Mandatory OARRS Registration and Requests

Updated 11-24-2015

Q1) What is OARRS?

OARRS stands for the Ohio Automated Rx Reporting System. Established in 2006, OARRS is a web-based system that collects information on all outpatient prescriptions for controlled substances that are dispensed by Ohio licensed pharmacies and prescribed or personally furnished by licensed prescribers in Ohio. The information in OARRS is available to prescribers (or their delegates) when they treat patients, pharmacists (or their delegates) when presented with prescriptions from patients and law enforcement officers and health care regulatory boards during active investigations.

Q2) When will I have to register for an OARRS account and who is required to register?

Beginning January 1, 2015, Ohio law requires that each prescriber who prescribes or personally furnishes opioid analgesics or benzodiazepines, as well as all pharmacists who dispense or plan to dispense controlled substances within the state of Ohio, certify to their respective licensing board that they have registered for an OARRS account upon renewing their license.

Q3) How do I register for OARRS?

Registering for OARRS is now faster and easier than ever before. In 2014, the Board of Pharmacy implemented a new system to allow health care professionals (and their delegates) to register for an account as well as reset their passwords online. Using software to verify a user's identification, the registration process no longer requires a paper application and can be completed in less than 10 minutes. To get started, visit www.ohiopmp.gov and click on the Register link at the top of the screen.
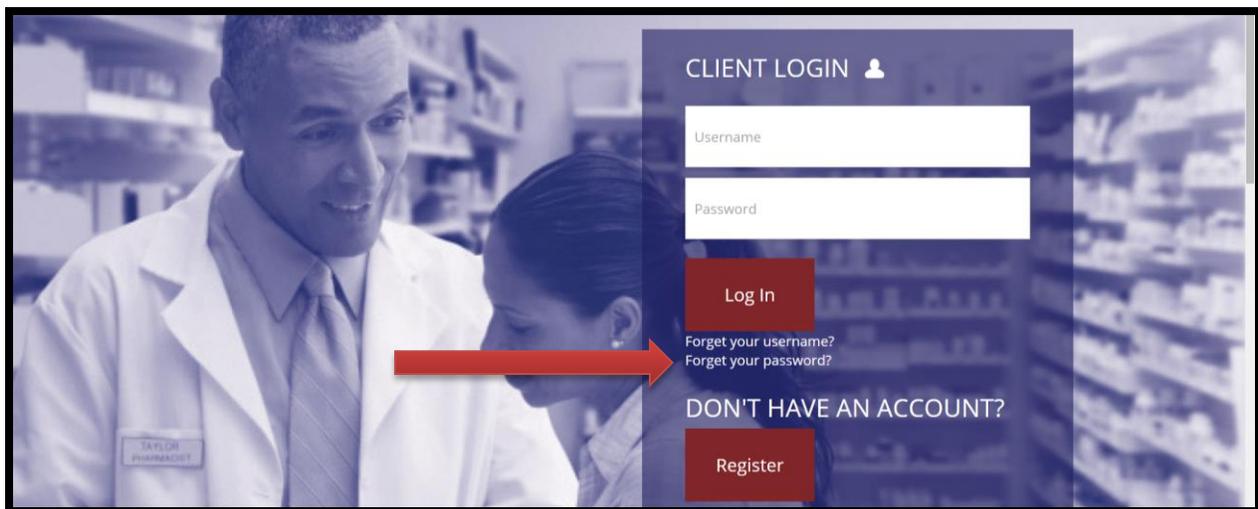
You will need the following information to complete your registration: 1) driver's license number; 2) professional license number; 3) DEA License (if applicable); 4) National Provider Identifier (NPI) Number (for prescriber accounts only); and 5) office/employment information.

Q4) How do I reset my OARRS password?

Prescribers, pharmacists and delegates can now reset their password in one of the following three ways:

1) If you enter your login information incorrectly 3 times, you will be automatically redirected to the password reset page.

2) If you are already locked out and attempt to login, you will be automatically redirected to the password reset page.

3) Click the "forgot your password" link on the OARRS homepage with your user name entered into the correct field and you will be taken to the password reset (see image below).

