below-threshold alerts) are displayed in **gray**.



You can view a detailed description of the Clinical Alerts displayed in this section by clicking the **Details** link located below the alerts. Once you click this link, the alert details modal is displayed.



Notes:

If configured by your PMP Administrator, this modal may also display an Explanation section containing additional information, provided by the PMP Administrator, about why you are receiving this alert.

These alerts and indicators may corroborate any concerns raised by the patient's prescription information. 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.

- **Rx Graph:** The Rx Graph tile allows you to rapidly see important patterns and levels of use.

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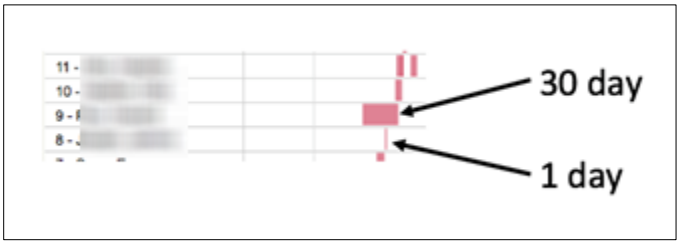
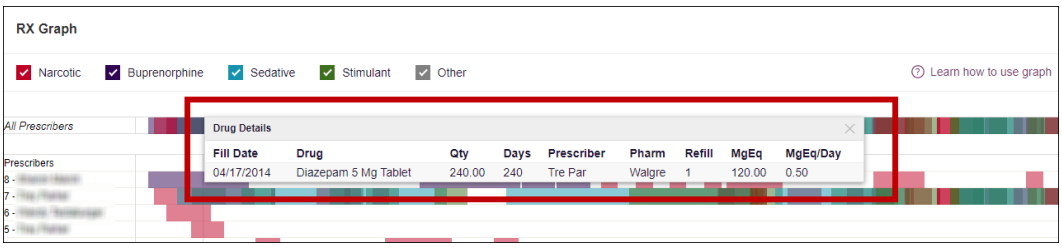
- Prescriptions are color coded and can be selected or deselected at the top of the graph.
  8. Narcotics (opioids) = **red**
  - Buprenorphines = **purple**
  - Sedatives (benzodiazepines, sleep aids, etc.) = **blue**
  - Stimulants = **green**
  - Other = **grey**
- The Rx Graph is reverse time ordered, meaning that the most recent prescriptions are displayed on the left side of the graph and the oldest are displayed on the right.
- Each pixel in the graph represents one day; therefore, a 30-day prescription is represented by a rectangle about 1 cm wide and a 1–3-day prescription appears as a narrow vertical bar.



- The Rx Graph is interactive. You can click on a prescription to view information for that prescription, or you can click and drag over multiple prescriptions to view information for the selected prescriptions.



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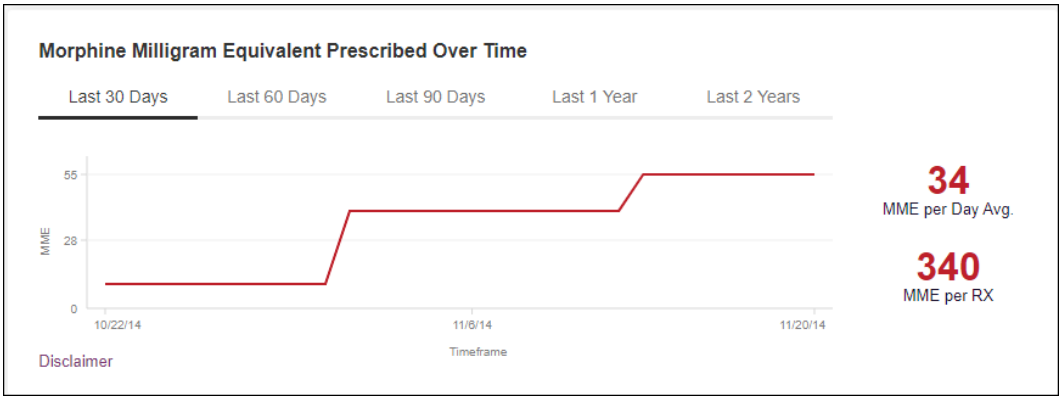
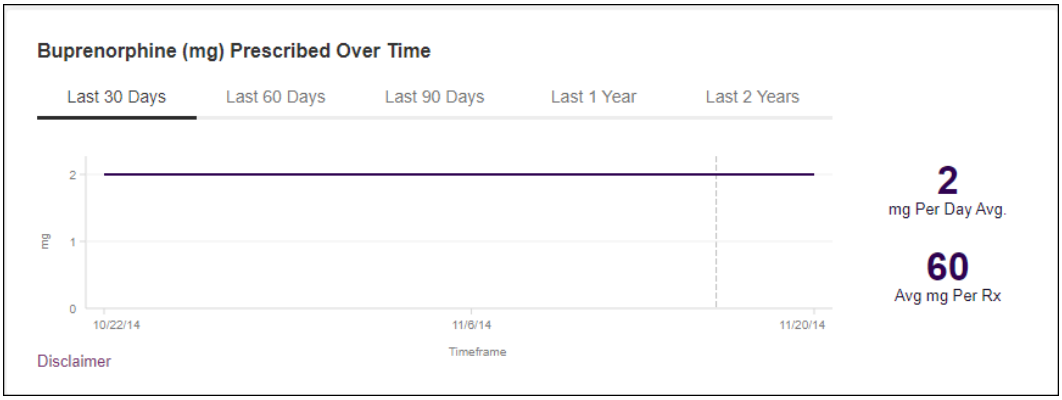
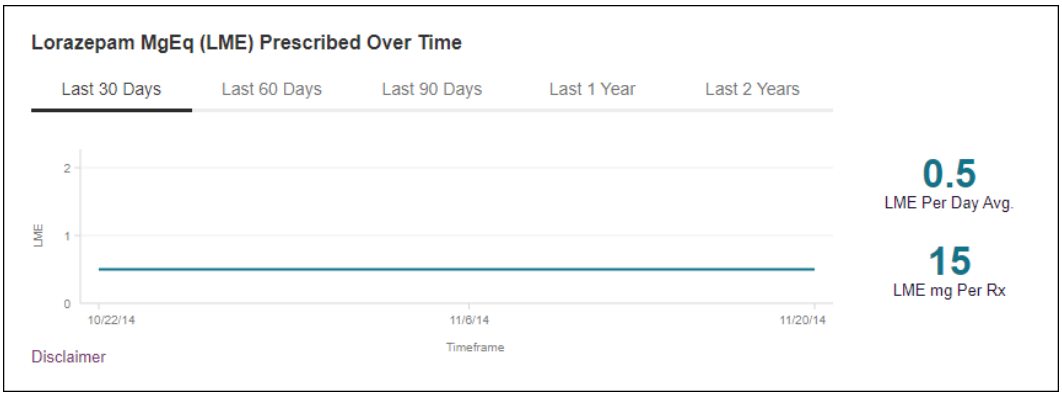
- **Other graphs:** If configured by your PMP administrator, the Morphine Milligram Equivalent Prescribed Over Time, Buprenorphine (mg) Prescribed Over Time, and Lorazepam MgEq (LME) Prescribed Over Time tiles may also be included on the report. These tiles contain graphs that provide a quick longitudinal view of daily MME, buprenorphine, and LME. Abrupt changes in these factors are often due to overlapping prescriptions.







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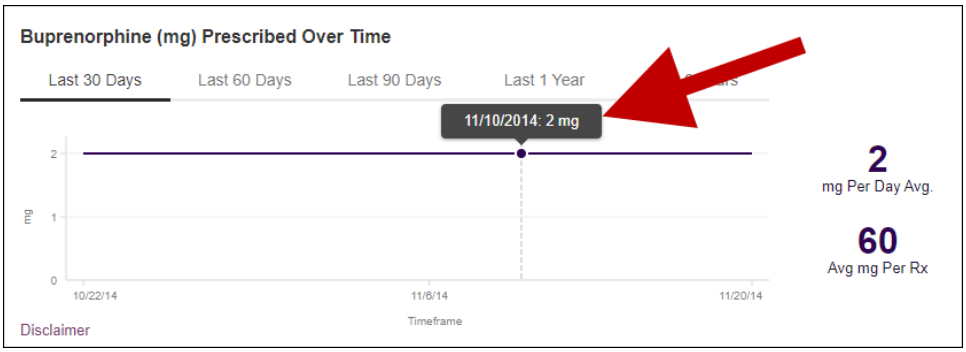
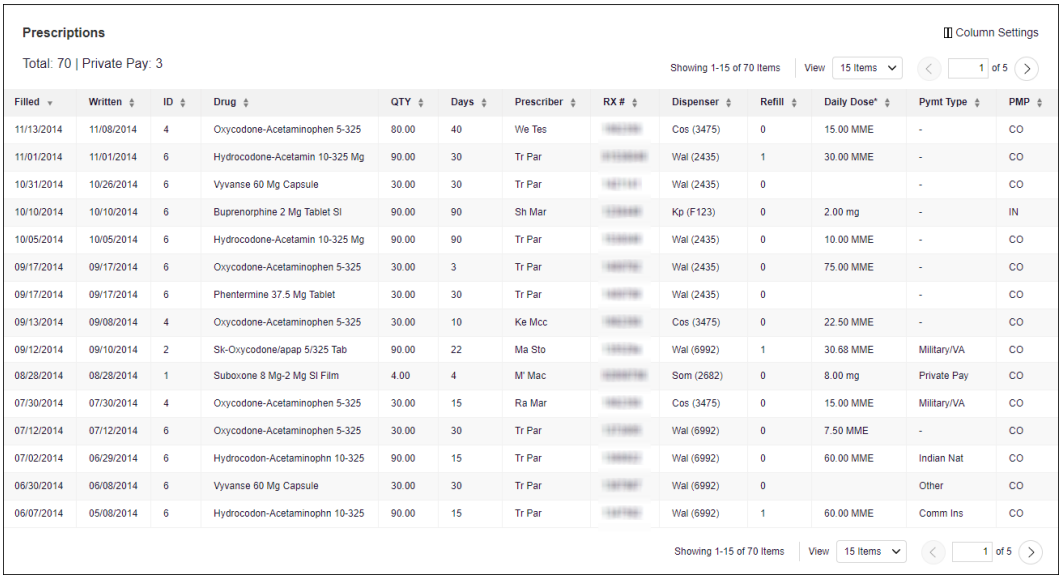
- You can hover over the timeline in all of these graphs to display information for a specific day.



- You can customize the length of time for which you wish to view information by clicking **Last 30 Days** (displayed by default), **Last 60 Days**, **Last 90 Days**, **Last 1 Year**, or **Last 2 Years** at the top of each graph.

Prescription Detail

Each prescription dispensed to the patient is presented in the Prescriptions tile. If desired, you can use the arrows next to each column header (⬍) to sort the table by that column. You can also hover your cursor over a prescriber or pharmacy to view additional information such as prescriber or pharmacy full name, address, and DEA number.



