



Arizona State Board of Pharmacy

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****The following FAQs are being actively updated. Please check back frequently for any modifications.****

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Arizona Controlled Substances Prescription Monitoring Program

Electronic Prescribing of Controlled Substances (EPCS) Prescriber FAQs

Beginning **January 1, 2020**, each prescription order that is issued by a medical practitioner for a schedule II controlled substance that is an opioid shall be transmitted electronically to the dispensing pharmacy. This mandate was waived in March of 2020 due to COVID Executive Order 2020-20, and this order was rescinded July 2021. Beginning July 9, 2021 schedule II controlled substances that are opioids may only be dispensed with an electronic prescription order.

PRESCRIBER FREQUENTLY ASKED QUESTIONS:

What is EPCS?

EPCS stands for Electronic Prescribing of Controlled Substances and may also be referred to as e-Prescribing of Controlled Substances.

What does EPCS-certified mean?

In 2010, the Drug Enforcement Administration (DEA) issued regulations permitting prescribers to write prescriptions for controlled substances electronically. A practitioner is able to issue electronic controlled substance prescriptions only when the electronic prescription or electronic health record (EHR) system the practitioner is using is EPCS-certified. In order to be EPCS-certified, the system must meet strict DEA requirements for credentialing, software certification and dual-factor authentication.

What is the difference between e-Prescribing and EPCS?

Electronic prescribing, or "e-Prescribing," allows health care providers to enter non-controlled substance prescription information into a computer device and securely transmit the prescription to pharmacies using a special software program and connectivity to a transmission network. EPCS-certified systems allow health care providers to submit electronic prescriptions for schedule II-V controlled substances. EPCS-certified systems are specialized systems that must meet strict DEA requirements for credentialing, software certification, and dual-factor authentication.

Is it true that all controlled substance prescriptions will need to be submitted electronically?

Beginning **July 9, 2021**, each prescription order that is issued by a medical practitioner for a schedule II controlled substance that is an opioid shall be transmitted electronically to the dispensing pharmacy.



Do Schedule II opioid prescriptions from out-of-state prescribers need to be electronically submitted?

Per §36-2525(D)...a pharmacy may sell and dispense a schedule II controlled substance prescribed by a medical practitioner who is located in...another state if the prescription was issued to the patient according to and in compliance with the applicable laws of the state of the prescribing medical practitioner and federal law.

What should I do if the system goes down and I am unable to transmit an electronic prescription?

During any time in which an established electronic prescribing system or a pharmacy management system is not operational**, the medical practitioner may write a prescription order for a schedule II controlled substance that is an opioid. The medical practitioner shall indicate on the written prescription order that the electronic prescribing system or pharmacy management software is not operational. The medical practitioner must maintain a record, for a period of time prescribed by the board, or when the electronic prescribing system or pharmacy management system is not operational.

Not operational means that you currently have an EPCS system that is not transmitting properly.

Can I handwrite a prescription for a schedule II controlled substance that is an opioid if it will be filled in a federal facility?

Yes. As per §36-2525(N)(2), a medical practitioner is not in violation if the medical practitioner writes a prescription order for a schedule II controlled substance that is an opioid that will be dispensed for the patient from a veterans administration facility, a health facility on a military base, an Indian health services hospital or other Indian health service facility, or a tribal-owned clinic.

Can I handwrite a prescription if it is to be filled by a patient outside of the state?

The proposed language regarding prescriptions to be filled out-of-state is as follows:

A medical practitioner who is authorized to prescribe a controlled substance may furnish a written prescription order in accordance with R4-23-407 rather than an electronically transmitted prescription order if the prescription order is written in this state to be filled in a jurisdiction outside this state.

This exception is currently undergoing the rulemaking process, but has not yet been enacted. Please continue to check administrative codes and these FAQs for further updates.

If I handwrite a prescription for a compounded medication that includes a schedule II opioid, can the pharmacist fill it?

The proposed language regarding compounded medications is as follows:

A medical practitioner who is authorized to prescribe a controlled substance may furnish a written prescription order in accordance with R4-23-407 rather than an electronically transmitted prescription order if the prescription order is written for a medication that requires compounding two or more ingredients.

This exception is currently undergoing the rulemaking process, but has not yet been enacted. Please continue to check administrative codes and these FAQs for further updates.



If I handwrite a prescription for a schedule II opioid that is not currently in my EPCS database, can the pharmacist fill it?

The proposed language regarding medications not in the EPCS database is as follows:

A medical practitioner who is authorized to prescribe a controlled substance may furnish a written prescription order in accordance with R4-23-407 rather than an electronically transmitted prescription order if the prescription order is written for a medication that is not in the E-prescribing database.

This exception is currently undergoing the rulemaking process, but has not yet been enacted. Please continue to check administrative codes and these FAQs for further updates.

Can I still fax a prescription order for a schedule II controlled substance that is an opioid for a patient enrolled in hospice care?