Once directed to the password reset page, you will be asked to confirm your identity by answering three questions. Once answered correctly, you will be prompted to choose a new password.

Q5) As a prescriber, under what circumstances am I required to request, assess and document receipt of a patient's OARRS prescription history report?

Beginning April 1, 2015, Ohio law establishes several new requirements for Ohio prescribers related to the Ohio Automated Rx Reporting System (OARRS):

- Before initially prescribing or personally furnishing an opioid analgesic or a benzodiazepine to a patient, the prescriber must request patient information from OARRS that covers at least the previous 12 months.

- The prescriber must also make periodic requests for patient information from OARRS if the course of treatment continues for more than 90 days. *The requests must be made at intervals not exceeding ninety days, determined according to the date the initial request was made.*

- Under the circumstances described above, the prescriber is required to assess the OARRS information and document in the patient record that a patient prescription history report was received and assessed.

Please note: A recent change in Ohio law no longer requires an optometrist holding a therapeutic pharmaceutical agents certificate to query OARRS in the situations listed above. However, an optometrist holding a therapeutic pharmaceutical agents certificate must comply with [rule 4725-16-04 of the Administrative Code](#) regarding when to access information in OARRS.

Q6) Are there any exceptions to the law?

Yes. Exceptions to mandatory checks prior to prescribing an opioid analgesic or benzodiazepine include the following scenarios:

- The drug is prescribed or personally furnished to a hospice patient or to any other patient who has been diagnosed as terminally ill (advanced practice registered nurses, physician assistants, and physicians but not dentists and optometrists);

- The drug is prescribed or personally furnished in an amount indicated for a period not to exceed seven days (all prescribers except optometrists);

- The drug is prescribed or personally furnished for the treatment of cancer or another condition associated with cancer (advanced practice registered nurses, physician assistants, and physicians but not dentists and optometrists);

- The drug is prescribed or personally furnished for administration in a hospital, nursing home, or residential care facility (advanced practice registered nurses, physician assistants, and physicians but not dentists and optometrists);

- The drug is prescribed or personally furnished to treat acute pain resulting from a surgical or other invasive procedure or a delivery (physicians only); and

- The OARRS report is not available (all prescribers).

Q7) How do I document that I have run a report?

A prescriber who is required to review OARRS information must document in the patient's medical record that the report was received and the information was assessed. If for some reason the OARRS report is not available, the prescriber should document in the record when the report was requested and its unavailability.

Q8) I will not renew my license until after April 1, 2015, will I be required to request, assess and document receipt of a patient's OARRS prescription history report as outlined above?

Yes. Beginning April 1, 2015, you will be required to query OARRS as outlined in Q5 and Q6 of this document. While you may not be required to attest that you have registered

with the system prior to April 1, 2015, it is strongly recommended that all prescribers who prescribe or personally furnish opioid analgesics or benzodiazepines register with the system (see Q3 of this document for more information on registration).

Q9) As a prescriber practicing in a county adjoining another state, am I required to check another state's prescription monitoring program?

Yes. Beginning April 1, 2015, if you are a prescriber who practices primarily in an Ohio county that adjoins another state, Ohio law requires you to request the adjoining state's prescription drug information, which can be easily accessed through OARRS. Please note that Pennsylvania does not currently have a prescription monitoring program at this time. If one should become operational, then prescribers in counties adjoining Pennsylvania would be required to access the system. The following is a table to assist prescribers practicing in counties that adjoin another state in identifying the required interstate selections in OARRS:

County of Practice	Required Interstate Selection(s)
Adams	Kentucky
Athens	West Virginia
Belmont	West Virginia
Brown	Kentucky
Butler	Indiana
Clermont	Kentucky
Darke	Indiana
Defiance	Indiana
Fulton	Michigan
Gallia	West Virginia
Hamilton	Kentucky, Indiana
Jefferson	West Virginia
Lawrence	West Virginia, Kentucky
Lucas	Michigan
Meigs	West Virginia
Mercer	Indiana
Monroe	West Virginia
Paulding	Indiana
Preble	Indiana
Scioto	Kentucky
Van Wert	Indiana
Washington	West Virginia
Williams	Indiana, Michigan

REMINDER: PENNSYLVANIA DOES <u>NOT</u> HAVE AN ACTIVE PRESCRIPTION MONITORING PROGRAM AT THIS TIME. IF ONE SHOULD BECOME OPERATIONAL, THEN PRESCRIBERS IN COUNTIES ADJOINING PENNSYLVANIA WOULD BE REQUIRED TO ACCESS THE SYSTEM.

