Washington

PDMP acronym: Prescription Review
Agency Responsible: Washington State Department of Health
Agency Type: Department of Health
Website: http://www.doh.wa.gov/pmp
Email: prescriptionmonitoring@doh.wa.gov
Register Website: http://www.wapmp.org/practitioner/pharmacist/
Query Website: https://secureaccess.wa.gov/
Data Upload Website: 
Statistics Website: https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/PrescriptionMonitoringProgramPMP/Data
Training Website: www.doh.wa.gov/pmp
Opioid Guidelines Website: https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/OpioidPrescribing/Background

PDMP Contact Information

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Fax: 3602362901
Email: carly.bartz-overman@doh.wa.gov

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Fax: 3602362901
Email: jennifer.kang@doh.wa.gov

State Population and Number of Registrants

State population: 7,715,946    DEA Prescriber total: 48,821    DEA Dispenser total: 1,289
Data Transmitter(s)

<table>
<thead>
<tr>
<th>Dispensing Practitioner</th>
<th>Dispensing Veterinarians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indian Health Services</td>
<td>Pharmacy (In-State)</td>
</tr>
<tr>
<td>Pharmacy (Mail Order In-State)</td>
<td>Pharmacy (Mail Order Out of State)</td>
</tr>
<tr>
<td>Pharmacy (Other Out of State)</td>
<td>Veterans Administration</td>
</tr>
</tbody>
</table>

Substances Monitored

| Drugs of Concern | Schedules II - V |

Alternate Data Sources

| ARCOS Reports | Overdoses - Fatal |
| Pharmaceutical Manufacturers/Distributors |

Available Reports

<table>
<thead>
<tr>
<th>Data Dashboards</th>
<th>Dispenser Reports to Law Enforcement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Trend Reports</td>
<td>Geomapping of Prescription Data</td>
</tr>
<tr>
<td>Licensee Reports to Licensing Board</td>
<td>MME Calculations</td>
</tr>
<tr>
<td>Multiple Provider Episode Reports</td>
<td>Patient Query Lists to Licensing Boards</td>
</tr>
<tr>
<td>Patient Reports to Dispensers</td>
<td>Patient Reports to Law Enforcement</td>
</tr>
<tr>
<td>Patient Reports to Licensing Boards</td>
<td>Patient Reports to Prescribers</td>
</tr>
<tr>
<td>PDMP Evaluation Reports</td>
<td>Prescriber Report Cards</td>
</tr>
<tr>
<td>Prescriber Reports to Law Enforcement</td>
<td>Registrant Query Lists to Licensing Boards</td>
</tr>
<tr>
<td>Registrant Reports to Prescribers</td>
<td>Statewide Statistics</td>
</tr>
</tbody>
</table>
Statistical Capabilities

- # of Prescription Filled
- # of Prescriptions Filled by CS Schedule
- # of Prescriptions Filled by Drug Class
- Statistics Filtered by Age or Age Range
- Statistics Filtered by Ethnicity or Race
- # of Authorized PDMP Users Enrolled
- # of Registrants in SDTC
- # of Registrants in SDTC by Practice/License Type
- # of Data Errors by Error Type
- # of Data Errors Corrected
- # of At-Risk Patients by Risk Factor
- Risk Factor Statistics by Time Frame
- # of Solicited Prescriber Reports
- # of Solicited Prescriber Reports by Requestor Type
- # of Unsolicited Prescriber Reports
- # of Unsolicited Prescriber Reports by Recipient Type
- # of Solicited Dispenser Reports
- # of Solicited Dispenser Reports by Requestor Type
- # of Unsolicited Dispenser Reports
- # of Unsolicited Dispenser Reports by Recipient Type
- # of Solicited Patient Reports
- # of Solicited Patient Reports by Requestor Type
- # of Unsolicited Patient Reports
- # of Unsolicited Patient Reports by Recipient Type
- # of Dosage Units Dispensed
- # of Dosage Units Dispensed by CS Schedule
- # of Dosage Units Dispensed by Drug Class
- Statistics Filtered by Gender Identification
- Statistics Filtered by Geographic Location
- # of Prescribers Enrolled in PDMP by License Type
- # of Dispensers Enrolled in PDMP by License Type
- # of Prescribers Enrolled in PDMP by Specialty
- # of Unique Prescribers
- # of In-State Queries
- # of In-State Queries by Requestor Type
- # of Interstate Queries
- # of Interstate Queries by Requestor Type
- # of Positive Matches from Interstate Queries
- # of Solicited Statistical Reports by Requestor Type
- # of Unsolicited Statistical Reports by Recipient Type
- # of Unique Requestors for Solicited Reports
- # of Unique Requestors by Requestor Type (sol. reports)
- # of Unique Requestors for Unsolicited Reports
- # of Unique Recipients by Recipient Type (unsol. reports)
- % Out-of-State Patients: 5-10%
- % Out-of-State Prescribers: 5-10%