Prescriptions Column Settings

Total: 70 | Private Pay: 3 Showing 1-15 of 70 Items View 15 Items 1 of 5

Filled	Written	ID	Drug	QTY	Days	Prescriber	RX #	Dispenser	Refill	Daily Dose*	Pymt Type	PMP
11/13/2014	11/08/2014	4	Oxycodone-Acetaminophen 5-325	80.00	40	We Tes	[illegible]	Cos (3475)	0	15.00 MME	-	CO
11/01/2014	11/01/2014	6	Hydrocodone-Acetamin 10-325 Mg	90.00	30	Tr Par	[illegible]	Wal (2435)	1	30.00 MME	-	CO
10/31/2014	10/26/2014	6	Vyvanse 60 Mg Capsule	30.00	30	Tr Par	[illegible]	Wal (2435)	0		-	CO
10/10/2014	10/10/2014	6	Buprenorphine 2 Mg Tablet Sl	90.00	90	Sh Mar	[illegible]	Kp (F123)	0	2.00 mg	-	IN
10/05/2014	10/05/2014	6	Hydrocodone-Acetamin 10-325 Mg	90.00	90	Tr Par	[illegible]	Wal (2435)	0	10.00 MME	-	CO
09/17/2014	09/17/2014	6	Oxycodone-Acetaminophen 5-325	30.00	3	Tr Par	[illegible]	Wal (2435)	0	75.00 MME	-	CO
09/17/2014	09/17/2014	6	Phentermine 37.5 Mg Tablet	30.00	30	Tr Par	[illegible]	Wal (2435)	0		-	CO
09/13/2014	09/08/2014	4	Oxycodone-Acetaminophen 5-325	30.00	10	Ke Mcc	[illegible]	Cos (3475)	0	22.50 MME	-	CO
09/12/2014	09/10/2014	2	Sk-Oxycodone/apap 5/325 Tab	90.00	22	Ma Sto	[illegible]	Wal (6992)	1	30.68 MME	Military/VA	CO
08/28/2014	08/28/2014	1	Suboxone 8 Mg-2 Mg Sl Film	4.00	4	M' Mac	[illegible]	Som (2682)	0	8.00 mg	Private Pay	CO
07/30/2014	07/30/2014	4	Oxycodone-Acetaminophen 5-325	30.00	15	Ra Mar	[illegible]	Cos (3475)	0	15.00 MME	Military/VA	CO
07/12/2014	07/12/2014	6	Oxycodone-Acetaminophen 5-325	30.00	30	Tr Par	[illegible]	Wal (6992)	0	7.50 MME	-	CO
07/02/2014	06/29/2014	6	Hydrocodon-Acetaminophn 10-325	90.00	15	Tr Par	[illegible]	Wal (6992)	0	60.00 MME	Indian Nat	CO
06/30/2014	06/08/2014	6	Vyvanse 60 Mg Capsule	30.00	30	Tr Par	[illegible]	Wal (6992)	0		Other	CO
06/07/2014	05/08/2014	6	Hydrocodon-Acetaminophn 10-325	90.00	15	Tr Par	[illegible]	Wal (6992)	1	60.00 MME	Comm Ins	CO

Showing 1-15 of 70 Items View 15 Items 1 of 5

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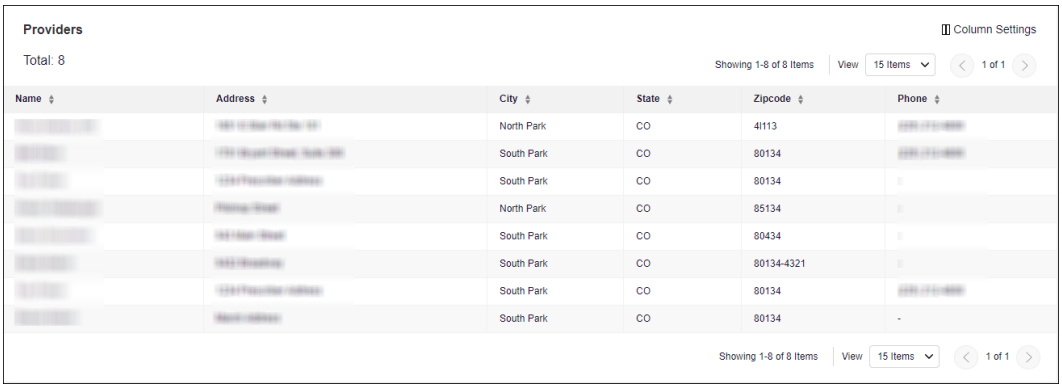
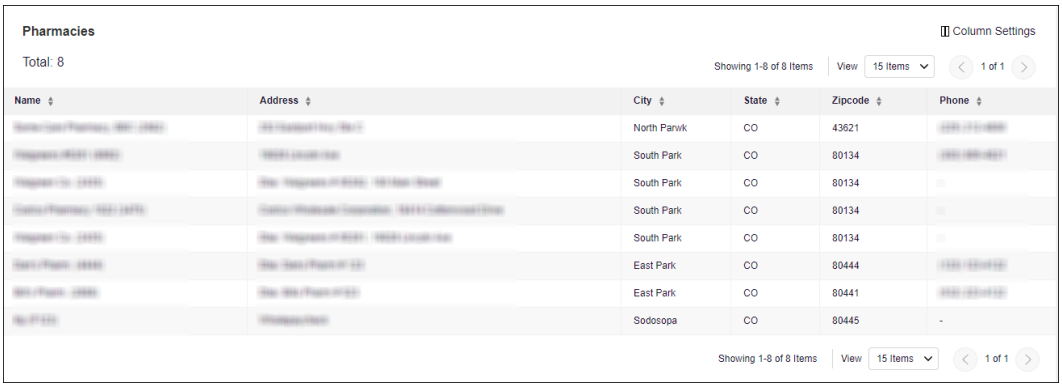
Provider and Pharmacy Detail

Provider and pharmacy information, including full name, address, and DEA number (if applicable), is presented in the Providers and Pharmacies tiles.

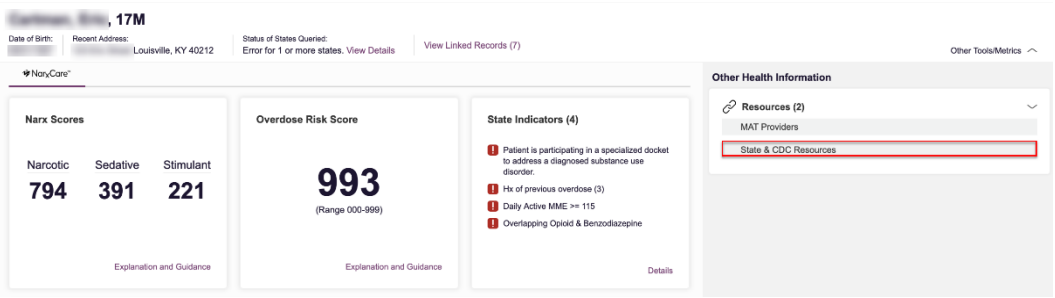




Other Tools/Metrics

Resources

The **Resources** link provides easy access to treatment locators and State & CDC documents.



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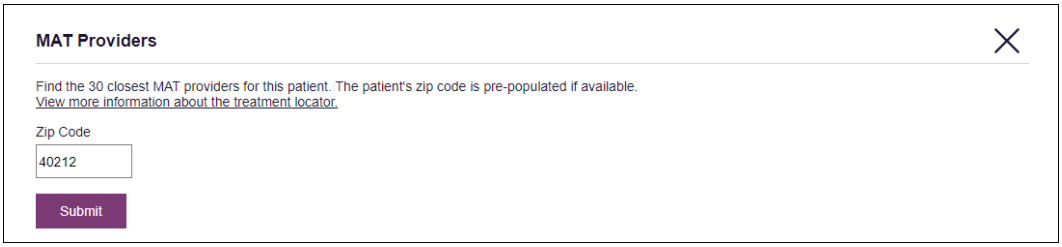
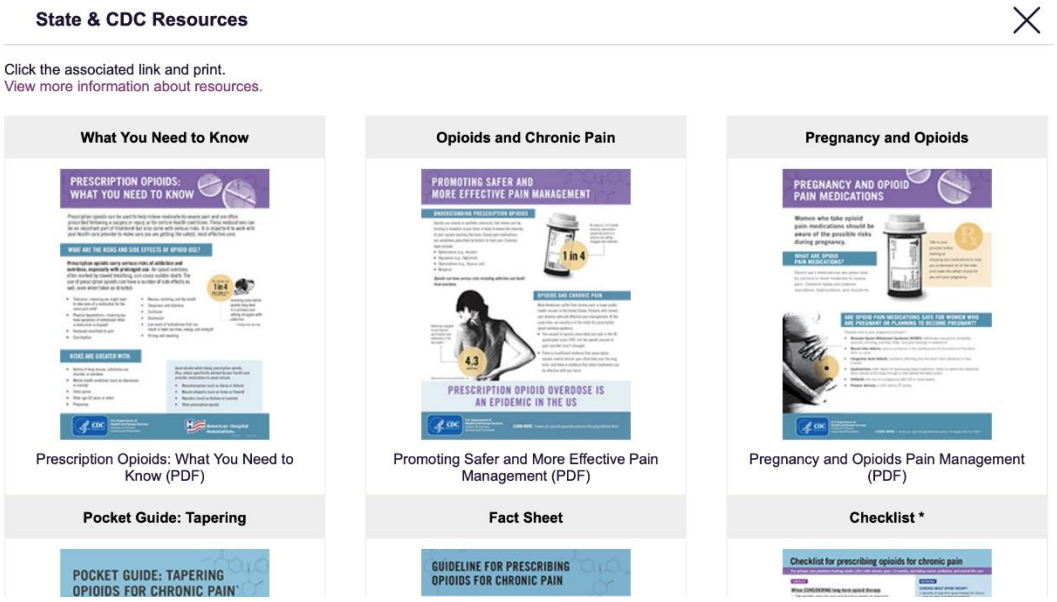
- **MAT Providers:** The MAT Providers pop-up window locates the 30 closest providers who are listed in the Substance Abuse and Mental Health Administration (SAMHSA) buprenorphine treatment locator database.



The patient's zip code is pre-populated but can be edited. Click **Submit** to generate a PDF that can be viewed and printed.

This data is provided by the Substance Abuse and Mental Health Services Administration (SAMHSA). View more information about the treatment locator here.

- **State & CDC Resources:** The State & CDC Resources pop-up window, which is shown on the following page, provides a series of State & CDC documents pertaining to both providers and patients that can be referenced quickly.



To assist providers in educating their patients, printable CDC pamphlets are also available. In addition to CDC-provided resources, Indiana-specific resources, in coordination with the Bureau of Substance Addiction Services (BSAS), will also be available. More information about the CDC resources can be found here.

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Narx Scores

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 called 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 consists of three digits ranging from 000–999.
2. The last digit of each score represents the number of active prescriptions of that type. Forexample, a Narx Score of 504 indicates the patient should have four 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 thePDMP 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, 1,000 MME dispensed within the last month will elevate the score *more than* 1,000 MMEdispensed one 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:

6. Patients who use small amounts of medication with limited provider and pharmacy usagewill have **low scores**.
7. Patients who use large amounts of medications in accordance with recommendedguidelines (single provider, single pharmacy, etc.) will have **mid-range scores**.
8. Patients who use large amounts of medications while using many providers and pharmacies,and with frequently overlapping prescriptions, will have **high scores**.

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Narx Score Algorithm

Relative Scoring

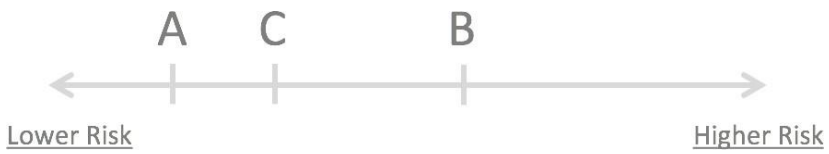
Narx Scores represent a *relative scoring* system wherein the risk factors representing use within a PDMP report are counted and then converted to a reference value that ranges from 0–99.

These reference values correlate with a percentile measurement of that use within the PDMP population.

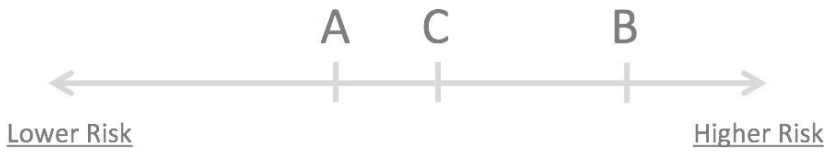
A single point measurement of total MME in the last 60 days can be used to illustrate this concept further using the following three patients:

- Patient A: 160 MME
- Patient B: 4,800 MME
- Patient C: 1,050 MME

If we were to place these three patients on a line of relative risk, we could intuit a linear relationship based on MME, which 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: 4,800 MME | 90
- Patient C: 1,050 MME | 65

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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 eachother 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 four different, overlapping time periods. In each time period, the risk factor being evaluated is tabulated and then converted to a scaled value. An example provider reference table is provided below.

