

Report on Improve Controlled Substances Reporting System
Access and Utilization



HOUSE BILL 97 SESSION LAW 2015-241

November 2015

Department of Health and Human Services
Division of Mental Health, Developmental Disabilities and
Substance Abuse Services

Improve Controlled Substances Reporting System Access and Utilization

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A. Introduction

SL 2015-241, 12F.16(f)

The Department of Health and Human Services (DHHS) shall modify the contract for the Controlled Substances Reporting System (CSRS) to improve performance, establish user access controls, establish data security protocols, and ensure availability of data for advanced analytics. Specifically, the contract shall be modified to include the following:

- (1) A connection to the North Carolina Health Information Exchange (NC HIE) Network administered by the North Carolina Health Information Exchange Authority (NC HIE Authority).*
- (2) The establishment of interstate connectivity.*
- (3) Data security protocols that meet or exceed the Federal Information Processing Standards (FIPS) established by the National Institute of Standards and Technology (NIST).*

B. Background

1. CSRS Enhancements in 2015

DHHS' Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (Division) is committed to improving the functionality and increasing the utilization of the CSRS and is grateful for the Program Evaluation Division's review of the system. The following are some of the enhancements that occurred in 2015:

- **CSRS Redesign**

The Division launched the CSRS redesign in March. The new web-interface provides prescribers and dispensers more intuitive use of the site. This enhancement also provides new convenience features - password reset, registrant profile updates, and practitioner prescribing history. The redesign provides easy to read reports that include additional information, such as morphine milligram equivalent conversions and method of payment.

- **Delegate Online Registration**

The delegate online registration feature was rolled-out in the Spring. This feature has expedited the registration process for delegates by allowing access to a link that provides an online registration form that is submitted directly to the Division. In turn, practitioners are able to select delegates by accessing the "delegate accounts" module within the system.

- **Auto Deactivation/Renewal for Delegate Accounts**

The Auto Deactivation/Renewal process for delegate accounts became active in May. This feature allows the Division to maintain an updated list of authorized delegates by requiring annual re-registration.

- **Quarterly Data Transfer**

In June, the Division received from the vendor the initial set of legacy data. The vendor continues to provide a monthly transfer of the data.

- **Unsolicited Reporting**

In collaboration with the NC Medical Board, the unsolicited reporting program began in September. The Division has already delivered 896 educational letters to prescribers regarding their patients who have reached a predetermined threshold of controlled substances from pharmacies and prescribers.

- **Practitioner Online Registration**

Prescriber and dispenser online registration became operational in September. This feature expedites the registration process for in- and out-of-state prescribers and pharmacies by providing access to an online registration page. This new feature will not replace the online options offered by the NC Medical Board, NC Board of Pharmacy and the NC Board of Nursing.

- **Threshold Reports to NC Medical Board**

In October, the Division began reporting information to the North Carolina Medical Board in order to facilitate their analysis of controlled substance prescribing patterns.

2. *Negotiations of Section 12F.16(f) of SL 2015-241 Modifications with CSRS Vendor*

The Division has been unable to obtain definitive plans from Health Information Design (HID), the third party vendor that operates the CSRS, regarding their implementation of the proposed modifications. In October 2015, the Division had a face to face meeting with HID to address pending enhancements to the CSRS. During this meeting the importance of providing delivery dates for all enhancements was reiterated. HID stated that, as a policy, they do not provide delivery dates to any states. The Division did, however, negotiate a 15% reduction to the service contract for 2016.

C. Section 12F.16.(f) of SL 2015-241 Requirements

Specifically, the contract shall be modified to include the following:

1. ***Section 12F.16.(f)(1) - A connection to the North Carolina Health Information Exchange (NC HIE) Network administered by the North Carolina Health Information Exchange Authority (NC HIE Authority).***

Background:

Section 12A.5. of SL 2015-241 calls for a successor network to the existing North Carolina Health Information Exchange (NC HIE) to be established by February 29, 2016, and administered by a State-controlled Health Information Exchange Authority. The successor HIE Network is not yet in place to effect a connection with CSRS.

Status:

The Division met with HID on October 22, 2015 to create a statement of work order to develop a connection between the CSRS and NC HIE. The development of this connection will be included as part of the 2016 service contract with HID to be amended by December 31, 2015. HID will deliver this enhancement during calendar year 2016.

2. **Section 12F.16.(f)(2) - The establishment of interstate connectivity.**

Background:

On December 19, 2014, the Division signed a memorandum of understanding with the National Association of Boards of Pharmacy (NABP) to establish an interface with PMPInterConnect. PMPInterConnect is a secure communications exchange platform that facilitates the transmission of prescription data across state lines to authorized requestors. Realizing that NABP and HID have not been able to work together on other states' projects because of competition among service providers, the Division scheduled a meeting on March 6, 2015 with HID and NABP. HID did not participate despite numerous attempts prior to and during the meeting to bring HID into the conversation. Since that time the Division has continued efforts to support the two companies in working together with little progress.

Status:

The Division signed a statement of work order on October 27, 2015 with HID. This enhancement has been designed by the Division as top priority for HID. PMPInterConnect will be included as part of the 2016 service contract with HID to be amended by December 31, 2015. HID will deliver this enhancement during calendar year 2016.

3. **Section 12F.16.(f)(3) - Data security protocols that meet or exceed the Federal Information Processing Standards (FIPS) established by the National Institute of Standards and Technology (NIST).**

Background:

On May 10, 2015 the Division requested confirmation from HID regarding their compliance with FIPS. HID advised that they are unable to comply with FIPS because a cost prohibitive rewrite of their prescription monitoring application would be required. During the October 2015 meeting, HID advised that their new Data Security Officer was pursuing FIPS certification. A status report is due December 15, 2015 to the Division.

Status:

The new Data Security Officer for HID will review the FIPS Security Requirements as described in NIST Special Publication 800-53 and will provide a report to the Division by November 30, 2015. This requirement will be part of the 2016 service contract with HID to be amended by December 31, 2015. HID will comply with this requirement beginning January 1, 2016.

D. Conclusion

The Division is committed to continuing to improve upon the current efforts to prevent the abuse of prescribed controlled substances. The Division will continue to work with HID to complete tasks in a timely manner and collaborate with partners and stakeholders to support the health of North Carolinians.