Data Analysis Resources Available:
Data Analyst; Epidemiologist; Business Analyst;
Authorized PDMP Users

Correctional Supervision/Solicited In-State
Dispenser Delegates - Licensed/Solicited In-State
Dispensers - Pharmacists/Solicited In-State
Dispensers - Pharmacists/Solicited Out-of-State
Dispensers - Pharmacists/Unsolicited In-State
Dispensers - Pharmacists/Unsolicited Out-of-State
Healthcare Facilities and Institutions/Solicited In-State
Law Enforcement - Federal/Solicited In-State
Law Enforcement - Federal/Solicited Out-of-State
Law Enforcement - Local/Solicited In-State
Law Enforcement - Local/Solicited Out-of-State
Law Enforcement - State/Solicited In-State
Law Enforcement - State/Solicited Out-of-State
Medicaid Fraud and Abuse/Solicited In-State
Medicaid Fraud and Abuse/Solicited Out-of-State
Medical Examiners and Coroners/Solicited In-State
Medical Examiners and Coroners/Solicited Out-of-State
Medical Interns/Solicited In-State
Medical Interns/Solicited Out-of-State
Medical Interns/Unsolicited In-State
Medical Interns/Unsolicited Out-of-State
Medical Residents/Solicited In-State
Medical Residents/Solicited Out-of-State
Medical Residents/Unsolicited In-State
Medical Residents/Unsolicited Out-of-State
Nurse Practitioners/Solicited In-State
Nurse Practitioners/Solicited Out-of-State
Nurse Practitioners/Unsolicited In-State
Nurse Practitioners/Unsolicited Out-of-State
Patients/Solicited In-State
Patients/Solicited Out-of-State
Physician Assistants/Solicited In-State
Physician Assistants/Solicited Out-of-State
Physician Assistants/Unsolicited In-State
Physician Assistants/Unsolicited Out-of-State
Prescriber Delegates - Licensed/Solicited In-State
Prescriber Delegates - Licensed/Solicited Out-of-State
Prescribers/Solicited In-State
Prescribers/Solicited Out-of-State
Prescribers/Unsolicited In-State
Prescribers/Unsolicited Out-of-State
Prosecutors/Solicited In-State
Prosecutors/Solicited Out-of-State
Regulatory and Licensing Boards/Solicited In-State
Regulatory and Licensing Boards/Solicited Out-of-State
Regulatory and Licensing Boards/Unsolicited In-State
Regulatory and Licensing Boards/Unsolicited Out-of-State
<table>
<thead>
<tr>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Researchers/Solicited In-State</td>
</tr>
<tr>
<td>Researchers/Solicited Out-of-State</td>
</tr>
<tr>
<td>State Health Departments/Solicited In-State</td>
</tr>
<tr>
<td>Workers Compensation State/Solicited In-State</td>
</tr>
</tbody>
</table>