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 four 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. Some examples are provided below.

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Prescriber Count	2mo Scaled	6mo Scaled	1 yr 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 …				

Pharmacy Count	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
0	0	0	0	0
1	25	16	13	10
2	45	31	25	19
3	63	44	35	27
4	78	56	45	35
5	90	67	54	42
6	99	76	62	49
And so on …				

Pharmacy Count	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
0	0	0	0	0
1	25	16	13	10
2	45	31	25	19
3	63	44	35	27
4	78	56	45	35
5	90	67	54	42
6	99	76	62	49
And so on …				

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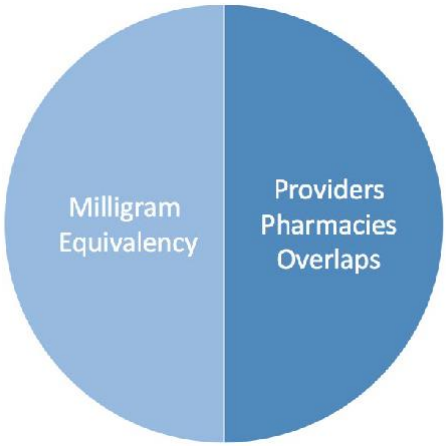
Sedative LME	2mo Scaled	6mo Scaled	1 yr Scaled	2yr Scaled
0	0	0	0	0
1-4	4	6	8	10
5 - 9	8	10	13	16
10 - 14	10	12	16	19
15 - 19	20	20	23	26
20 - 24	23	23	26	29
25 - 29	24	23	26	30
And so on …				

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 appliedto the milligram equivalencies with the remaining risk factors making up the other 50%.



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

	Consumption	Behaviors	Narx Score
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 use that can result inthe same score. It is always necessary to look at the actual PDMP data to determine what usepatterns exist that have resulted in the Narx Score presented.

Algorithm and Score Computation

The following steps are involved with calculating a Narx Score:

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 the 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

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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	Avg
Prescribers	85	76	84	64	**77**
Pharmacies	78	56	62	49	**61**
MME	74	87	88	87	**84**
LME	0	0	0	0	**0**
Overlaps	41	70	64	52	**57**

4. Calculate the weighted average.

	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**

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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							2
Narcotic Score							**632**

Clinical Application

In-Workflow Use

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

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

General Considerations

- The primary purpose of providing Narx Scores is to raise provider awareness of theassociated 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 anyadditional 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

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Example Use Cases

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

- **Case A** – A 17-year-old male basketball player with other significant history presents with asevere ankle sprain. His Narx Scores are:

Narcotic	Sedative	Stimulant
000	000	000

  Important consideration: If considered for an opioid due to the severity of injury, this maybe 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-year-old female presents with decreased level of consciousness following afall where she suffered a closed head injury. Her Narx Scores are:

Narcotic	Sedative	Stimulant
341	501	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 anxietyseizures due to benzodiazepine withdrawal, complicating the medical picture.

- **Case C** – A 36-year-old 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 beento 17 different prescribers in the last year. His Narx Scores are:

Narcotic	Sedative	Stimulant
671	240	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 it can be due to *access to care* issues requiring visits to urgent care centers oremergency departments.

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Score-Based Guidance

Score/Range	Notes	Recommendations
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 fallin this range.	Review use patterns for unsafe conditions. Discuss any concerns with patient.See guidance below.
650	Approximately 1% of scores fall inthis range. Some patient records may have ascore in this range and *still be within prescriber expectations.* Many patient records include some level of multiple providerepisodes, 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.

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Overdose Risk Score

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 overdosedeath.

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 reference group, the odds ratio associated withsuccessive 100-point bins is as follows:

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

ORS Algorithm

The ORS algorithm was derived using machine learning and other predictive techniques appliedto 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 thousands 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 tobe predictive of unintentional overdose death include:

- The number of pharmacies visited per unit time
- Maximum morphine milligram equivalency (MME) in the last year

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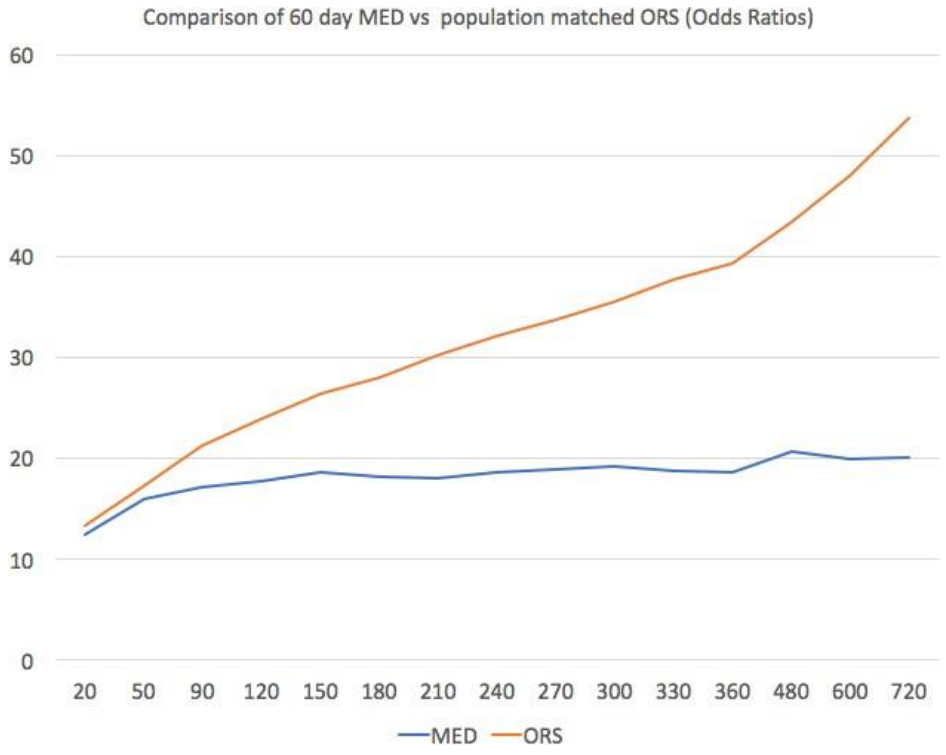
- The number of prescribers in the last two years
- Various slopes of opioid and sedative use
- Various slopes of prescriber usage

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

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 theclinical 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.



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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 CDC-recommended maximum 90 MED for chronic opioiduse to an expected death rate of just 0.6%. It isn't until you get to an average MED of 480 that the death rate reaches 1%, and at that level, there are over 13,000 patients in the PDMPdatabase.

One method of incorporating the ORS into clinical practice is to use a value of 650 as a thresholdapproximately equivalent to the CDC's recommended maximum of 90 MED. Just as patients whoare 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

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Score-Based Guidance

The ORS can be applied to clinical practice in a manner analogous to daily 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, thefollowing ORS ranges can be associated with CDC MED-based guidance.

Score	Approximate CDC MED Equivalent	Guidance
< 010–440	< 50 MED	Consider other sources of risk beyond PDMP data. See below
450–650	50 MED (or more)	Consider naloxone prescription. See below.
> 650	90 MED (or more)	Consider naloxone prescription. 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 substanceuse disorder, consider inpatient admitor referral for outpatient evaluation and treatment.

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Additional Risk Indicators

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 feltto 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 ofcare 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 2years

These indicators are based on the following literature:

- **Provider red flag:** Hall AJ, Logan JE, Toblin RL, et al. Patterns of Abuse Among UnintentionalPharmaceutical Overdose Fatalities. *JAMA.* 2008;300(22): 2613–2620. doi:10.1001/jama.2008.802.
- **Pharmacy red flag:** Yang Z, Wilsey B, Bohm M, et al. Defining Risk of Prescription OpioidOverdose: Pharmacy Shopping and Overlapping Prescriptions Among Long-Term Opioid Users in Medicaid. *The Journal of Pain.* 16(5): 445–453.
- **40 MED red flag:** Paulozzi L, Kilbourne E, Shah N, et. al. A History of Being Prescribed Controlled Substances and Risk of Drug Overdose Death. *Pain Medicine.* 2012;13(1): 87–95.doi: 10.1111/j.1526-4637.2011.01260.x.

Clinical Application

PDMP-based indicators typically corroborate any concerns raised by the Narx Scores and ORS.

When available, additional risk indictors 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, andit 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.

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In all cases, if a provider determines that inappropriate risk exists for a patient, they should seekadditional 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

Indicator	Guidance
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 andconsider contacting other providers directly. If multiple pharmacies involved in unsafe prescribing, discuss concern with patient andconsider pharmacy lock-in program. If overlapping medications of same or differenttype, discuss concern with patient and considertaper 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.

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Appendix B: Communications Module

Clinicians need the ability to recognize and call attention to important medical events, such as mitigating or exacerbating factors, on a patient's PMP report. The NarxCare system's Communications Module is designed to meet this need. When this module is enabled, clinician-to-clinician messaging and the ability to add Care Notes to a record are available within the NarxCare Report.

- Clinician-to-clinician messaging allows clinicians to securely communicate and share information regarding a patient in their care. This direct messaging feature is available only in NarxCare, not in the PMPs themselves, and permits the exchange of information between verified PMP users regarding a single patient under the care of multiple clinicians.
- Care Notes is a clinician-only feature that allows specific, clinically relevant notes or events to be appended to a patient's PMP record. These notes are visible only on the PMP report and to clinicians who have the Communications Module enabled.

Note: *To have the Communications Module enabled, clinicians must meet specific requirements such as having a unique personal ID (e.g., DEA number) and not sharing that ID with other clinicians (e.g., within an institutional setting).*

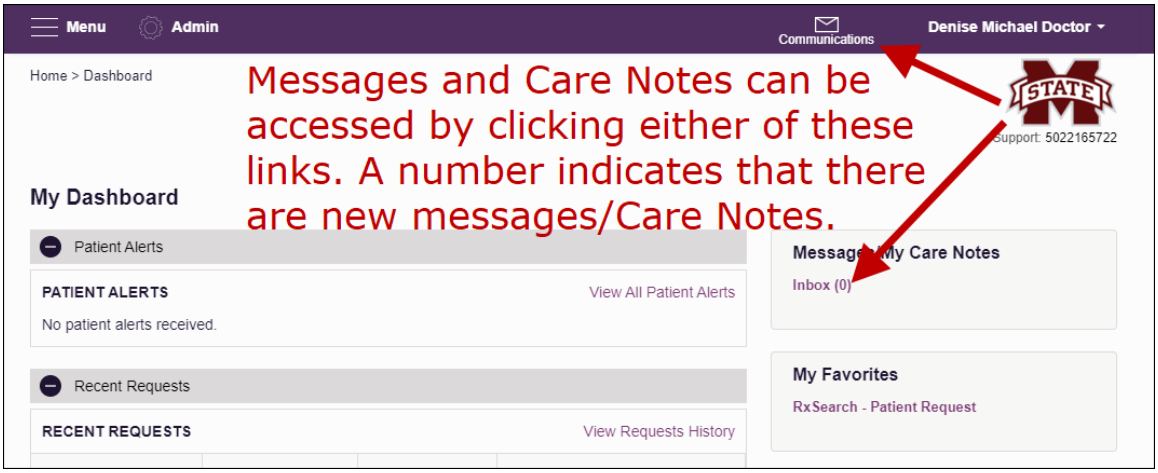
This appendix describes how to create and view Care Notes and clinician-to-clinician messages within the NarxCare Report.

Accessing Your Inbox

Clinician-to-clinician messages and Care Notes are stored in your inbox, which can be accessed by:

- Clicking **Inbox** from the Messages/My Care Notes section of your dashboard; or
- Clicking the **Communications** link on the menu bar.

New messages and/or Care Notes are indicated by a number (i.e., the number of new messages) next to the **Inbox** link in the Messages/My Care Notes section of your dashboard and on the **Communications** link on the menu bar.



