



Department of Health Professions

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# **VIRGINIA'S PRESCRIPTION MONITORING PROGRAM**

Promoting Management,  
Reducing Risk



# PRESCRIPTION MONITORING PROGRAM

- **Mission:**  
To promote the appropriate use of controlled substances for legitimate medical purposes while deterring the misuse, abuse, and diversion of controlled substances.



## ELEMENTS OF DATA COLLECTION

- What Drugs Are Reported?
- Who Must Report?
- Exemptions To Reporting?



## WHO MAY GET INFORMATION?

- Doctors and Pharmacists for their patients
- Investigators for licensing boards and certain law enforcement agents if they have an open investigation
- Patients for their own prescription history



## USE OF THE REPORT

- MAY



- MAY NOT



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## PROGRAM HOME PAGE

- [PMP Home](#)
- [About PMP](#)
- [Laws and Regulations](#)
- [Forms](#)
- [Reports and Statistics](#)
- [HIPAA Applicability](#)
- [Contractor Information](#)
- [Committee Members](#)
- [Committee Calendar](#)
- [Staff Directory](#)
- [DHP Home](#)
- [Board Of Pharmacy](#)
- [Board of Medicine](#)

### Virginia Prescription Monitoring Program

#### Pain Management Course offering

The Virginia Department of Health Professions has partnered with the VCU School of Medicine in the development of an online pain management curriculum called VCU Chronic Nonmalignant Pain Management. This curriculum emphasizes current issues in the management of pain through a case-based format and offers ongoing access to practice resources in pain management.

Registration is free; you will need your Virginia license number and the following case-sensitive access code: "Virginia Pain". [Click here to register for the course](#). Questions and comments can be directed to Leanne M. Yanni, MD, Creator and Editor, at [lyanni@mcvh-vcu.edu](mailto:lyanni@mcvh-vcu.edu).

#### The PMP Data Center

The PMP Data Center is now available with 24/7 access and auto-response capabilities for prescribers and pharmacists.

If you are a prescriber or pharmacist and have not registered to use the program please do so today by clicking on "Access the PMP Data Center". Click on "Not a user? Register to become a user", Fill out the form and click the SUBMIT button. Print the form out, sign and date it, and fax to 804-527-4470.

The registration form is also available on the forms page: [Prescription Monitoring Program Internet Datacenter Registration Form](#)

Once your registration request is verified and approved you will receive information about how to use the program.

[Access the PMP Data Center.](#)

#### Important Program Information

[Description of Program](#)

[Who is required to report?](#)

[How to Report](#) (Contractor information)

[How to Request Information](#)

#### Prescription Monitoring Program

Perimeter Center  
9960 Mayland Drive, Suite  
300  
Henrico, Virginia 23233-1463  
[Directions](#)

Email [pmp@dhp.virginia.gov](mailto:pmp@dhp.virginia.gov)  
Telephone: 367-4566  
Fax number: 527-4470

Hours: Mon-Fri 8:15 to 5:00  
except [Holidays](#)



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# DATACENTER LOG-IN SCREEN

Virginia Prescription Monitoring Program WebCenter

Welcome to the Virginia Prescription Monitoring Program. -  
Please Login to Continue

Username:

Password:

Login 

If you've lost your password, please contact the Administrator at:

Phone: **804-367-4566** Fax: **804-527-4470**

or Email: **[pmp@dhp.virginia.gov](mailto:pmp@dhp.virginia.gov)**

[Not a User ? Register to become a User.](#)



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# ONLINE REGISTRATION FORM

Virginia Prescription Monitoring Program WebCenter

Please fill out the form and click the **SUBMIT** button then print the form out, sign and date it, and fax to 804-527-4470.

Once your application is reviewed and approved, you will receive information on how to access and use the program.

**Profile Information**

Organization:  Occupation:   
First Name:  Middle Name:   
Last Name:  Date of Birth:   
mm/dd/yyyy

**User Job and Identification**

User Job:  Pharmacist   
Professional License # :

**Contact Information**

Address:   
City, State, Zip:  VA    
Home Phone:  Work Phone:   
Cell Phone:  Pager Number:   
Fax Number:   
Email Address:

**Security Questions**

Question 1: What is the name of the City you born in?    
Question 2: What is your favourite car?