...
Engaged PDMP Users

Dispensers - Pharmacists/Solicited In-State
Dispensers - Pharmacists/Solicited Out-of-State
Healthcare Facilities and Institutions/Solicited In-State
Law Enforcement - Federal/Solicited In-State
Law Enforcement - Federal/Solicited Out-of-State
Law Enforcement - Local/Solicited In-State
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Law Enforcement - State/Solicited Out-of-State
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Medicaid Fraud and Abuse/Solicited Out-of-State
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Medical Examiners and Coroners/Solicited Out-of-State
Medical Interns/Solicited In-State
Medical Interns/Solicited Out-of-State
Medical Residents/Solicited In-State
Medical Residents/Solicited Out-of-State
Nurse Practitioners/Solicited In-State
Nurse Practitioners/Solicited Out-of-State
Patients/Solicited In-State
Patients/Solicited Out-of-State
Physician Assistants/Solicited In-State
Physician Assistants/Solicited Out-of-State
Prescriber Delegates - Licensed/Solicited In-State
Prescriber Delegates - Licensed/Solicited Out-of-State
Prescribers/Solicited In-State
Prescribers/Solicited Out-of-State
Prosecutors/Solicited In-State
Prosecutors/Solicited Out-of-State
Regulatory and Licensing Boards/Solicited In-State
Regulatory and Licensing Boards/Solicited Out-of-State
Researchers/Solicited In-State
Researchers/Solicited Out-of-State
Workers Compensation State/Solicited In-State
Budget

<table>
<thead>
<tr>
<th>Total Annual Budget:</th>
<th>$4,600,000.00</th>
<th>PDMP Staff:</th>
<th>8</th>
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</thead>
<tbody>
<tr>
<td># of Employees - Operational:</td>
<td>5</td>
<td># of Employees - Other:</td>
<td>0</td>
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<tr>
<td># of Employees - Technical:</td>
<td>0</td>
<td># of Employees - Analytical:</td>
<td>3</td>
</tr>
</tbody>
</table>

Funding Source(s)

CDC Grant

Technologies

- Data Collection Entity: Vendor
- Data Collection Vendor name: Bamboo Health
- Data Storage Entity: Vendor
- Data Storage Vendor name: Bamboo Health
- Report Generation Entity: Vendor
- Report Generation Vendor name: Bamboo Health
- ASAP Version Utilized: 4.2A
- Data Access Method: Web Portal/On-Line
- Data Access Entity: Vendor
- Data Access Vendor name: Bamboo Health

State HIE in place
- RxCheck Integration Allowed
- VHA VISTA integration
- HL7 FHIR connectivity
- ASAP Version Utilized: 4.2A

Patient Matching

- Referential Matching
- Deterministic Matching
- Manual Matching
- Probablistic Matching
- Probablistic and Manual Matching

Access to patient matching algorithms

Patient Matching Metrics Available:

- Patient last name,
- Patient first name,
- Patient middle name or initial,
- Patient address,
- Patient date of birth,
- Patient gender

WA is supported with an entity resolution algorithm for our live PMP data base. The WA live database is currently serviced by t

Integration(s) Available

<table>
<thead>
<tr>
<th>Integration Type</th>
<th>% Providers</th>
<th>Hub Used</th>
<th>Paid by Fed Gov't</th>
<th>Paid by State Gov't</th>
<th>Paid by Facility</th>
<th>Paid by Provider</th>
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</thead>
<tbody>
<tr>
<td>EHR Integration</td>
<td>25-49%</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>✓ Data Downloaded/Stored</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>✓ Data Incorporated with Interstate Data</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Integration Standards: |

<table>
<thead>
<tr>
<th>Integration Type</th>
<th>% Providers</th>
<th>Hub Used</th>
<th>Paid by Fed Gov't</th>
<th>Paid by State Gov't</th>
<th>Paid by Facility</th>
<th>Paid by Provider</th>
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<tbody>
<tr>
<td>HIE Integration</td>
<td>50-74%</td>
<td>PMPi</td>
<td></td>
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<td>✓ Data Downloaded/Stored</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>✓ Data Incorporated with Interstate Data</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

<p>| Integration Standards: |</p>
<table>
<thead>
<tr>
<th>Integration Type</th>
<th>% Providers</th>
<th>Hub Used</th>
<th>Paid by Fed Gov't</th>
<th>Paid by State Gov't</th>
<th>Paid by Facility</th>
<th>Paid by Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>PDS Integration</td>
<td>&lt;10%</td>
<td>PMPi</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</table>

- Data Downloaded/Stored
- Data Manipulated for Analysis
- Data Incorporated with Interstate Data
- Multistate Integrations Allowed