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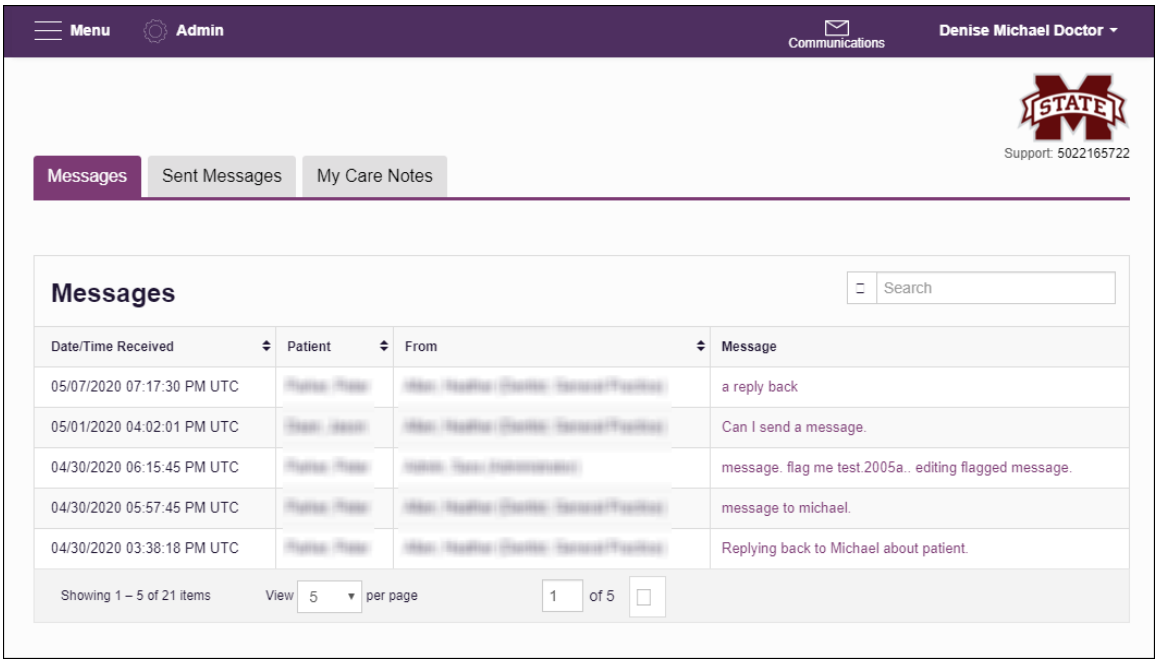
Once you have clicked either link, your inbox is displayed.



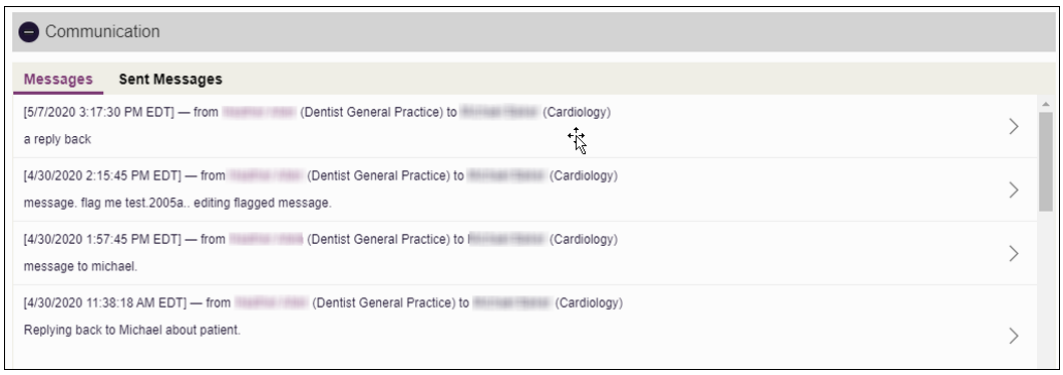
Your inbox contains three tabs: **Messages**, **Sent Messages**, and **My Care Notes**. The **Messages** tab is displayed by default. Note that both messages and Care Notes are contained within the NarxCare Report; therefore, when viewing messages/Care Notes, you are accessing the NarxCare Report for the patient indicated in the **Patient** column.

You can manage how many messages or Care Notes are displayed at any given time by changing the number in the **View** field at the bottom of the list. You can also use the arrows to navigate through your messages/Care Notes.

- **Messages.** The **Messages** tab displays the date and time the message was received, the patient who is the subject of the message, the user who sent the message, and a preview of the message text. Messages are displayed in descending time order, with the most current messages at the top. New messages are displayed in **bold** until viewed.

  Click the link in the **Message** column to view the message.

  The NarxCare Report for that patient is displayed, and you are automatically directed to the Messages section of the report.



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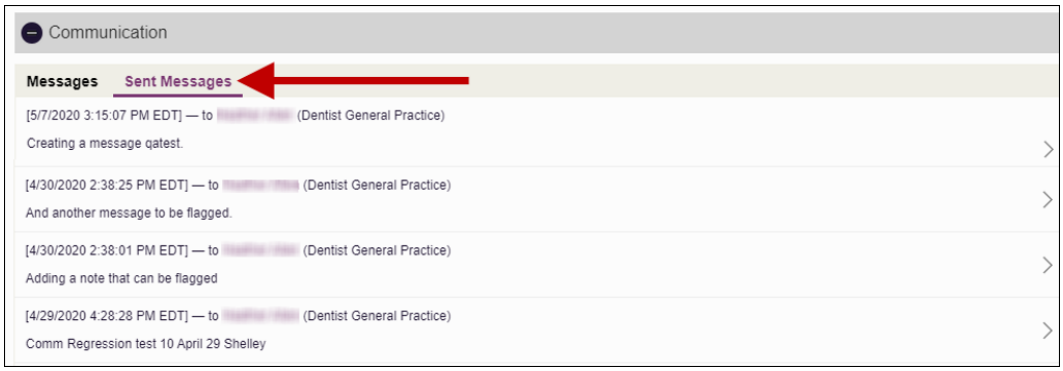
Refer to Clinician-to-Clinician Messaging for information on responding to messages and creating new messages.

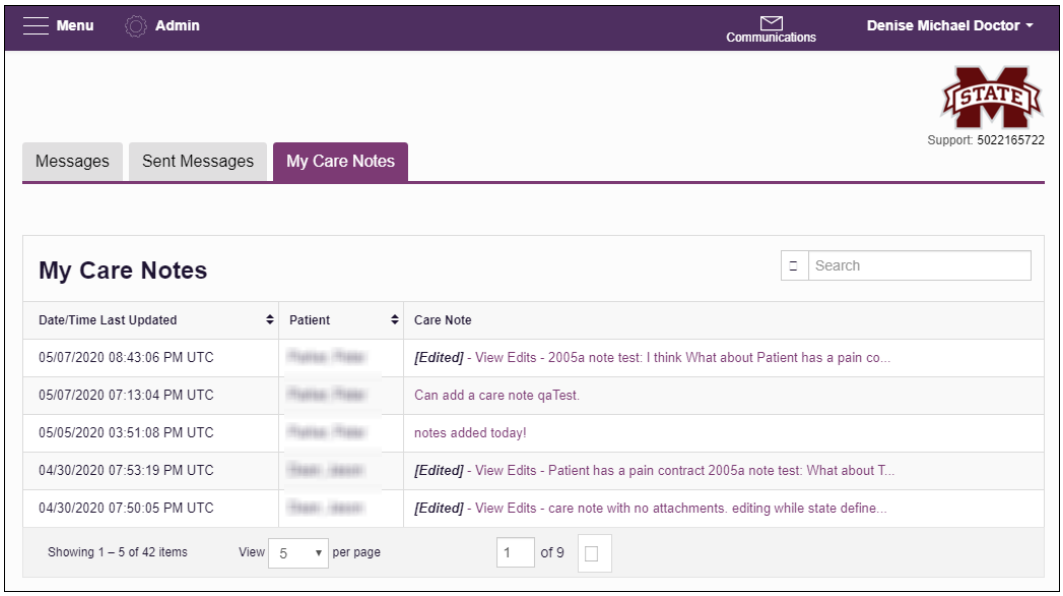
- **Sent Messages.** Click the **Sent Messages** tab to display a list of messages you sent to other clinicians. This tab displays the date and time the message was received, the patient who is the subject of the message, the user to whom you sent the message, and a preview of the message text. Messages are displayed in descending time order, with the most current messages at the top.

  Click the link in the **Message** column to view the message.

  The Narx Report for that patient is displayed, and you are automatically directed to the Communication section of the report. Click **Sent Messages** to view your list of sent messages.



- **My Care Notes.** Click the **My Care Notes** tab to display your Care Notes.



The **My Care Notes** tab displays the date and time the care note was last updated, the patient who is the subject of the note, and a preview of the note text. Care Notes are displayed in descending order, with the most current notes at the top. New Care Notes are displayed in **bold** until viewed.

Click the link in the **Care Note** column to view the note.

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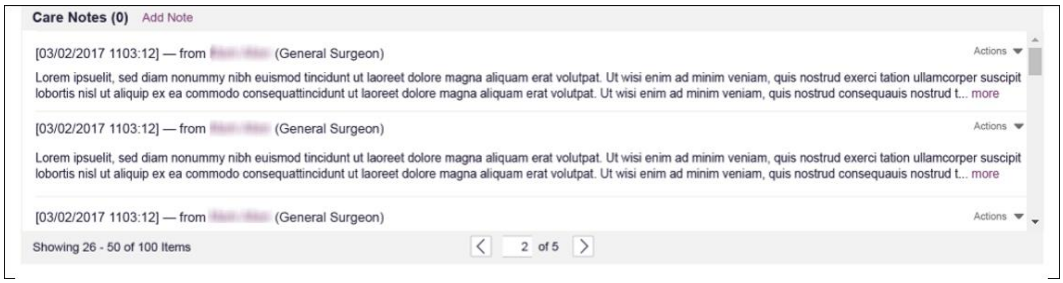
The NarxCare Report for that patient is displayed, and you are automatically directed to the Care Notes section of the report.



Refer to Care Notes for information on adding new Care Notes to a patient record.

Clinician-to-Clinician Messaging

Creating a New Message

You can send a message regarding a specific patient to another clinician who is also treating that patient from within the NarxCare Report.

Note: *This function should be used for messages that are not critically time sensitive, as there may be a time lag before the recipient views any sent message. For time sensitive communications, Appriss recommends direct communication with the desired recipient outside of the PMP.*

To send a new message:

1. Generate a NarxCare Report for the patient using the instructions provided in the Creating a Patient Request section of this document.

   The NarxCare Report is displayed as shown on the following page.

