Greetings!
This presentation will begin promptly at:

12:05PM

Thank you!
California’s Prescription Drug Monitoring Program (PDMP)

CURES 2.0

Prescriber / Dispenser Overview

September 26, 2018
CUREx 2.0

Controlled Substance Utilization Review and Evaluation System
The CURES Program is the prescription drug monitoring program for the state of California.

The CURES database contains information about Schedule II, III, and IV controlled substance prescriptions dispensed to patients, as reported by those dispensers.

CURES data reflects dispensing information exactly as it is reported to the Department of Justice. The reporting dispenser creates and owns the prescription records submitted. The Department of Justice is a custodian (and not editor) of these aggregated prescription records.
The Health and Safety Code requires the Department of Justice to maintain the Controlled Substance Utilization Review and Evaluation System (CURES):

- To assist health care practitioners in their efforts to ensure appropriate prescribing, ordering, administering, furnishing, and dispensing of controlled substances.
- To assist law enforcement and regulatory agencies in their efforts to control the diversion and resultant abuse of Schedule II, Schedule III, and Schedule IV controlled substances.
- And for statistical analysis, education, and research.

*California Health and Safety Code section § 11165(a)*
<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1939</td>
<td>The California Triplicate Prescription Program (TPP) was created, capturing Schedule II prescription information.</td>
</tr>
<tr>
<td>1997</td>
<td>CURES pilot program was initiated, operating in parallel with the TPP’s Automated Triplicate Prescription System (ATPS) to evaluate the comparative efficiencies between the two systems.</td>
</tr>
<tr>
<td>2005</td>
<td>TPP/ATPS decommissioned after Senate Bill 151 eliminated the triplicate prescription requirement for Schedule II controlled substances. CURES became permanent.</td>
</tr>
<tr>
<td>2009</td>
<td>A searchable, client-facing application was introduced as a component of CURES.</td>
</tr>
<tr>
<td>2011</td>
<td>DOJ’s Bureau of Narcotic Enforcement dissolved and the CURES Program de-funded.</td>
</tr>
<tr>
<td>2013</td>
<td>The State Budget Act allocated funds for the CURES 2.0 build. Senate Bill 809 mandated CURES registration by prescribers and dispensers (effective July 1, 2016) and established an on-going funding mechanism to support costs for operating and maintaining the CURES system.</td>
</tr>
<tr>
<td>2016</td>
<td>CURES 2.0 universally released.</td>
</tr>
<tr>
<td>2018</td>
<td>CURES 2.0 was certified for statewide use by the Department of Justice. Mandate to consult CURES prior to prescribing, ordering, administering, or furnishing a Schedule II–IV controlled substance becomes effective on October 2, 2018.</td>
</tr>
</tbody>
</table>
The dispensing pharmacy, clinic, or other dispenser, including direct dispensing prescribers, are required to report dispensations of Schedules II, III, and IV controlled substances to the Department of Justice, in a format specified by the Department of Justice, as soon as reasonably possible, but not more than seven days after the date a controlled substance is dispensed.

*California Health and Safety Code section § 11165(d)*
Senate Bill 809, amended, in part, by Assembly Bill 679, and codified in Health and Safety Code section 11165.1(a)(1)(A), requires the following licensees to register for access to the CURES database:

- All California licensed pharmacists, upon licensure.
- All California licensed health care practitioners authorized to prescribe, order, administer, furnish, or dispense Schedule II, III, or IV controlled substances in California, upon receipt of a federal DEA registration certificate.
CURES MANDATORY USE
Senate Bill 482 (Stats 2016, Ch 708, Lara)
Health and Safety Code section 11165.4
What is the mandatory use requirement of SB-482?

With specified exceptions, a prescriber shall consult the CURES database no earlier than 24 hours, or the previous business day, before prescribing a Schedule II-IV controlled substance to a patient for the first time, and at least every four months thereafter if the substance remains part of the treatment of the patient.

How does the mandatory use requirement of SB-482 define “first time”?

“First time” means the initial occurrence in which a health care practitioner, in his or her role as a health care practitioner, intends to prescribe, order, administer, or furnish a Schedule II, III, or IV controlled substance to a patient and has not previously prescribed a controlled substance to the patient.

When does mandatory use become effective?

Mandatory use of CURES becomes effective on October 2, 2018.
To whom does mandatory use apply?

Prescribers with a DEA Controlled Substance Registration Certificate, Schedule II-IV, AND a valid license issued by a professional state licensing board of the California Department of Consumer Affairs. Examples include:

- Medical Physician
- Osteopathic Physician
- Naturopathic Doctor
- Physician Assistant
- Dentist
- Optometrist
- Podiatrist
- Registered Certified Nurse Midwife (furnishing)
- Registered Nurse Practitioner (Furnishing)

To whom does mandatory use **not** apply?

Mandatory use does not apply to veterinarians or pharmacists.
Are there situational exceptions?

Yes, there are numerous situational exceptions to the mandatory use requirement of SB-482. Prescribers should review the full text of SB-482 (Health and Safety Code 11165.4), which contains an exhaustive list of exceptions to the mandatory use requirement.