Integration Standards:
<table>
<thead>
<tr>
<th>State</th>
<th>Hub Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Alabama</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Alaska</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Arizona</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Arkansas</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Colorado</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Colorado</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Connecticut</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Connecticut</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Delaware</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>District of Columbia</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Florida</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Hawaii</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Idaho</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Illinois</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Iowa</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Kansas</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Kentucky</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Maryland</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Michigan</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Military Health Service</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Minnesota</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Mississippi</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Montana</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Nebraska</td>
<td>RxCheck Hub</td>
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<tr>
<td>Nevada</td>
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<tr>
<td>Nevada</td>
<td>RxCheck Hub</td>
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<tr>
<td>New Mexico</td>
<td>PMPi Hub</td>
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</tr>
<tr>
<td>North Carolina</td>
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<tr>
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<td>PMPi Hub</td>
</tr>
<tr>
<td>Ohio</td>
<td>PMPi Hub</td>
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<tr>
<td>Oklahoma</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Oklahoma</td>
<td>RxCheck Hub</td>
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<tr>
<td>Oregon</td>
<td>PMPi Hub</td>
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<tr>
<td>Oregon</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>RxCheck Hub</td>
</tr>
<tr>
<td>Puerto Rico</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>Rhode Island</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>South Carolina</td>
<td>PMPi Hub</td>
</tr>
<tr>
<td>South Dakota</td>
<td>PMPi Hub</td>
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<tr>
<td>Texas</td>
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<td>Virginia</td>
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<td>Wisconsin</td>
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<tr>
<td>Wyoming</td>
<td>RxCheck Hub</td>
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<tr>
<td>Wyoming</td>
<td>PMPi Hub</td>
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</table>
## PDMP Policies

<table>
<thead>
<tr>
<th>Enabling legislation enacted:</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>PDMP operational:</td>
<td>2011</td>
</tr>
<tr>
<td>User access date (any method):</td>
<td>2012</td>
</tr>
<tr>
<td>User electronic access date:</td>
<td>2012</td>
</tr>
<tr>
<td>Date received electronic data:</td>
<td>2011</td>
</tr>
<tr>
<td>Interstate sharing start date:</td>
<td>2018</td>
</tr>
<tr>
<td>Law/Statute citation:</td>
<td>WA Code §70.225</td>
</tr>
<tr>
<td>Regulation/Rule citation:</td>
<td>WA Admin Code § 246-470</td>
</tr>
<tr>
<td>Dr Shopper law/statute:</td>
<td>Chapter 69.41 RCW and Chapter 69.50 RCW</td>
</tr>
<tr>
<td>Pill Mill law/statute:</td>
<td></td>
</tr>
<tr>
<td>Pain Clinic law/statute:</td>
<td></td>
</tr>
<tr>
<td>Unauthorized Use or Disclosure:</td>
<td>WA Code §70.225.060</td>
</tr>
</tbody>
</table>

- [ ] Required Notification to consumers
- [ ] Mandated Use of Advisory Group
- [x] Payment method captured
- [ ] Ability to id prescriber specialty
- [ ] Patient consent required before PDMP data release
- [ ] Ability for users to set thresholds for alert notices
- [ ] Ability for users to do user-led alert notices
- [x] Mandatory E-Prescribing (EPCS)
- [x] Compliance Process for Enrollment Mandates
- [ ] Compliance Process for Query Mandate
- [ ] ICD-10 Codes Collected
- [ ] Deceased Patient Field
- [ ] Patient ID Required to be Presented to Dispenser
- [x] Ability to de-id data
- [x] Authority to release de-id data

### Data Retention Policy
- Data Retention Time: 3 years

### De-identified data sharing conditions:
Must be for statistical, research, or educational purposes after removing information that could be used to identify individual patients, dispensers, prescribers, and persons who received prescriptions from dispensers.

### Record Retention Details:
- Retain De-Identified Data
- Retain for 6 years after no longer needed for agency business then Transfer to the Washington State Archives.
- Patient Notification of Breach
- Written Notification of Breach

### Patient Breach Notification Method:
- Email, Mail; This process is maintained by our Information Security Team and varies based on the incident.