Done Trusted sites 100%



## SUBMIT REQUEST SCREEN

Virginia Prescription Monitoring Program WebCenter Welcome, Test Investigator | Logout

HOME :: [Submit Request](#)

<b>Home</b>	<input type="text" value="Patient"/>
<b>-Requests</b>	
View	
Submit	
<b>+Alerts</b>	
<b>Messages</b>	
<b>My Account</b>	
<b>InfoCenter</b>	
<b>FAQ</b>	
<b>Related Links</b>	
<b>+Reports</b>	

**Name (Last, First, Middle):**

**D.O.B.:**  **Gender:**

mm/dd/yyyy

**Patient Contact Information**

**Street:**

**City:**  **State:**  **Zip:**

**Home Phone:**  **Work Phone:**

**Email:**

**Aliases/Other Family Members Who are Patients**



# REQUESTS VIEW SCREEN

Virginia Prescription Monitoring Program WebCenter Welcome, Test Investigator | Logout

HOME :: Requests

- Home
- Requests
  - View
  - Submit
- +Alerts
- Messages
- My Account
- InfoCenter
- FAQ
- Related Links
- +Reports

**All** Requests Sent to you

No records found

Name	Last Name	First Name	Status	Type	Submitted On
------	-----------	------------	--------	------	--------------

10 records per page

**Ready** Requests Sent by You

No records found

Name	Last Name	First Name	Status	Type	Submitted On
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10 records per page

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The top block is defaulted to “All” Requests Sent to You. This block is not normally used. The bottom block is defaulted to “Ready” Requests Sent by You. This is where most of the reports will be found.

## Virginia Prescription Monitoring Program

Website: [http://www.dhp.virginia.gov/dhp\\_programs/pmp/default.asp](http://www.dhp.virginia.gov/dhp_programs/pmp/default.asp)

TEL: 804/367-4566 E-MAIL: [pmp@dhp.virginia.gov](mailto:pmp@dhp.virginia.gov) FAX: 804/527-4470

### Patient Rx History Report

DATE : 2/10/09

Page 1 of 1

#### Search Criteria:

12:00:00AM' to '2/10/2009 12:00:00AM'

And D.O.B. = '12/12/1968' And State = 'VA' and Request Period = '2/1/2008

#### Prescriptions

Fill Date	Product, Str, Form	Qty	Days	Pt ID	Prescriber	Written	Rx #	N/R	Pharm	Pay
10/24/2008	ALPRAZOLAM TABLETS 0.5 MG TABLET	60	30	4957	STI GR	10/24/2008	4556018	N	4825735	U
3/27/2008	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS USP 500 MG;5 MG TABLET	20	3	1595	CAM DA	3/27/2008	4551452	N	4825735	U

N/R: N=New R=Refill

Pay: I=Insurance C=Cash M1=Medicare M2=Medicaid WC=Workers Comp CI=Commercial PBM Insurance U=Unknown

Total Prescriptions:

2

#### Prescribers for prescriptions listed

STI GR--Prescriber name and address for each prescription will be listed here.

CAM DA—Prescriber name and address for each prescription will be listed here.

#### Pharmacies that dispensed prescriptions listed

4825735—Pharmacy name and address for each prescription will be listed here.

#### Patients that match search criteria

4957—Patient name, DOB, and address for each prescription will be listed here.

1595—Patient name, DOB, and address for each prescription will be listed here.