Q10) I am a physician assistant, how do I access prescription information provided from Kentucky's prescription monitoring program, KASPER (Kentucky All Schedule Prescription Electronic Reporting)?

Under Kentucky law, a physician assistant is not considered a prescriber and cannot access the system using their own account. Therefore, those physician assistants who have an OARRS prescriber account are not permitted to access KASPER information. An Ohio physician assistant that wishes to access Kentucky's PMP in OARRS will have to do so using a delegate account.

Q11) Is there a definition for opioid analgesics and benzodiazepines available?

Effective March 20, 2015, section 3719.01 of the Ohio Revised Code defines an "opioid analgesic" as a controlled substance that has analgesic pharmacologic activity at the opioid receptors of the central nervous system, including the following drugs and their varying salt forms or chemical congeners:

Generic Name	Brand Name	Schedule
Buprenorphine	BUTRANS, BUPRENEX	Schedule III
Butorphanol	BUTORPHANOL NS	Schedule IV
Codeine (acetaminophen and other combination products)	TYLENOL W. CODEINE #3, TYLENOL W. CODEINE #4	Schedule III
Dihydrocodeine/ASA/caffeine	SYNALGOS-DC	Schedule III
Fentanyl	DURAGESIC, ACTIQ, ABSTRAL, LAZANDA, FENTORA, SUBSYS, SUBLIMAZE, ONSOLIS, IONSYS	Schedule II
Hydrocodone	ZOHYDRO ER	Schedule II
Hydrocodone (acetaminophen combination products)	XODOL, MAXIDONE, ZYDONE, LORCET, HYCET, ZAMICET, CO-GESIC, ZOLVIT, STAGESIC, LIQUICET, LORTAB, VICODIN, NORCO	Schedule II *(Effective October 6, 2014)*
Hydrocodone (ibuprofen combination products)	IBUDONE, REPREXAIN, VICOPROFEN	Schedule II
Hydromorphone	DILAUDID, EXALGO	Schedule II
Meperidine	DEMEROL	Schedule II
Methadone	DOLOPHINE, METHADOSE	Schedule II
Morphine Sulfate	MS CONTIN, AVINZA, DURAMORPH, KADIAN, DEPODUR, ASTRAMORPH, IMFUMORPH	Schedule II
Oxycodone	OXECTA, ROXICODONE, OXYCONTIN	Schedule II
Oxycodone (acetaminophen, aspirin and other combination products)	PERCODAN, PERCOCET, ROXICET, ENDOCET, XOLOX, TYLOX, PRIMLEV, MAGNACET, XARTEMIS XR	Schedule II
Oxymorphone	OPANA, NUMORPHAN	Schedule II
Tapentadol	NUCYNTA	Schedule II
Tramadol	ULTRAM, ULTRACET, RYZOLT, CONZIP, RYBIX	Schedule IV *(Effective August 18, 2014)*

Effective March 20, 2015, section 3719.01 of the Ohio Revised Code defines a "benzodiazepine" as a controlled substance that has United States Food and Drug Administration (FDA) approved labeling indicating that it is a benzodiazepine, benzodiazepine derivative, triazolobenzodiazepine, or triazolobenzodiazepine derivative, including the following drugs and their varying salt forms or chemical congeners:

Generic Name	Brand Name	Schedule	FDA Label
Alprazolam	ALPRAZOLAM, XANAX, NIRAVAM	Schedule IV	Benzodiazepine
Chlordiazepoxide Hydrochloride	A-POXIDE, CHLOR POX, CHLORDIA-XE CHLORDIAZEPOXIDE, CHLORDIAZEPOXIDE HCL CHLORDIAZEPOXIDE HYDROCHLORIDE, LIBACA, LIBRITABS, LIBRIUM, MITRAN, POXI, REPOSANS-10, RO-POXIDE, SEREEN, SK-LYGEN, SPAT-10, SPAZ-10, SPAZ-5	Schedule IV	Benzodiazepine
Clobazam	ONFI	Schedule IV	Benzodiazepine
Clonazepam	CLONAZEPAM, CLONAZEPAM, KLONOPIN	Schedule IV	Benzodiazepine
Clorazepate Dipotassium	CLORAZEPATE, CLORAZEPATE DIPOTASSIUM, GEN-XENE, TRANXENE, TRANXENE T-TAB, TRANXENE-SD	Schedule IV	Benzodiazepine
Dextrose/Lorazepam	LORAZEPAM-DEXTROSE	Schedule IV	Benzodiazepine
Dextrose/Midazolam Hydrochloride	MIDAZOLAM-DEXTROSE	Schedule IV	Benzodiazepine
Diazepam	DIASTAT, DIASTAT ACUDIAL, DIASTAT PEDIATRIC, DIASTAT UNIVERSAL, DIAZEPAM, DIAZEPAM INTENSOL, DIAZEPAM RECTAL DELIVERY SYSTEM, DIZAC, D-VAL, ED-VAL, Q-PAM, RO-AZEPAM, T-QUIL, VALIUM, VALRELEASE, X-O SPAZ, ZETRAN	Schedule IV	Benzodiazepine Derivative
Estazolam	ESTAZOLAM, PROSOM	Schedule IV	Triazolobenzodiazepine Derivative
Flurazepam Hydrochloride	DALMANE, FLURAZEPAM HYDROCHLORIDE, FLURAZEPAM	Schedule IV	Benzodiazepine
Lorazepam	ATIVAN, LORAZ, LORAZEPAM, LORAZEPAM AMERINET, NOVAPLUS LORAZEPAM, PROBATE, LORAZEPAM-SODIUM CHLORIDE	Schedule IV	Benzodiazepine
Midazolam	MIDAZOLAM, MIDAZOLAM HCL AMERINET CHOICE, MIDAZOLAM HYDROCHLORIDE, NOVAPLUS MIDAZOLAM HYDROCHLORIDE, VERSED, MIDAZOLAM HYDROCHLORIDE-SODIUM CHLORIDE	Schedule IV	Benzodiazepine
Oxazepam	OXAZEPAM, SERAX	Schedule IV	Benzodiazepine
Quazepam	DORAL, DORMALIN	Schedule IV	Benzodiazepine
Temazepam	RESTORIL, TEMAZ, TEMAZEPAM	Schedule IV	Benzodiazepine
Triazolam	HALCION, TRIAZOLAM	Schedule IV	Triazolobenzodiazepine

Q12) Can a delegate run a patient's OARRS report on behalf of the prescriber in order satisfy the requirements of the law listed in Q5 of this document?

Yes. A delegate who runs a report on behalf of a prescriber will satisfy the requirements of the law listed in Q5 of this document. However, the delegate may only run a patient's prescription history report and is not permitted to interpret the results. Please note that delegates must have their own OARRS account with their own unique user name and password. They may not run the report under the prescriber's user name and password. The law requires documentation in the patient's medical record that the report was received and the information was assessed.
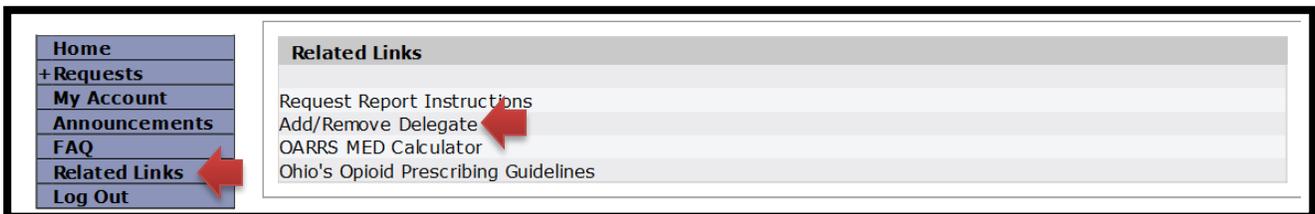
To register for a delegate account:
1) Go to www.ohiopmp.gov;
2) Click on the "register" button at the top of the page;
3) Follow the prompts for delegates to complete the registration.