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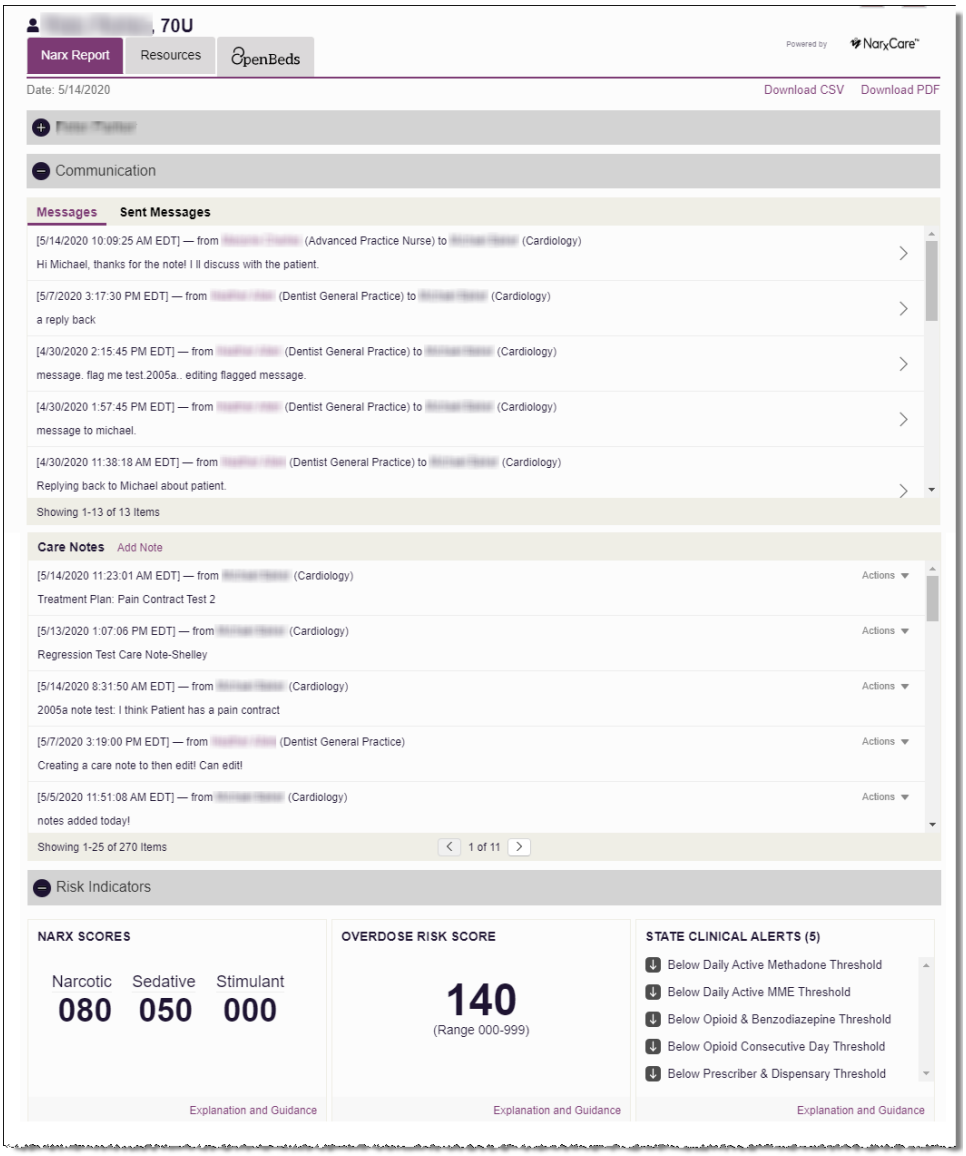
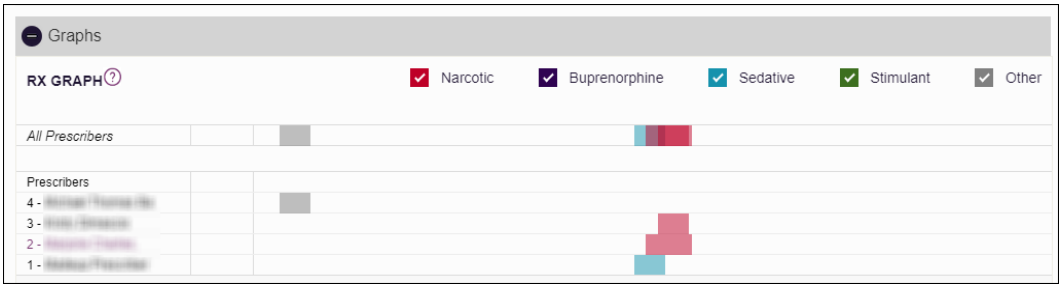


2. Scroll down to the Prescribers section of the Rx Graph. Available prescribers are indicated by hyperlinked names.



3. Click the prescriber's name to send a message regarding the patient.

Note: *If the prescriber's name is not a hyperlink, that prescriber is not available for messages. Prescribers may be unavailable for messages based on a number of factors, including being located out of state or having an invalid identifier.*

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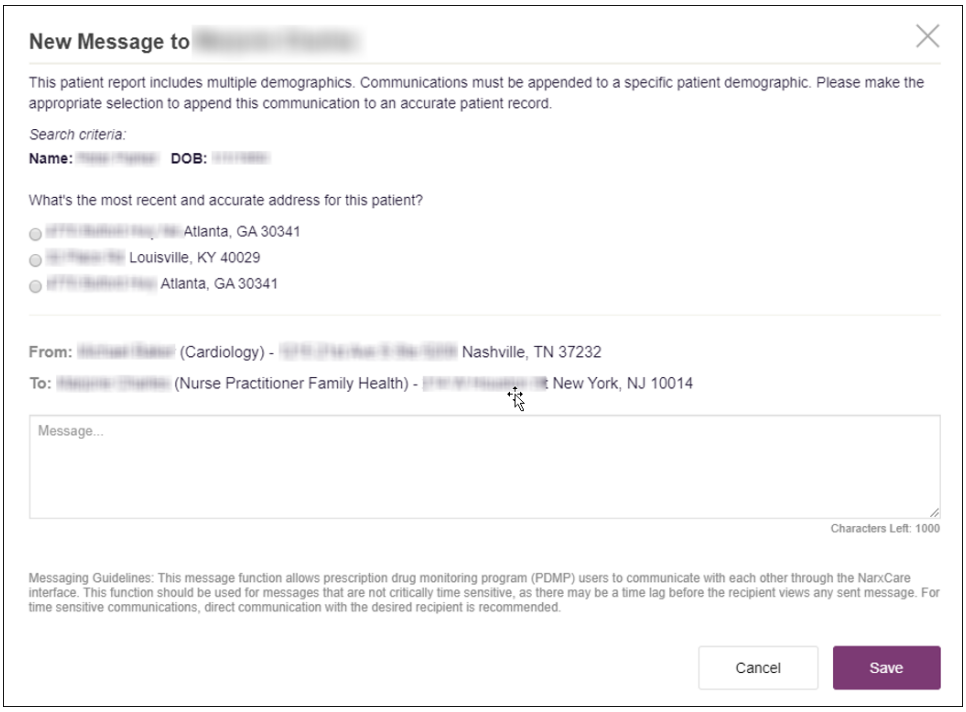
The Message Creation window is displayed.



4. If multiple demographics exist for the patient, you must select the most recent and accurate demographic to ensure that your message is attached to the correct patient record.

   Note: *If multiple demographics do not exist, you can skip this step.*

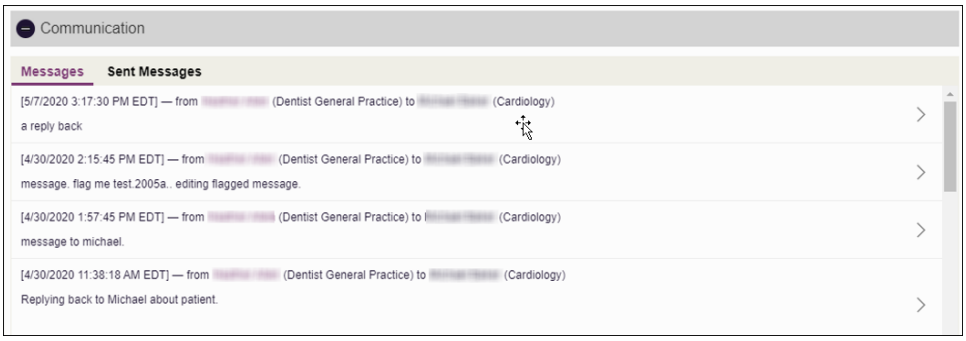
5. Type your message in the **Message** field.
6. Click **Send**.

   The message is sent, and the prescriber will be able to view it the next time they log in to AWARxE.

View a Message Thread

The Communication section of the Narx Report organizes your messages into threads. To view a message thread:

1. Navigate to the Communication section of the Narx Report using the instructions provided in the Accessing Your Inbox section of this guide.



2. Click the arrow icon (>) located to the right of the message you wish to view.

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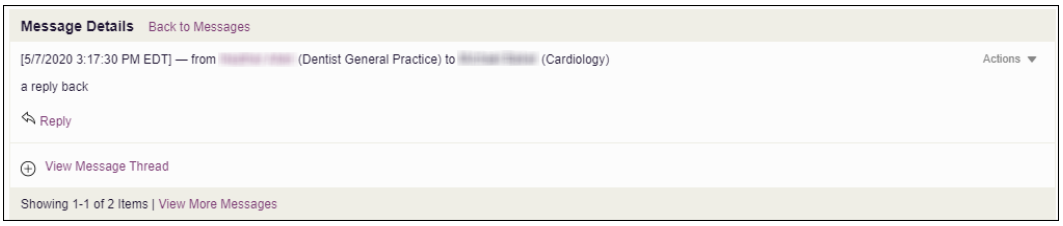
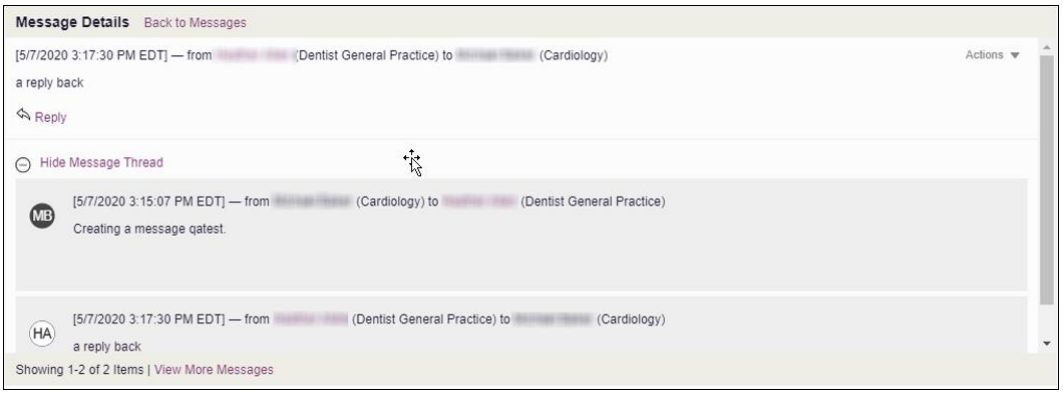
The Message Details page is displayed.



3. Click **View Message Thread** to view all messages in this conversation.



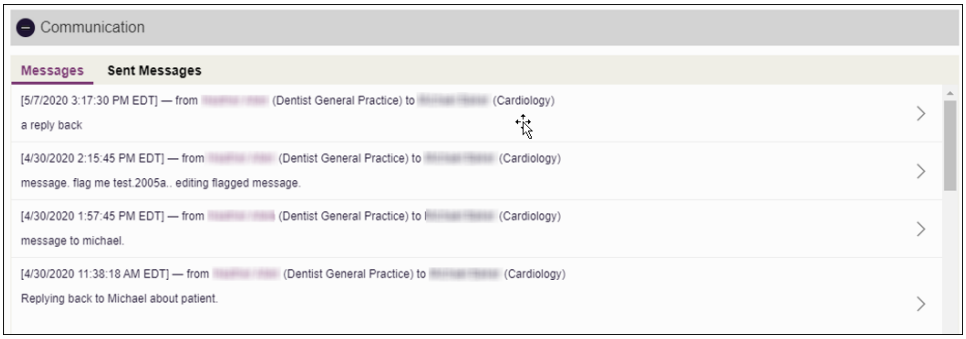
4. From this page, you can:
   a. Click **Reply** to add another message to the thread (see Responding to an Existing Message for more details);
   b. Click **View More Messages** to view more messages in the thread; or
   c. Click **Back to Messages** to return to the **Messages** tab.

Responding to an Existing Message

If a prescriber has sent you a message, it will be available in your inbox. To read and respond to a message:

1. Open the message using the instructions provided in the Accessing Your Inbox section of this guide.

   The NarxCare Report is generated and displayed, and you are automatically directed to the Messages section of the report.



