INSPECT

Indiana Scheduled Prescription Electronic Collection & Tracking

UNSOLICITED REPORTS

Person of Interest Alert FAQs

Version 1.0
10/8/10

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INDIANA BOARD OF PHARMACY

bop.in.gov

Unsolicited Reports

What is INSPECT?

Since 2007 the Indiana Scheduled Prescription Electronic Collection and Tracking Program, better known as INSPECT, has sought to provide Indiana health care providers and authorized law enforcement with timely controlled substance treatment information for those patients to whom they are providing treatment. All individuals with the authority to prescribe or dispense controlled substances, along with authorized law enforcement, are eligible to utilize INSPECT's web-based software, known as the PMP WebCenter, to access patient report information 24/7. If you are not a registered INSPECT user, you may visit www.in.gov/inspect and click "Register" to begin the application process.

INSPECT is authorized by statute under IC 35-48-7. The information contained in the database is populated by all pharmacies dispensing controlled substances to Indiana residents (i.e., in-state, mail order, non-resident pharmacies).

What is an Unsolicited Report?

Traditionally, registered INSPECT users sign-in to the online application, the PMP WebCenter, to request or solicit information on a patient and a report is returned displaying the controlled substance history of that patient. Effective July 1, 2010 the scope of INSPECT services has expanded to include a new "unsolicited report" offering in the form of Person of Interest Alerts. The Person of Interest Alerts will provide both registered INSPECT users and non-users with information regarding patient activities.

Definition of a Person of Interest Alert:

The Person of Interest Alert is designed to notify both registered INSPECT users and non-users alike of possible patient misuse or diversion of controlled substances. Receipt of such an alert means that-based on an objective review of available INSPECT records-a patient under your care (and potentially under the care of several other practitioners) has exceeded the patient dispensing guidelines established in August 2010 by the Indiana Board of Pharmacy.

Person of Interest Alerts should not be construed as evidence that a crime has taken place. All information contained in the INSPECT report comes from data reported to INSPECT by licensed dispensing pharmacies, and should be fully validated to ensure that the data is accurate and complete. While there is a chance that the patient's INSPECT report may not be fully complete or accurate, or that it may be flawed in other ways, in the interest of

helping to limit the illicit diversion of prescription drugs statewide, and in the interest of protecting the safety and well-being of patients, we are statutorily required to inform you of our findings (**IC 35-48-7**).

How Does it Work & What To Do with an Alert?

To start, login to INSPECT and run a patient report on the subject of the Person of Interest Alert you received.

A practitioner will not be able to access protected prescription information on the subject of a Person of Interest Alert until they login to their INSPECT account, via the online application, the PMP WebCenter (the alert itself only contains the name of the individual who exceeded the pre-established thresholds). If you do not have an INSPECT account but wish to obtain one, follow the directions in the section titled "Registering for INSPECT & Links" below.

Under Indiana law practitioners are not required to use INSPECT, but will need to have an account in order to research any Person of Interest Alert received and review the prescriptions obtained by the subject of that alert. Practitioners who do use INSPECT are immune from civil liability for an injury, death, or loss to a person solely due to a practitioner seeking or not seeking information from the INSPECT program, so long as the there is no gross negligence or intentional misconduct. However, immunity does not apply if the practitioner receives information directly from the INSPECT program and then negligently misuses the information (i.e., by acting in a manner that violates sharing rules and policies of the INSPECT program or their respective employers). Possession and proper use of an INSPECT report is permissible and not a violation of HIPAA.

With respect to the next steps, the Indiana Board of Pharmacy in consultation with the other health profession licensing boards and associations advises that a practitioner should first run an INSPECT report on the subject of a Person of Interest Alert to verify the authenticity and validity of the data. Any questions on the report should be answered by a review of your own records and by consulting with the dispensing pharmacy who filled the prescription in question to verify accuracy and authenticity.

Practitioners should ensure that in fact they wrote and authorized the prescriptions for that patient that are attributed to their name. The Board of Pharmacy then advises that the practitioner perform a clinical evaluation of the patient to determine the next steps before taking or determining final action. The Board recognizes and advises that each case will be different and that no one solution will be right for every patient. The Board advises that practitioners should exercise their best professional judgment and be mindful that they have a duty to protect public health and safety, as well as the health of their individual patient. To that end, the following action steps are permissible, and may provide an option(s) to assist practitioners in deciding how best to act:

- Practitioners are permitted by state and federal law to discuss the reports with other treating and prescribing providers, including pharmacists, to develop appropriate action plans (or to verify treatment of the patient in question).

- Some practitioners may want to continue treating the patient, if they think it is legal and in their professional judgment in the best interest of the patient.

- Some practitioners may want to counsel the patient or enter into an agreement with the patient for treatment or referral to a facility.

- Practitioners could determine that the best course is to continue treatment but require them to enter into a contract or monitoring agreement.

- Depending on the nature and severity of the drug problem, it may be appropriate for the practitioner to consider referring the case to local, state, or federal law enforcement authorities.