Once the delegate account is created, the delegate will need to inform the supervising prescriber or pharmacist of their username so the supervisor can link the accounts (see Q13).
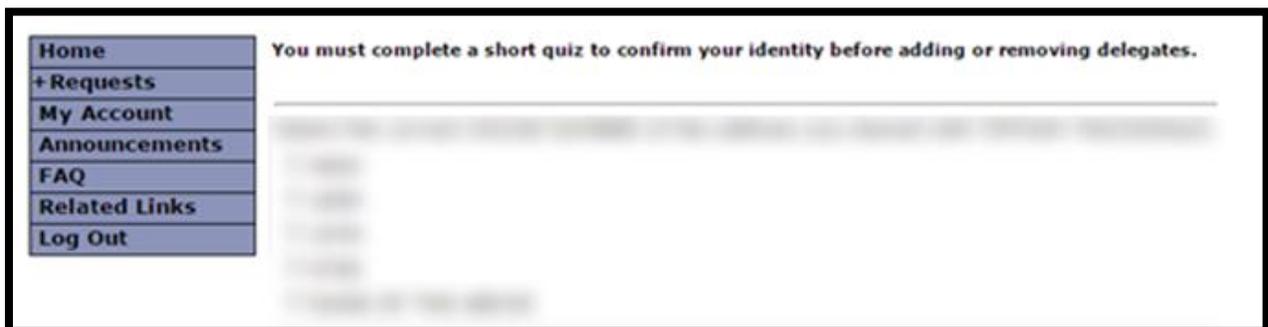
Q13) How do I add or remove delegates from my account?

For prescribers and pharmacists to add or remove delegates, complete the following steps:

1. Log into your account by visiting oarrs.pharmacy.ohio.gov. Click on "Related Links" and select "Add/Remove Delegate."

2. You will then be required to complete authentication questions.

3. You can then click the "Remove Delegate" button next to the delegates you wish to remove or enter the user name of the delegates you wish to add.

IMPORTANT: YOU CANNOT USE THIS FUNCTION TO ADD A DELEGATE WHO DOES NOT HAVE AN EXISTING OARRS ACCOUNT.

Q14) Who can serve as a prescriber or pharmacist delegate?

For the purposes of OARRS, any individual who is either supervised or employed by a prescriber or pharmacist can serve as their delegate. For more information on the roles and responsibilities of a delegate, please review the delegate acceptable use policies here: https://www.ohiopmp.gov/portal/docs.aspx.

Q15) How many delegates can I have?

The Ohio State Board of Pharmacy has determined that a prescriber or pharmacist may have as many delegates as they believe they can adequately supervise. It is up to the supervising prescriber or pharmacist to decide how many delegates they designate.

Q16) I work in a group practice. Can I have my delegates run OARRS reports for other prescribers in the practice?

No. Only delegates added to a prescriber's account can run OARRS for that prescriber's patients. This ensures a delegate is not accessing unauthorized patient information. In this situation, it is recommended that delegates are added to all prescriber accounts in the existing practice setting. A delegate can be added to more than one prescriber or pharmacist account (see Q13).

Q17) I am a prescriber that holds an Ohio license but practices out of state. Am I required to register for an OARRS account?

No. Only prescribers that practice in the state of Ohio are required to obtain an OARRS account

Q18) I am a pharmacist who maintains an Ohio license but does not practice pharmacy. Am I required to register for an OARRS account?

No. Only pharmacists who dispense controlled substances to patients residing in Ohio are required to register for an OARRS account.

Q19) I am a pharmacy intern. Am I required to register for an OARRS account?

No. Only pharmacists who dispense controlled substances to patients residing in Ohio are required to register for an OARRS account. Pharmacy interns are permitted to obtain delegate accounts under the oversight of a practicing pharmacist.

Q20) Can I include an OARRS prescription history report in the patient's medical chart?