2. Click the arrow icon (>) located to the right of the message to which you are responding.

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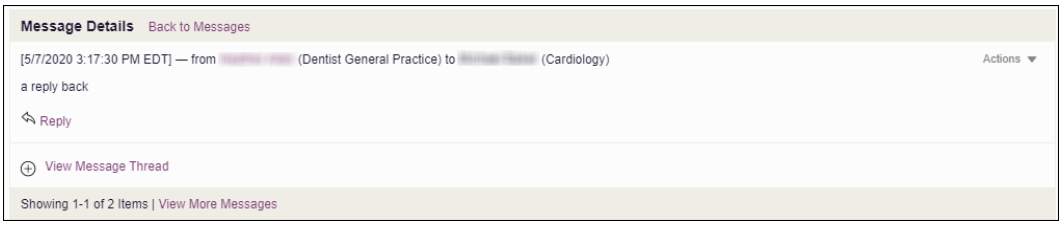
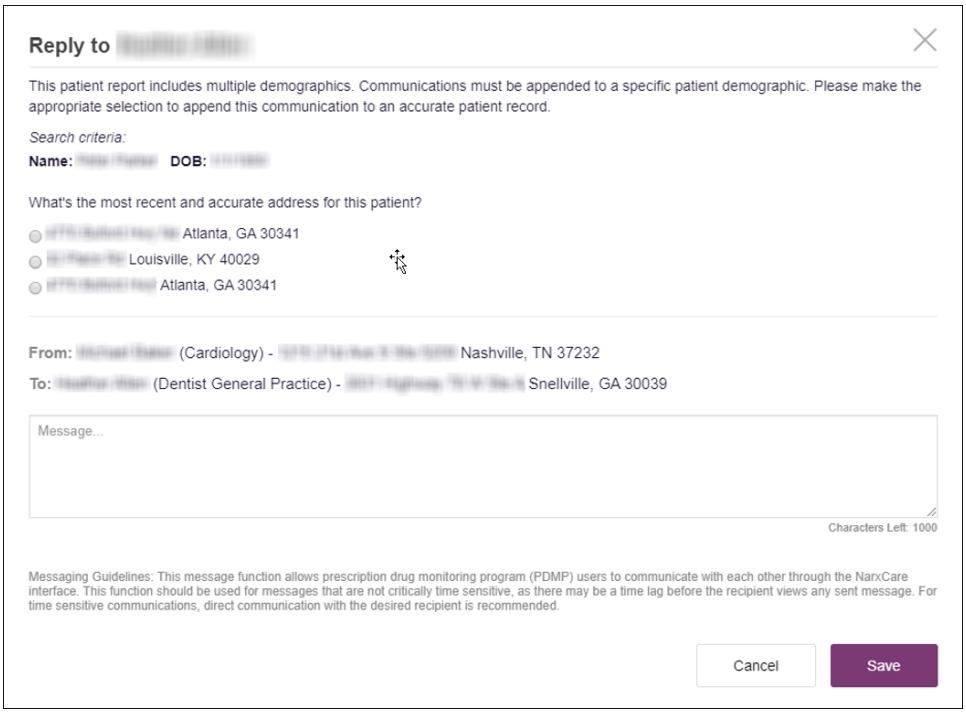
The Message Details page is displayed.



3. Click **Reply**.

   The Reply window is displayed as shown on the following page.



4. If multiple demographics exist for the patient, you must select the most recent and accurate demographic to ensure that your message is attached to the correct patient record.

   Note: *If multiple demographics do not exist, you can skip this step.*

5. Type your response in the **Message** field.
6. Click **Send**.

   The message is sent, and the prescriber will be able to view it the next time they log in to AWARxE.

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Care Notes

The Care Notes feature allows you to add specific, clinically relevant notes or events to a patient's PMP record (e.g., "the patient has a pain contract") to be viewed by any provider who views the patient's record. You can also edit and/or delete Care Notes that *you* added to the patient's record.

Note: *This function should be used for messages that are not critically time sensitive, as there may be a time lag before the recipient views any sent message. For time sensitive communications, Appriss recommends direct communication with the desired recipient outside the PMP.*

Adding a New Care Note

To add a new Care Note to a patient's record:

1. Generate a NarxCare Report for the patient using the instructions provided in the Creating a Patient Request section of this document.

   The NarxCare Report is displayed as shown on the following page.

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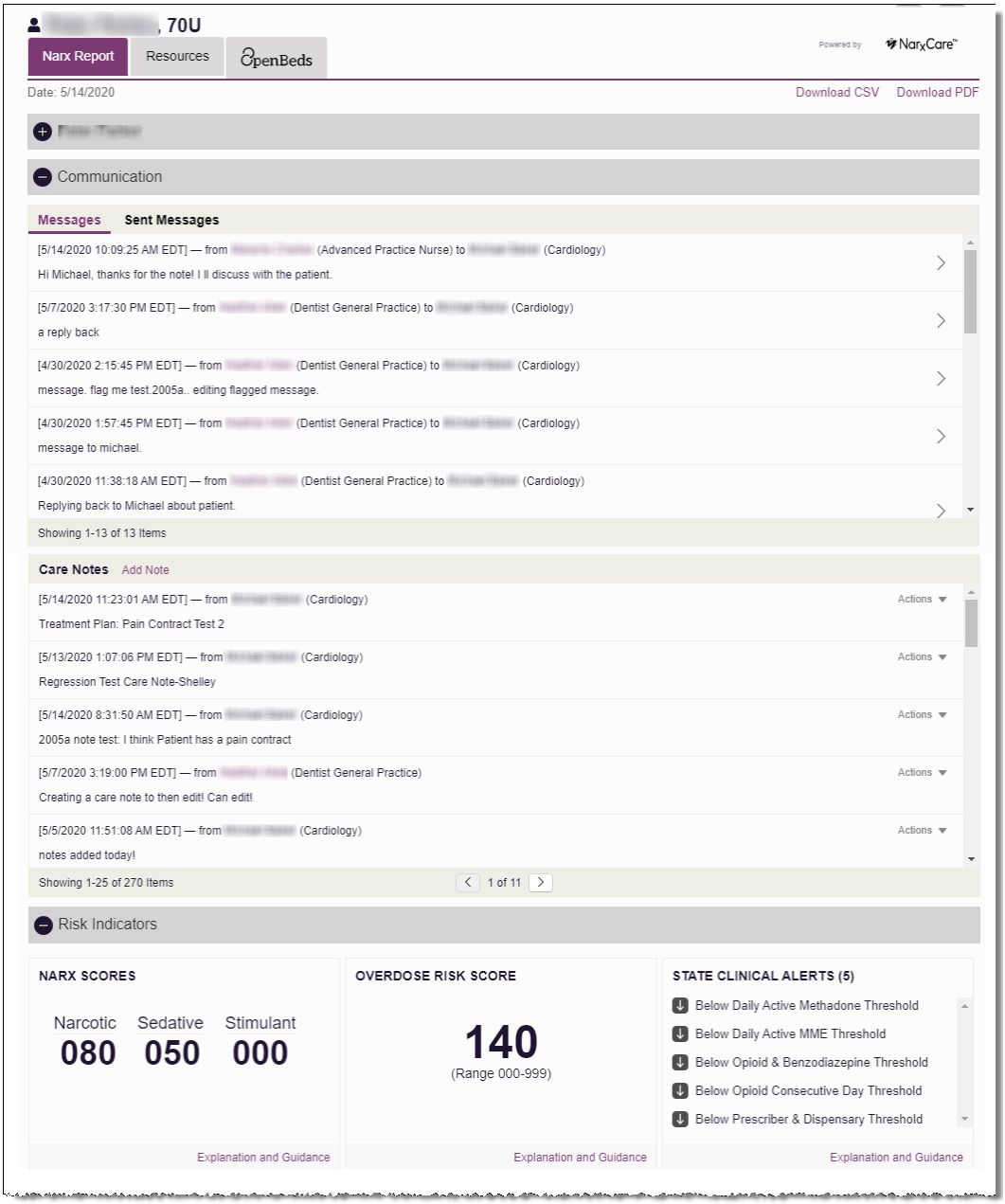

2. Click **Add Note** in the Care Notes section of the page.

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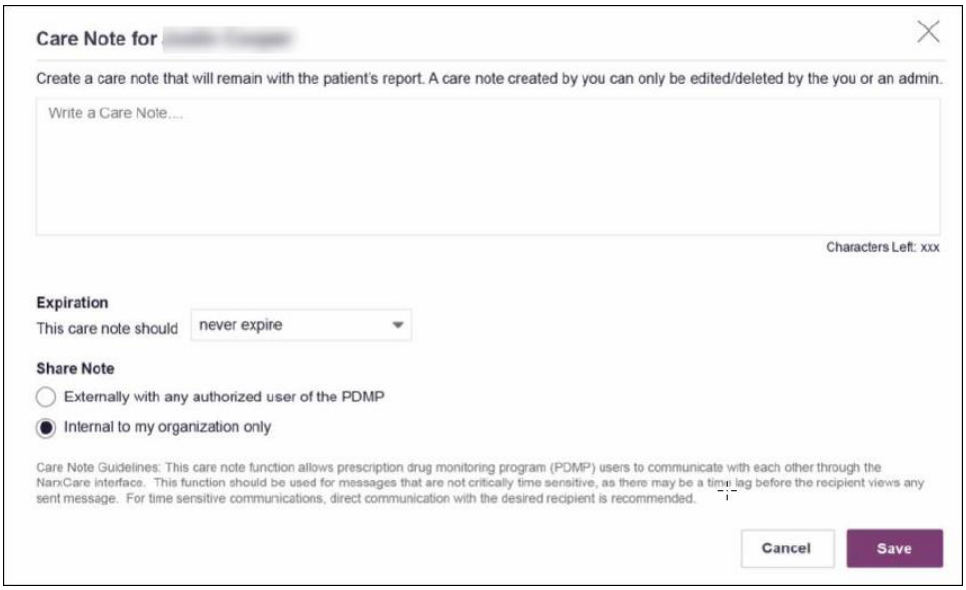
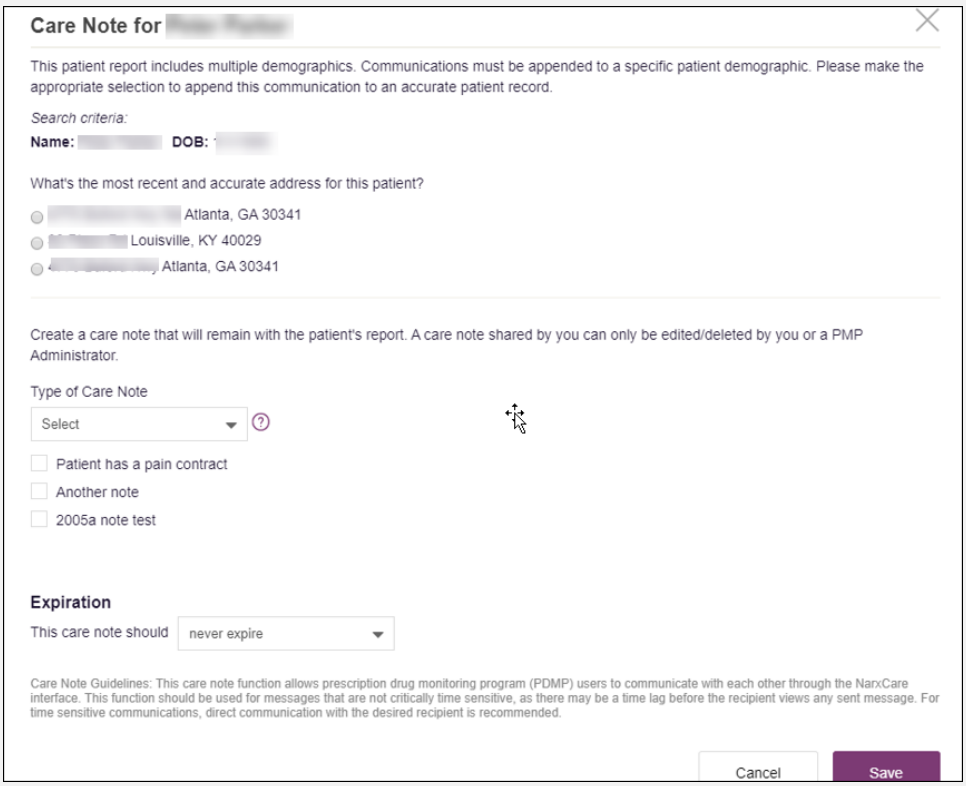
The Care Note creation window is displayed.