Yes. Pursuant to A.R.S. §36-2525(F)(3), a patient's medical practitioner or the medical practitioner's agent may transmit to a pharmacy by fax a prescription order written for a schedule II controlled substance, including opioids, if the prescription order is for a patient who is enrolled in a hospice care program that is certified or paid for by medicare under title XVIII or a hospice program that is licensed by this state. The medical practitioner or the medical practitioner's agent must note on the prescription that the patient is a hospice patient.

Can I still fax a prescription order for a schedule II controlled substance that is an opioid for a patient registered to a long-term care facility (LTCF)?

Yes. Pursuant to A.R.S. §36-2525(F)(2), a patient's medical practitioner or the medical practitioner's agent may transmit to a pharmacy by fax a prescription order written for a schedule II controlled substance, including opioids, if the prescription order is for a resident of a long-term care facility.

Is a skilled nursing facility (SNF) considered a long-term care facility (LTCF)?

Yes. During the September 26, 2019 Board of Pharmacy meeting, the Board moved to better define long-term care facilities to include skilled nursing facilities.



If the strength, directions, or quantity of medication is incorrect on a schedule II opioid prescription sent by way of EPCS, can a pharmacist call the prescriber to correct?

Yes. Pursuant to A.R.S. §36-2525(A)...If authorized verbally by the prescriber, the pharmacist may make changes to a written or electronic schedule II controlled substance prescription order, except for the following:

1. The patient's name
2. The prescriber's name
3. The drug name

The pharmacist must document on the original prescription order the changes that were made pursuant to the verbal authorization and record the time and date the authorization was granted.

The pharmacist must speak with the prescriber for authorization and cannot speak with a prescriber's representative. The EPCS prescription should be electronically annotated with the prescriber-authorized changes (See 21 CFR §1311.200 (f)).

What are the next steps for prescribers if compliance is not met with becoming EPCS capable?

The Board of Pharmacy does not have jurisdiction over prescribers. However, health professional regulatory boards may enforce provisions through the opening of and receiving of complaints. Please contact the appropriate regulatory board for further specific information.

If I do not currently prescribe any Schedule II opioids, and I do not intend to prescribe Schedule II opioids in the future, do I need to get an EPCS-certified system?

If you will *never* be prescribing schedule II opioids, you do not need to get an EPCS-certified system at this time. Please be aware that this could change in the future due to federal or state law.

If I am semi-retired or retired, do I need to get an EPCS-certified system?

If you currently prescribe or intend to prescribe any schedule II opioids, you must get an EPCS-certified system.

If I prescribe very few controlled substances per month, do I need to get an EPCS-certified system?

If you currently prescribe or intend to prescribe any schedule II opioids, you must get an EPCS-certified system.

As a veterinarian, can I provide a handwritten prescription for a schedule II controlled substance that is an opioid?

Yes. As per §36-2525(R) veterinarians are currently exempted from the EPCS requirements until the Arizona state veterinary medical examining board determines that electronic prescribing software is widely available for veterinarians and notifies the Arizona State Board of Pharmacy of that determination.



How do I know if my Electronic Health Record (EHR) or if my e-Prescribing (eRx) system is EPCS-certified?

To determine if your EHR or eRx system is EPCS-certified, contact your vendor and ask if they are EPCS-certified. You can also browse certified provider software solutions online at <https://surescripts.com/network-connections/prescriber-software/>

How do I start the process of getting EPCS capable?

You will need specialized software and a dual-factor authentication device or process. Providers should follow these steps to get started:

1. Contact your EHR or e-prescribing vendor and ask if they are EPCS-certified
2. Complete identity proofing requirements
3. Set up access controls
4. Obtain dual authentication device or process
5. Go live with EPCS and adjust workflow

What is identity proofing?

Identity proofing is the process for verifying that a person is who he or she claims to be and verifying that this person to whom two-factor authentication credentials will be issued is a licensed provider who is authorized to prescribe controlled substances.

What is the process of setting up access controls?

Setting up access controls involves setting the specific set of functions that a particular computer account has access to, including the functions that various users may perform after logging into the account. This allows different types of users of the same application access to different functions. For example, these controls allow only those users who are verified and licensed to prescribe controlled substances to submit a controlled substance prescription electronically.

What is a dual authentication device or process?

This process involves a prescriber setting up two separate authentication tokens. These typically comprise a memorized password plus another token that is generated by a hardware device issued to the prescriber, such as a smart card, USB device or one-time password device, or a biometric characteristic of the prescriber, such as a fingerprint or retinal pattern. Your vendor will inform you which authentication device(s) they support.

Is EPCS costly to set up?

The cost to set up and use EPCS varies by vendor and your contractual arrangement. Contact your vendor directly for an exact EPCS quote for your practice.

For a brief overview of general cost comparisons, visit

https://healthcurrent.org/wp-content/uploads/2018/09/EPCS-Cost-Sheet_FINAL_09-21-18.pdf

Are there any resources available to help with e-prescribing questions related to set up?

Health Current can help with e-prescribing by answering questions and assisting you to overcome any barriers you may encounter. They can be reached by emailing erx@healthcurrent.org or by calling (602) 688-7200.