Who is responsible for enforcing the mandatory use requirement?

It is the responsibility of your respective state professional licensing board to enforce compliance with the mandatory use requirement.

What are the consequences of non-compliance with mandatory use?

It is the responsibility of your respective state professional licensing board to determine administrative sanctions for health care practitioners who fail to consult the CURES database as required.
Is mandatory use required in my practice?

Questions regarding the application of this requirement to the particulars of your practice should be referred to your respective state professional licensing board, which is the proper body to advise you on compliance with this legislation.

What is required to properly document compliance?

Questions regarding the proper documentation of compliance with the mandatory use requirement should be directed to your respective state professional licensing board.

Can CURES usage be electronically audited?

Consistent with Health and Safety Code section 11165.2(a), the CURES Program has the ability to audit the activity of users within the system.

What if I experience technical difficulties accessing CURES?

There are exceptions to mandatory use if technical difficulties are experienced when accessing CURES. For example, if CURES is temporarily unavailable for system maintenance, or if temporary technological or electrical failures prevent CURES from being accessed. (See Health and Safety Code 11165.4(c)(6),(7) for details.)
Can health care practitioners provide CURES reports to their patients?

A health care practitioner may provide a patient with a copy of the patient’s CURES patient activity report, if in accordance with federal and state privacy laws and regulations, to the extent that no additional CURES data is provided.

Can health care practitioners put a copy of a CURES report in the patient’s medical record?

A health care practitioner may put a copy of the patient’s CURES patient activity report in the patient’s medical record, if in accordance with federal and state privacy laws and regulations.

Can all regulatory boards access CURES data?

Only regulatory boards whose licensees prescribe, order, administer, furnish, or dispense controlled substances may access CURES data.
Additional resources can be found on the CURES Dashboard, the OAG CURES webpage, linked below, and the MBC website.

https://oag.ca.gov/cures

http://www.mbc.ca.gov/
Assembly Bill 40 (AB-40), chaptered on October 9, 2017, and codified in Health and Safety Code section 11165.1, requires the Department of Justice to establish a method of system integration whereby approved health care practitioners and pharmacists may use a qualified health information technology system to access information in the CURES database.
CURES 2.0 provides an improved user interface; fast, robust performance; analytics; and innovative PDMP informational features.
CURES Registration:

CURES 2.0 provides a web-based electronic registration process that can be accessed from the Office of the Attorney General website.

Applicants are required to provide the following to continue registration:

1. User Role
2. License Issued By (CA DCA, or Agency outside of CA)
3. Email Address

Applicants must complete the CAPTCHA in order to submit the first step of their application.

Instructions and a registration link will be sent to the inputted email address.
Prescriber & Dispenser Registration

CURES Registration (cont.):

Once the applicant clicks the link, the applicant is navigated to the User Registration Form.

1. Applicants must complete the Applicant Information section by submitting the following:
   1) First Name
   2) Last Name
   3) Date of Birth
   4) Phone Number
   5) SSN or ITIN
   6) Licensing Board
   7) License Type
   8) State License Number
   9) DEA Number (prescriber only)
CURES Registration (cont.):
After the Applicant Information section is completed, applicants must complete the following steps:

2. Set up Security Questions and Answers.
3. Complete the CAPTCHA.
4. Click “Next.”
CURES Registration (cont.):

After completing the previous steps, the Registration Form Review is presented.

At this point the applicant must review and confirm the application information, accept the Conditions and Terms of the User Agreement, and submit the registration form.
CURES Registration (completed):
An approval or denial notification will be sent via email within 24 to 48 hours.

Approved users are sent an email with their User ID and link to validate identification.

For security, users must successfully respond to 3 of their challenge questions prior to receiving a Temporary Password.

Upon first-time login, users must create a new Password and complete their profile.
CURES 2.0 Features

Delegates

Prescribers and dispensers register delegates and assume responsibility for delegates’ use of CURES 2.0.

Delegates may initiate PAR searches on behalf of their “Parent” prescriber or dispenser.

Prescribers and dispensers may have 50 delegates; and delegates can support 50 prescribers and dispensers.
Dashboard

The Dashboard is the landing page for users upon login to CURES 2.0. From this page, users can access all features contained within CURES 2.0, including:

- Alerts
- Prescriber Messages
- Bulletins
- Global Navigation Bar
Patient Safety Alerts

Based on patterns indicative of at-risk patient behavior.

Alerts are informational; providers must determine if any action is necessary.
Patient Safety Alerts

1. Rx Recipients Who are Currently Prescribed More than 90 Morphine Milligram Equivalency Per Day

2. Rx Recipients Who Have Obtained Prescriptions from 6 or More Prescribers or 6 or More Pharmacies During Last 6 Months

3. Rx Recipients Who Are Currently Prescribed More than 40 Milligrams Methadone Daily

4. Rx Recipients Who Are Currently Prescribed Opioids More Than 90 Consecutive Days

5. Rx Recipients Who Are Currently Prescribed Both Benzodiazepines and Opioids
CURES 2.0 Features

Global Navigation Bar

User Account
- Update Profile
- Manage Delegates
- Change Password

Patient Activity Reports (PARs)
- Generate Report
  - PDF or Excel Format

Searches
- Delegate Searches
- Saved Searches

Prescription Form Theft/Loss
- Create Reports
  - Search Self-Reports
Running a Patient Activity Report (PAR)

The process of completing a PAR contains three steps:

1. **Search Criteria**
   Users enter patient information for which the system will be searched.