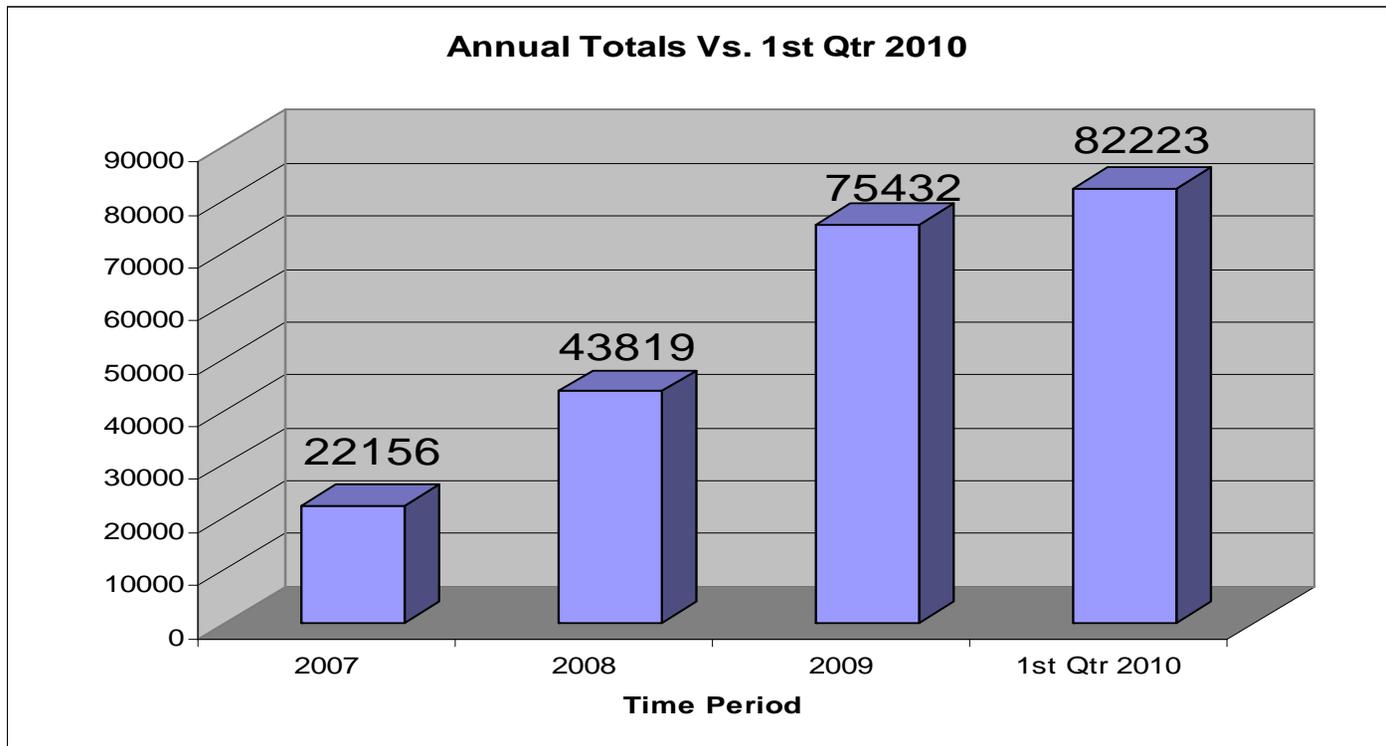
**Please read the reports carefully. If you have questions, contact the program at [pmp@dhp.virginia.gov](mailto:pmp@dhp.virginia.gov) or 804-367-4566**

**Disclaimer:** The State of Virginia does not warrant the above information to be accurate or complete. The Report is based on the search criteria entered and the data entered by the dispensing pharmacy. For more information about any prescription, please contact the dispensing pharmacy or the prescriber.

[www.dhp.virginia.gov](http://www.dhp.virginia.gov)