### E-prescribing required substances:
- Controlled Substances

### E-prescribing exemptions/waivers:
- WA PMP does not oversee compliance for board/commission rules for enrollment and use mandates. The WA healthcare provider boards and commissions (and DOH) are complaint driven meaning DOH must first receive a complaint about a healthcare provider before
Enrollment and Accounts

☐ Supervisor Review/audit of Delegate Accounts
☐ Number of Delegates allows:
☐ Auto Enroll with License Renewal or App

Enrollment Method:
manual online enrollment; create SAW account, then request PMP service; multi-factor authentication; links to PMP application form; fill in all information; checked against records at HID; then if verified, get account

Practitioner IDs for PDMP Account:
DEA controlled substance registration number; Licensing Board number;

2 Factor Authentication:
Required to use 2 factor authentication

Criteria for Dispensers to get account to upload data
Criteria for Prescriber delegates to get account:
All non-prescribing healthcare providers must be credentialed/licensed/registered with DOH. Healthcare providers are validated against their current/active DOH credentials.

Criteria for Dispenser delegates to get account:
All non-prescribing healthcare providers must be credentialed/licensed/registered with DOH. Healthcare providers are validated against their current/active DOH credentials.

Criteria for PAs to get account:
All non-prescribing healthcare providers must be credentialed/licensed/registered with DOH. Healthcare providers are validated against their current/active DOH credentials.

Criteria for Nurse Practitioners to get account:
All non-prescribing healthcare providers must be credentialed/licensed/registered with DOH. Healthcare providers are validated against their current/active DOH credentials.

Criteria for other users to get account:

Requirements for Patients to get PDMP Report:
Patients may request copy from their prescriber or dispenser. Signed request to DOH. Must pick up paper copy at DOH in Olympia.

Requirements for others to get PDMP Report
Criteria for Online Non-healthcare accounts:
Licensing/regulatory Board investigators, Law Enforcement investigators (federal, state, and local), Medical Examiners/coroners

PDMP Data for Epidemiological Purposes: Authority to Release

☑ Law Enforcement On-line access to PDMP ☑ Law Enforcement Written Request access to PDMP

Law Enforcement Access Method:

Law Enforcement Access Requirements: Active Investigation
Enrollment Mandates

Prescriber - Mandatory PDMP Enrollment

Effective Date(s):
Details:
-WA licensing authorities (boards and commissions of the prescribing professions) adopted new opioid prescribing rules in 2018Q4 and 2019Q1 which require prescribers to enroll for PMP access and to use/check PMP in certain prescribing scenarios (individual to the board/commission rules for each of the prescribing professions).

Use Mandates

Dispenser - Mandatory PDMP Use
Prescriber - Mandatory PDMP Use

Effective Date(s): July 1, 2013 (all regulations); October 1, 2021
Details:
In 2017, the legislature passed a law that focuses on improving opioid prescribing, and on monitoring prescriptions. The law requires five healthcare professional boards and commissions to adopt new rules for prescribing opioid drugs: -Medical Commission -Board of Osteopathic Medicine and Surgery -Nursing Commission -Dental Quality Assurance Commission -Podiatric Medical Board

10-1-21: WAC 182-530-1080 Requirements for prescribing and dispensing controlled substances—Prescription monitoring program (PMP). This section identifies the steps prescribers must take before prescribing a controlled substance and the steps pharmacists must take when dispensing a controlled substance from an outpatient pharmacy to check an apple health client's prescription drug history in the prescription monitoring program (PMP) described in chapter 246-470 WAC.

(1) PMP review required. Except as identified in subsection (4) of this section, a prescriber, before prescribing, and a pharmacist, when dispensing, must check all of a client's current prescriptions in the PMP, including any prescriptions not paid for by apple health.

(2) Retrieval by delegates allowed. A prescriber or pharmacist may delegate the retrieval of the client’s PMP information to anyone in their practice setting with authorization to access the PMP, so long as the prescriber or pharmacist reviews all of the client's current prescriptions in the PMP before prescribing or when dispensing a controlled substance.