These are just a few of the many different options available that practitioners can pursue to deal with a patient who may abusing or misusing controlled substances. The Board's goal is to provide this tool to help practitioners combat doctor shopping, diversion, and the misuse of prescriptions drugs. The reports and the established thresholds are designed so as not to interfere with legitimate use and patient care.

Person of Interest Alerts do not include any private health information.

Health Information Privacy & HIPAA: http://www.hhs.gov/ocr/privacy/

Proper Use of INSPECT

As a reminder, practitioners may only obtain information from INSPECT to provide treatment or evaluate the need for treatment to a patient. This includes patients who have made appointments for an initial office visit or persons who have presented a prescription to a pharmacist. Practitioners may not request a report on office/pharmacy staff, prospective employees, or anyone else for whom there is no medical chart/record available on-site for review at the practitioner's office/pharmacy location.

INSPECT Practitioner Usage Policies & Guidelines

INSPECT Law Enforcement Usage Policies & Guidelines

The Indiana Board of Pharmacy guidance document on interpreting the INSPECT report is available at:
http://www.in.gov/pla/files/How_to_interpret_the_INSPECT_Rx_History_Report(3).pdf

Registering for INSPECT & Links

Eligibility

Eligibility for access to INSPECT is limited to practitioners that hold an individual DEA number along with a valid CSR (controlled substance registration) license, and sworn law enforcement officials.

Indiana Code 35-48-7-5.8 defines a practitioner as, "…a Physician, Dentist, Veterinarians, Podiatrists, Nurse Practitioners, Scientific Investigators, Pharmacists, or any other institution or individual licensed, registered, or otherwise permitted to distribute, dispense or conduct research with respect to, or administer a controlled substance in the course of professional practice or research in the United States.

Register

Register to use INSPECT at http://www.in.gov/pla/inspect.htm

a. Click "Register".
b. Complete the application providing the requested information.
   (Pharmacists will need to choose "Practitioner" as their user job and provide their professional license number, but may leave the space for a DEA number blank.)
c. Be sure to provide your secure, private email address upon registration. It is against the INSPECT security policy to email a username and password to anyone but the registered account holder.
d. Approval of the application usually takes 1-2 business days. You will receive an email at the address used in the application upon approval or denial of the account.

INSPECT Users & Non-users: Ensure your email and mailing addresses are current with INSPECT staff (inspect@pla.in.gov) and the Medical Licensing Board ((317) 234-2060), Board of Pharmacy ((317) 234-2067), or Nursing Board ((317) 234-2043).

Links

INSPECT Homepage: www.in.gov/inspect

PMP WebCenter Login page: https://extranet.pla.in.gov/PMPWebCenter/Login.aspx

Health Information Privacy & HIPAA: http://www.hhs.gov/ocr/privacy/

IC 35-48-7: http://www.in.gov/legislative/ic/code/title35/ar48/ch7.html

Indiana State Medical Association: http://www.ismanet.org/

National Alliance for Model State Drug Laws: http://www.namsdl.org/home.htm

Please forward all questions to inspect@pla.in.gov.

1. **Will the alerts be issued all at once monthly, or will they be staggered in some way? In other words, could physicians receive them any time, or will they likely only receive them all at once at one particular point every month?**

We are planning to send out unsolicited reports every sixty (60) days, with the first tentative mail out date will be October 11, 2010, covering the period of 8/1/2010 – 9/30/2010.

2. **The email alert says, "We are statutorily required to inform you of our findings." Can you tell me what statute requires that?**

This statement refers to IC 35-48-7-11.5.

3. **The website says it generally takes 2-3 business days to get registered for INSPECT. Is that accurate?**

Yes. This used to be closer to one (1) business day, except on weekends. However, INSPECT is now required to follow specific authentication/registration protocols required of states in receipt of Federal NASPER grant funds. These protocols involve the collection of signed, notarized documentation from all registrants—hence, the greater lag time between when the registrant completes the web application and when they actually receive their login credentials. You can find out more information on account re-authentication here: http://www.in.gov/pla/2333.htm

4. **The email alert says, the INSPECT report "should be fully validated to ensure that the data is accurate and complete." How would a physician do that?**

Validating prescriptive records refers to the practice of contacting dispensers to ensure that there are no major errors/discrepancies on the INSPECT Report. As we note in the INSPECT report disclaimer (and in many other reference documents), the information contained in the report comes directly from the dispensing pharmacy and is subject to error (note: we estimate that our error rate is currently around 1%; however, 1% of 12 million is still 120,000). We also have some educational materials about "interpreting the INSPECT report" that cover best practices as it relates to reviewing INSPECT report information.

Here's a link to the interpretation document:
http://www.in.gov/pla/files/How_to_interpret_the_INSPECT_Rx_History_Report(3).pdf

5. **Do the Person of Interest Alerts go only to prescribers? Does law enforcement receive any form of the unsolicited reports?**

The Person of Interest Alerts currently go only to prescribers and the pharmacist-in-charge at the pharmacies that are shown to have dispensed to the patient in question. We do not currently provide any unsolicited reports to law enforcement.