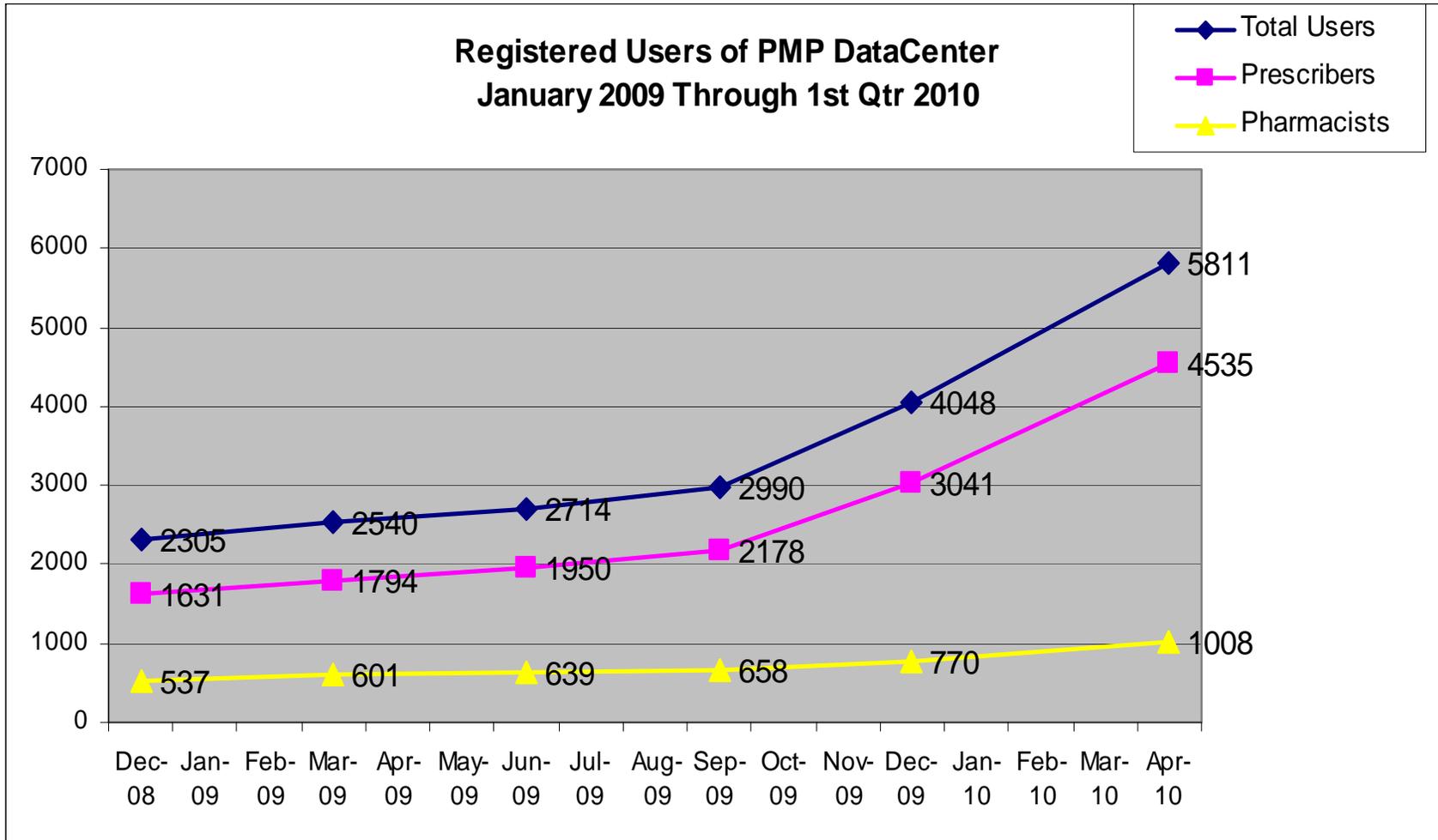


# SELECTED STATISTICS





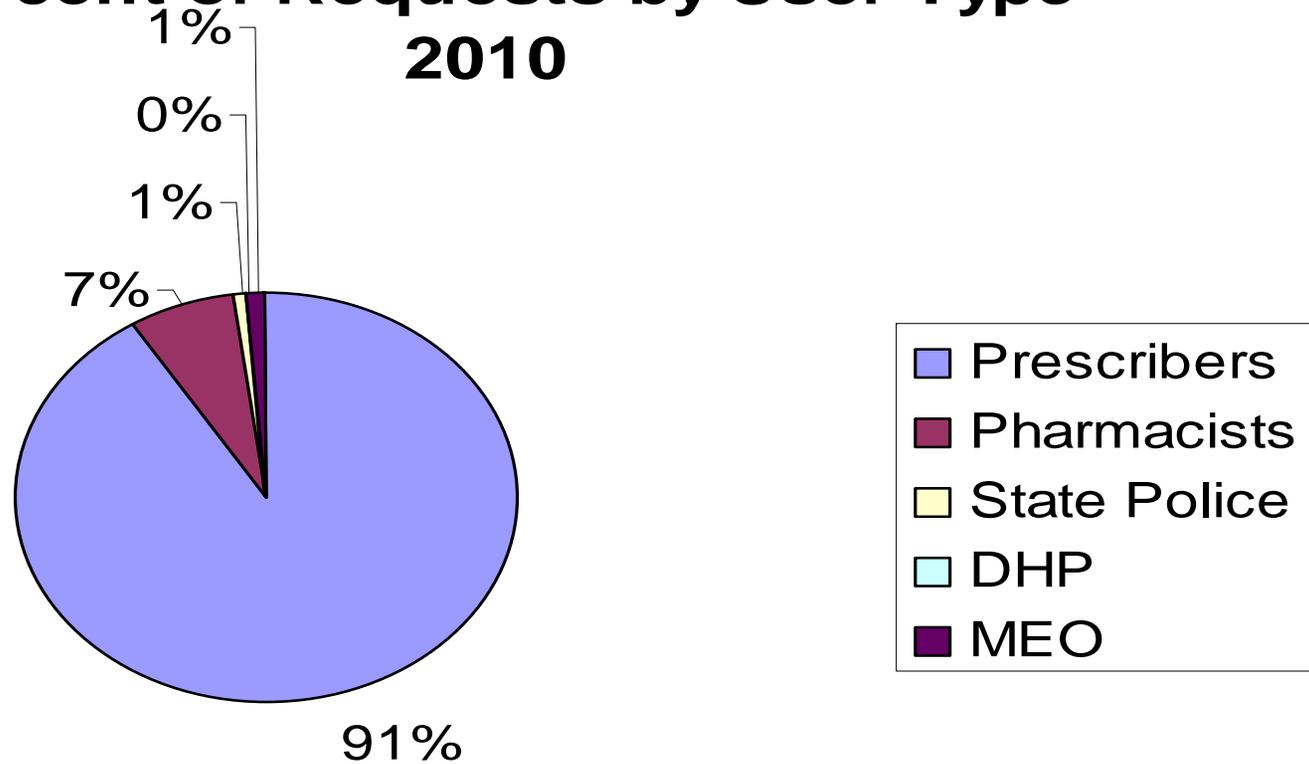
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**Percent of Requests by User Type  
2010**





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## Chronic Non-Malignant Pain Management

[Home](#)[Pharm Tables](#)[Summary Tables](#)[Tools](#)[References](#)[Key Points](#)

### Course Home Page

[Overview and Assessment](#)[Enter Module](#)[Treatment Goals](#)[Take Pre-Test](#)[Common Pain Diagnoses: Fibromyalgia](#)[Take Pre-Test](#)[Common Pain Diagnoses: Neuropathic Pain](#)[Enter Module](#)[Identifying and Meeting Challenges](#)[Enter Module](#)[Legal and Regulatory Aspects](#)[Enter Module](#)[Virginia](#)[Enter Module](#)[Post-Test Assessment](#)[Take Post-Test](#)

V i r g i n i a C o m m o n w e a l t h U n i v e r s i t y

[Privacy Statement](#)  
[Accreditation Information](#)

[School of Medicine](#)  
[Credits & Contacts](#)

[www.dhp.virginia.gov](http://www.dhp.virginia.gov)



# OTHER RESOURCES

- Locate substance abuse services in Virginia  