Note: *If configured by your PMP administrator, you may be required to select from a list of pre-defined Care Notes. These notes are defined by your PMP administrator and will vary by PMP. In this case, your Care Note creation window will display similar to the following example:*



To create a Care Note, select the type of note from the ***Type of Care Note*** *field, then click the checkbox next to the Care Note that should be added to the patient's record. If you have questions regarding the available Care Notes, please contact your PMP administrator.*

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3. Type your note in the **Write a Care Note** field. Note that Care Notes are limited to 1,000 characters.
4. In the **Expiration** field, use the drop-down menu to select when the Care Note should expire.

- You can choose to have the Care Note never expire or to expire after 3 months, 6 months, 12 months, or a custom number of months.
- If you choose the **expire after custom months** option, you will be prompted to enter the number of months after which the Care Note should expire. The maximum allowed is 99 months.

5. If you are adding a Care Note to a patient report via an EHR integration, the **Share Note** field will be displayed. Use this field to indicate whether the Care Note should be shared externally with any authorized PMP user or internally with your organization only.
6. Click **Save**.

   The Care Note is saved and immediately appended to the patient's record.

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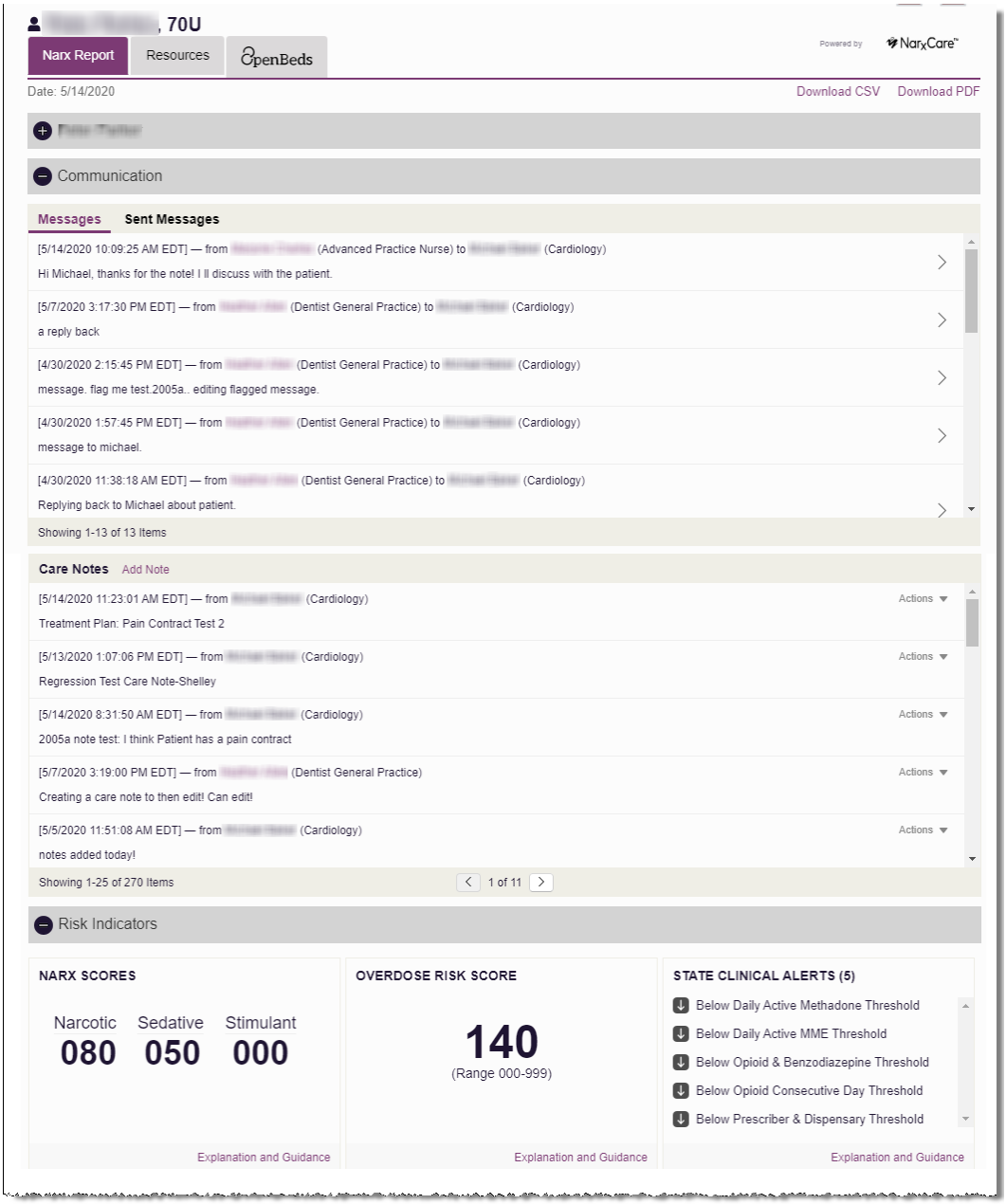
Editing a Care Note

***Note:** You can only edit Care Notes added by you. Your State Administrator may also edit your Care Note, if necessary.*

To edit your Care Note:

1. Generate a NarxCare Report for the patient using the instructions provided in the Creating a Patient Request section of this document.

   The NarxCare Report is displayed.



2. In the Care Notes section of the page, locate the note you wish to edit.

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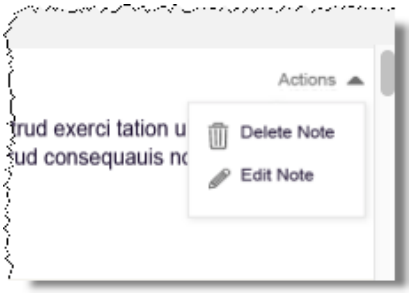
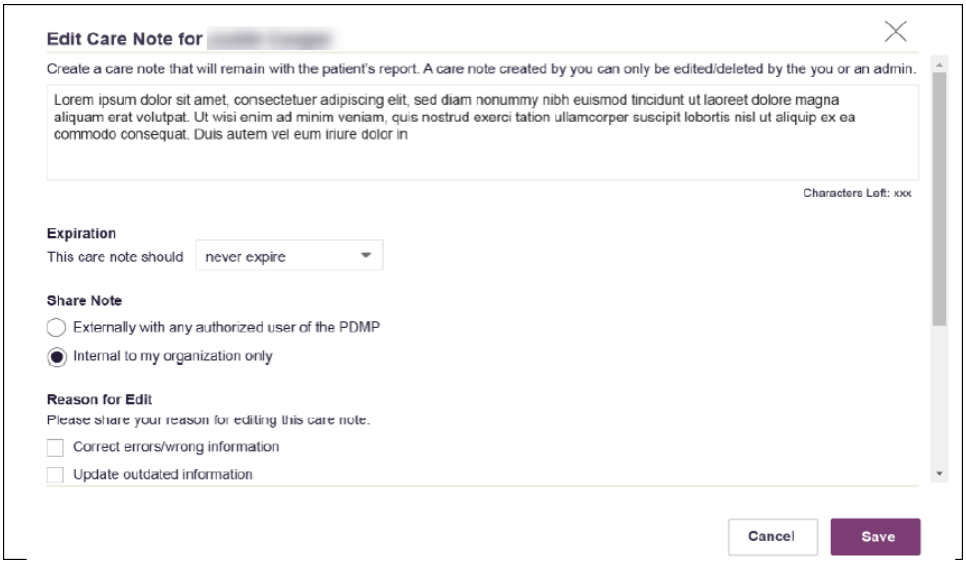
3. Click the **Actions** drop-down for the note and select **Edit Note**. *Note that this option is only available on notes created by you. You cannot edit Care Notes created by other clinicians.*



The Edit Care Note window is displayed.



4. Edit the Care Note as necessary. You may refer to steps 3–5 of the Adding a New Care Note section of this document for more information about the fields displayed on this window.
5. Once you have finished editing the Care Note, select the reason for editing the note in the **Reason for Edit** field. You may add any additional comments regarding the edit in the **Additional Comments** field. *Note that if you select **Other** as the reason for your edit, you must complete the **Additional Comments** field.*

6. Click **Save**.
   - Your edits are saved, and the Care Note is immediately updated on the patient's record.

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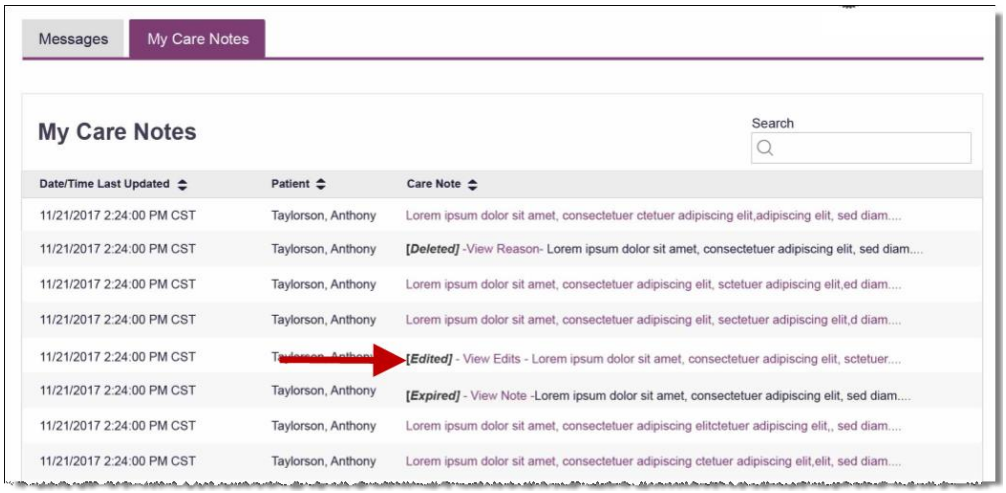
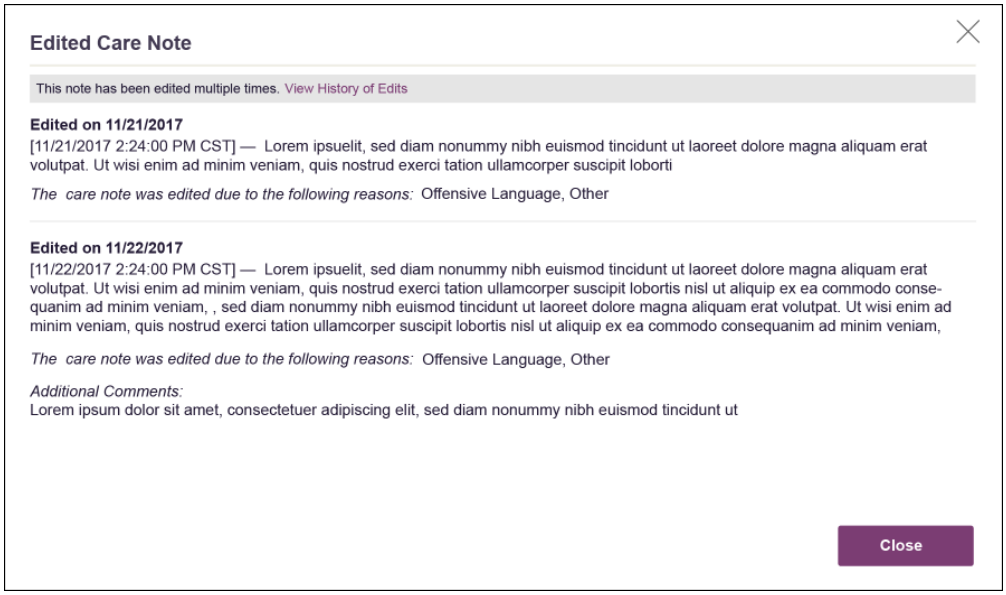
- Care Notes that have been edited by you or by the State Administrator are indicated with ***[Edited]*** next to the Care Note description in your inbox.