(3) Documentation. The prescriber and pharmacist must document in the client's record the date and time of the: (a) Retrieval of information from the PMP; and (b) Review of information from the PMP.
## PDMP Queries

- **Ability to search for multiple patients in one query**: ✔
- **Patient Query Date Range**: 1 year
- **Minimum data elements to query for healthcare user**: NAME AND DOB
- **Query by partial data elements by healthcare user**: can have a partial first and last name and dob; at least 1 char in first and last and complete dob
- **Optional data elements to query by healthcare user**: GENDER, COUNTY, ZIP
- **Minimum data elements to query for non-healthcare user**: NAME AND DOB
- **Query by partial data elements by non-healthcare user**: can have a partial first and last name and dob; at least 1 char in first and last and complete dob
- **Optional data elements to query by non-healthcare user**: GENDER, COUNTY, ZIP

## Unsolicited Reports/Push Notifications

- **Frequency unsolicited alerts/reports generated**: Report mailed, Notification sent via email, Dispenser reports N/A.
- **Delivery method for unsolicited alerts/reports - LE**: Dispenser - Training Provided
- **Delivery method for unsolicited alerts/reports - Boards**: Law Enforcement - Training Provided
- **Unsolicited alerts/reports to practitioners not enrolled in PDMP**: ✔
Veterinary Policies

Data transmission frequency for Veterinarians: Quarterly

Criteria for veterinarian queries:
- Veterinary records are searchable via the animal’s name (animal first name + (owner’s) last name) and animal’s DOB and not by owner’s name + animal’s DOB. Owner information is recorded as “person dropping off / picking up prescription”

☑ Veterinarian access to owner's prescription history

☑ Reporting Specifications

- Reporting Method: Electronic, Fax, Web Portal
- Reporting Specifications: Requirements for reporting are different for pharmacies and dispensing vets. Interface for direct reporting by Vets (including report by fax) are designed for pet record reporting.

Data Fields:
- PAT07 - Last Name
- PAT08 - Owner's First Name
- PAT08 - Animal's First Name
- PAT18 - Owner's Date of Birth
- PAT18 - Animal's Date of Birth
- PAT20 - Species Code
- PAT21 - Name of Animal

☑ Reporting Description: Veterinarians are required to report

☑ Reporting Mandate Compliance

- Reporting Compliance Details: Education and outreach
- Reporting Mandate Actions:
- Reporting Issues: Veterinarian does not have a DEA or NPI number, Vets do not have NPI. Vet default NPI for WA = VETERINARY. This will show on query report where NPI field is chosen to be included. We are working with our vendor to make NPI a default for all query reports.

- Reporting Misc Information: Washington has been working to ensure that veterinary records do not come up under recipient/patient query by owner's name. Our vendor had these fields set up that vet records would come up under owner's name and animal's DOB making it (reports) appear th

☑ Enrollment Mandate Compliance

- Enrollment Description: Veterinarian enrollment for PMP access is allowed, and is voluntary for vets. Enrollment rates are low.

- Enrollment Mandate Compliance Details:
- Enrollment Mandate Criteria:

☑ Query Mandate Compliance

- Query Description:
- Query Mandate Compliance Details: Veterinarians can voluntarily query and do query

- Query Mandate Criteria:

Veterinary Icon on PDMP Report
PDMP Effectiveness Measures

Reduction in number of fatal or non-fatal overdoses
Reduction in number of opioid prescriptions issued

## Substance Use Disorder Activities

### Tools or Resources
- ☑ MAT Services
- ☑ MOUD Services
- ☑ Harm Reduction Strategies
- ☑ Mental Health Assistance Services
- ☐ Employee Assistance Programs
- ☐ Housing Assistance Programs
- ☐ Re-Entry Programs

### Other:

### Surveillance Activities
- ☐ Emergency Department Data
- ☑ Medical Examiner/Coroner Data

Data Sources for Surveillance Activities:
- DOH Death Reports

### Initiated Actions
- ☐ Resources to Affected Areas
- ☐ Directed Training on Prescribing
- ☐ Prescription Drug Tool Kits
- ☐ Risk Evaluation/Analysis on PDMP Reports
- ☐ Referrals to SUD Organizations
- ☐ Referrals to OFR Teams

### Other Actions:

- DOH Death Reports