[www.dmhmrsas.virginia.gov/SVC-default.htm](http://www.dmhmrsas.virginia.gov/SVC-default.htm)
- Buprenorphine Physician Locator  
[www.buprenorphine.samhsa.gov/bwns\\_locator/index.html](http://www.buprenorphine.samhsa.gov/bwns_locator/index.html)
- Physician Clinical Support System (PCCS)  
<http://www.pcsmmentor.org/>
- Drug Enforcement Agency-Diversion Control  
[www.deadiversion.usdoj.gov/](http://www.deadiversion.usdoj.gov/)
- State Police Drug Diversion Unit  
(804) 674-2779, Euniqueca Reed



## ACCESS TO OTHER PROGRAMS

- West Virginia: <https://65.78.228.163>
- Kentucky: <http://chfs.ky.gov/os/oig/KASPER.htm>
- Tennessee:  
<https://prescriptionmonitoring.state.tn.us>
- North Carolina  
<http://www.ncdhhs.gov/mhddsas/controlledsubstance/index.htm>



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# PROGRAM CONTACT INFORMATION

- Program Phone #: 804-367-4566
- Fax 804-527-4470
- Email- [pmp@dhp.virginia.gov](mailto:pmp@dhp.virginia.gov)
- [www.dhp.virginia.gov/dhp\\_programs/pmp/default.asp](http://www.dhp.virginia.gov/dhp_programs/pmp/default.asp)