You may click **View Edits** to view the Care Note's edit history. Note that the edit history is only viewable by you and your State Administrator.



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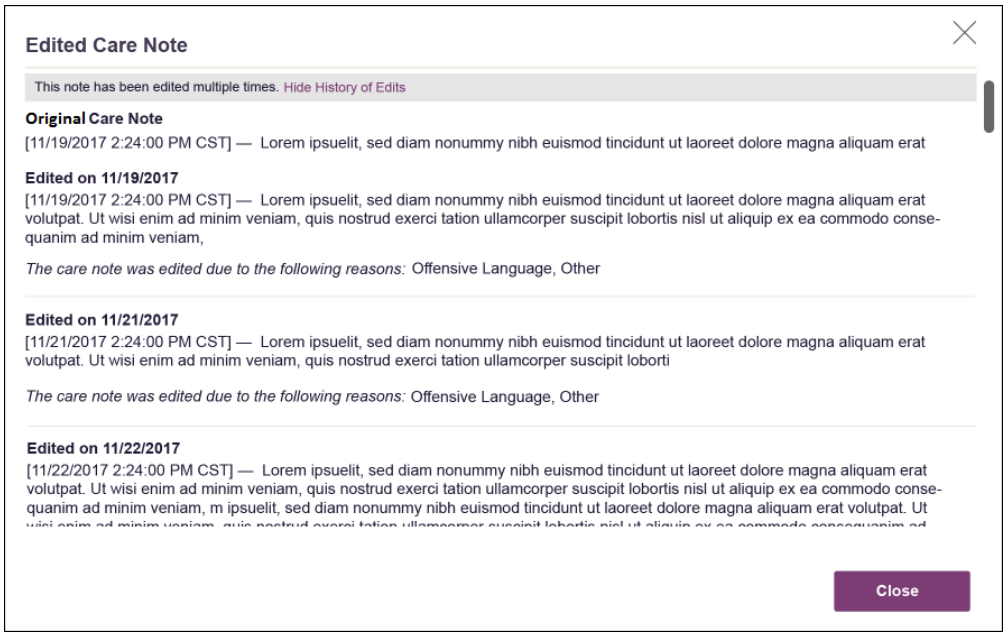
If the Care Note has been edited multiple times, you can click **View History of Edits** to view the entire edit history.



Deleting a Care Note

Note: *You can only delete Care Notes added by you. Your State Administrator may also delete your Care Note, if necessary.*

To delete your Care Note:

1. Generate a NarxCare Report for the patient using the instructions provided in the Creating a Patient Request section of this document.

   The NarxCare Report is displayed as shown on the following page.

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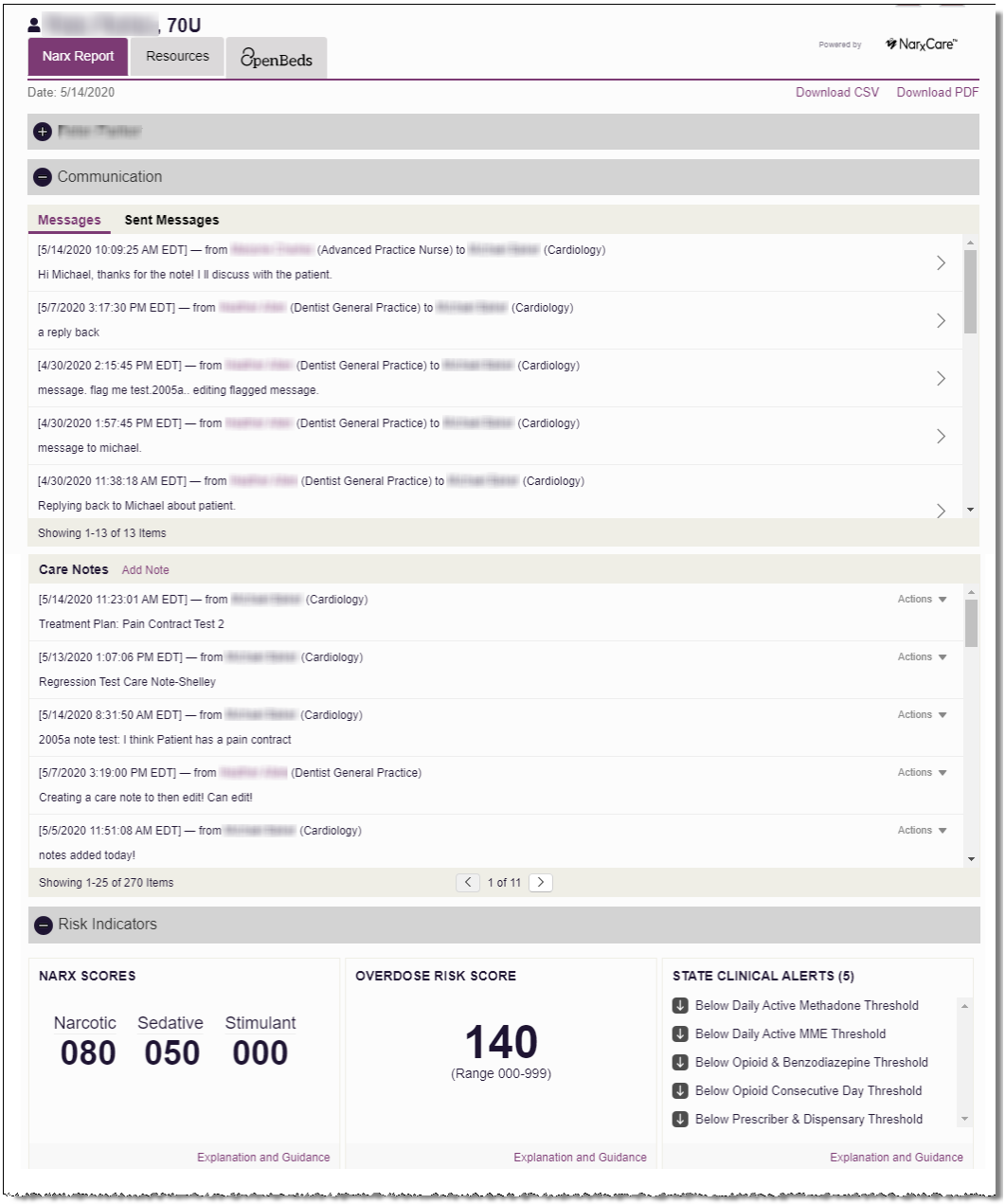
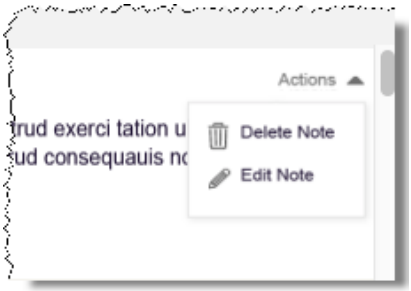


2. In the Care Notes section of the page, locate the note you wish to delete.
3. Click the **Actions** drop-down for the note and select **Delete Note**. *Note that this option is only available on notes created by you. You cannot delete Care Notes created by other clinicians.*



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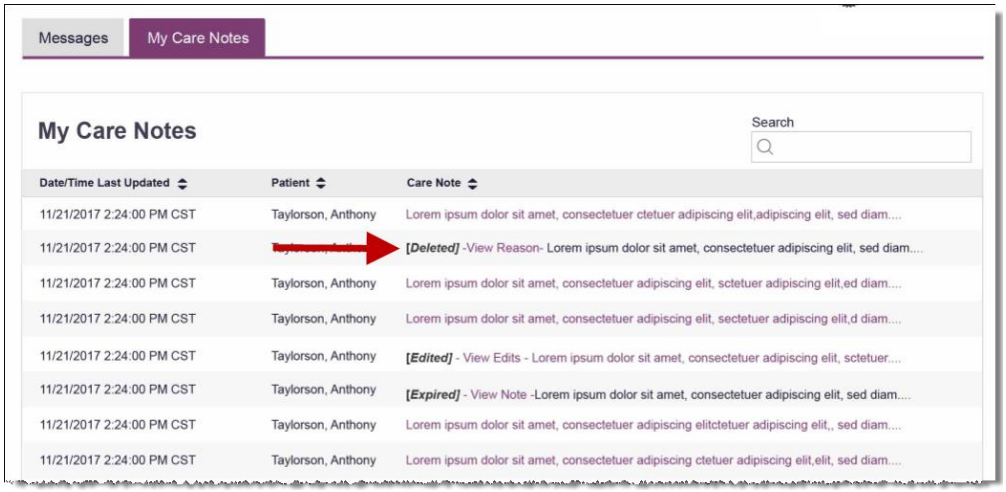
The Delete Care Note window is displayed.

4. Select the reason you are deleting the Care Note. You may add any additional comments regarding the deletion in the **Additional Comments** field. *Note that if you select **Other** as the reason for your deletion, you must complete the **Additional Comments** field.*
5. Click **Submit**.
   - The Care Note is immediately removed from the patient's record and will no longer be visible to you or any other prescriber.
   - Care Notes that have been deleted by you or by the State Administrator are indicated with ***[Deleted]*** next to the Care Note description in your inbox.



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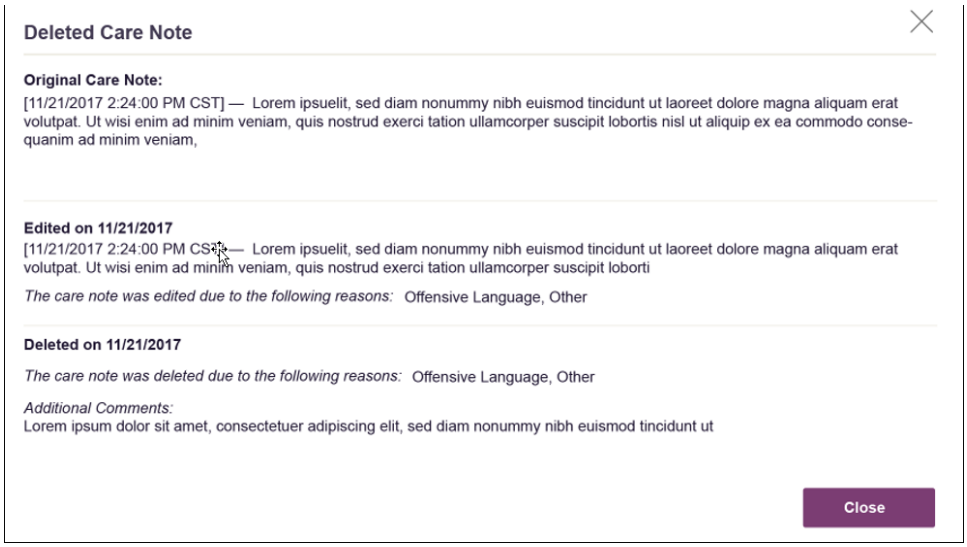
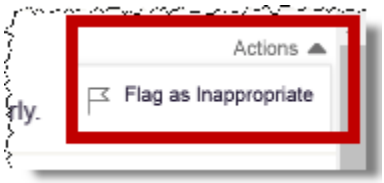
- You may click **View Reason** to view the Care Note's edit history and reason for deletion. Note that the edit history is only viewable by you and your State Administrator.



Flagging a Message/Care Note as Inappropriate

If you have received an inappropriate message and/or Care Note, you can flag it for review by the State Administrator. To flag a message or Care Note for review:

1. From the **Messages** or **Care Notes** section of the NarxCare Report, click the **Actions** drop-down and select **Flag as Inappropriate**.



The Flag as Inappropriate window is displayed.

2. Select the reason you are flagging the message or Care Note as inappropriate. You may add any additional comments regarding your reason in the **Additional Comments** field. *Note*

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*that if you select **Other** as the reason for flagging the message or Care Note, you must complete the **Additional Comments** field.*

3. Click **Submit**.

   The message or Care Note is flagged and sent to the State Administrator for review.

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