Yes. Effective March 20, 2015, Ohio law permits a prescriber or pharmacist to include an OARRS report as part of the patient's medical record. Once included in the chart, the report is deemed part of the medical record subject to disclosure on the same terms and conditions as listed in section 3701.74 of the Revised Code.

Q21) Can I review a patient's OARRS report with the patient or a patient's representative?

Yes. An Ohio prescriber or pharmacist can review the information included in an OARRS report with a patient.

Q22) I am an optometrist holding a therapeutic pharmaceutical agents certificate. Under what circumstances am I required to request, assess and document receipt of a patient's OARRS prescription history report?

Ohio law no longer requires an optometrist holding a therapeutic pharmaceutical agents certificate to meet the requirements listed in Q5 of this document. However, an optometrist holding a therapeutic pharmaceutical agents certificate is still required to register for an OARRS account if they practice within the state of Ohio and if prescribe or personally furnish opioid analgesics.

In addition, an optometrist holding a therapeutic pharmaceutical agents certificate must comply with rule 4725-16-04 of the Ohio Administrative Code regarding when to access information in OARRS.

Q23) Who do I contact for more information?

If you are a pharmacist, pharmacy intern, location licensed as a terminal distributor of dangerous drugs or have an OARRS account-related question, please contact the Ohio State Board of Pharmacy at 614-466-4143 or visit http://www.pharmacy.ohio.gov/contact.aspx.

If you are a prescriber, please contact your respective regulatory board using the information below.

State Medical Board of Ohio: (614) 466-3934

Ohio Board of Nursing: practice@nursing.ohio.gov

Ohio State Dental Board: (614) 466-2580

Ohio State Optometry Board: (614) 466-5115

Q24) Are staff (delegates) able to register for OAARS under multiple prescribers?

A prescriber may have as many delegates as they want to supervise, and delegates may be assigned to multiple prescribers. The connection may be done on-line. The prescriber will log their account, click on "related links/add delegate" then enter the user name of the delegate (see Q13 for more information).

Q25) Are some commonly prescribed sleep medications included in the definition of a benzodiazepine?

No. Schedule IV controlled substance sleep medications such as Zolpidem (Ambien) and Lunesta Eszopiclone (Lunesta) are not included in the definition of a benzodiazepine. **However, there are a number of benzodiazepines that may be used to treat sleep disorders. For a definition of a benzodiazepine, please see Q11 of this document.**

Q26) Can a prescriber or delegate run a report on a patient the day before that patient's scheduled appointment?

Yes. As long as there is an existing or potential prescriber/patient relationship, a prescriber or delegate may query the system the day before a patient's scheduled appointment.

Q27) Are there other situations where I am required to request a patient's prescription history report?

Yes. The following health care regulatory boards have rules regarding required OARRS checks for controlled substance medications:

- Medical Board: OAC [4731-11-11](#); [4731-11-12](#); [4730-2-10](#)

- Nursing Board: OAC [4723-9-12](#)

- Dental Board: OAC [4715-6-01](#)

- Optometry Board: OAC [4725-16-04](#)

- Pharmacy Board: OAC [4729-5-20](#)

NOTE: Please contact your respective licensing board for additional information.

Q28) I currently use the NARxCHECK program to review a patient's prescription history in OARRS. Does this satisfy the mandatory requirements to review a patient's information in OARRS? UPDATED

Yes. The NARxCHECK program is a service that automatically queries OARRS on behalf of a prescriber or pharmacist. Please be advised that the State of Ohio Board of Pharmacy requires NARxCHECK to be able to provide the identification of the prescriber who accessed a patient's report. **<u>Therefore, use of NARxCHECK satisfies the mandatory use requirements in the Ohio Revised Code and Ohio Administrative Code.</u>**

Ohio law also requires that each prescriber who prescribes or personally furnishes opioid analgesics or benzodiazepines, as well as all pharmacists who dispense or plan to dispense controlled substances within the state of Ohio, certify to their respective licensing board that they have access to OARRS upon renewing their license. While a prescriber or pharmacist with access to NARxCHECK can meet this requirement even if they do not have an individual OARRS account, these licensees are strongly encouraged to obtain their own individual registration in the event that the service is unavailable.