2. **Patient Results**
   Once users submit the search criteria, the matching patient entity results are displayed in a patient picklist. Users select the patient entities in the picklist that match their patient.

3. **Patient Details**
   Upon generation, the prescription history of each selected patient entity will be displayed.
Running a Patient Activity Report (PAR)

1. Search Criteria
   Users can input the following patient details:
   - Last Name
   - First Name
   - Date of Birth
   - Gender
   - Address
   - City
   - State
   - Zip Code

   Searches may be made on partial match or exact match to inputted information.

   A time period of up to 12 months from date of search, or a date range of one year, can be searched.
CURES 2.0 Features

Patient Activity

Search Criteria

Note: First Name and/or Last Name and DOB are required

Load Saved Search: 

Last Name:  
First Name:  

Date of Birth:  
Gender:  

Address:  
City:  

State:  Select One  
Zip Code:  

Search Mode:  Partial Match  
My Compacts Only:  

Search By Time

Search By:  
Time Period (Months)  
Date Range  6  

By executing this search, I certify that I am complying with CURES 2.0 terms and conditions.
Running a Patient Activity Report (PAR)

2. Patient Results
   Once users search for patient records, the matching patient entity results are displayed in a patient picklist below the search criteria. A selection check-box displays on every row.

   When the patient entity results are displayed, selecting check-boxes will highlight relevant patients from the picklist.

   After patient entities are selected, users will be able to generate the report.
Running a Patient Activity Report (PAR)

3. Patient Details
   Once the report has been generated, prescription activity history for each of the selected patients will display on the Details tab.

   From this page, users can download the displayed Patient Activity Reports.
CURES 2.0 Features
## CURES 2.0 Features

### Sample Patient Activity Report

**California Department of Justice**  
**Controlled Substance Utilization Review & Evaluation System (CURES)**

**PATIENT/CLIENT ACTIVITY : CONSOLIDATED REPORT**

<table>
<thead>
<tr>
<th>Number of Records</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>08/22/2016</td>
<td>08/22/2016</td>
</tr>
</tbody>
</table>

**Prescription Drug Transaction Details:**

<table>
<thead>
<tr>
<th>Date Filled</th>
<th>Last Name</th>
<th>First Name</th>
<th>DOB</th>
<th>Address</th>
<th>Drug Name</th>
<th>Form</th>
<th>Str</th>
<th>Qty</th>
<th>Days Sup</th>
<th>PHY Name</th>
<th>PHY#</th>
<th>Presc. DEA#</th>
<th>Prescriber Name</th>
<th>RX#</th>
<th>Refill#</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018-01-24</td>
<td>PATIENT</td>
<td>SAMPLE</td>
<td>2017-01-01</td>
<td>4949 Broadway, Sacramento, CA 95820</td>
<td>CARISOPRODOL</td>
<td>TAB</td>
<td>350 MG</td>
<td>30</td>
<td>30</td>
<td>SAMPLE PHARMACY</td>
<td>0000000</td>
<td>A900000000</td>
<td>NAME, SAMPLE</td>
<td>001234</td>
<td>0</td>
</tr>
<tr>
<td>2018-01-12</td>
<td>PATIENT</td>
<td>SAMPLE</td>
<td>2017-01-01</td>
<td>4949 Broadway, Sacramento, CA 95820</td>
<td>SUBOXONE</td>
<td>TAB</td>
<td>8 MG-2 MG</td>
<td>15</td>
<td>30</td>
<td>SAMPLE PHARMACY</td>
<td>0000000</td>
<td>A900000000</td>
<td>NAME, SAMPLE</td>
<td>001235</td>
<td>0</td>
</tr>
<tr>
<td>2018-01-03</td>
<td>PATIENT</td>
<td>SAMPLE</td>
<td>2017-01-01</td>
<td>4949 Broadway, Sacramento, CA 95820</td>
<td>SUBOXONE</td>
<td>TAB</td>
<td>8 MG-2 MG</td>
<td>15</td>
<td>30</td>
<td>SAMPLE PHARMACY</td>
<td>0000000</td>
<td>A900000000</td>
<td>NAME, SAMPLE</td>
<td>001234</td>
<td>0</td>
</tr>
</tbody>
</table>

**Disclaimer:** This report is compiled from information maintained in the California Department of Justice’s Controlled Substance Utilization Review & Evaluation System (CURES). The CURES maintains Schedule II, Schedule III, and Schedule IV prescription information that is received from California pharmacies and direct dispensers, and is therefore only as accurate as the information provided by these entities. If data was submitted with errors or have unknowns within a field, it will not be displayed within this report.
<table>
<thead>
<tr>
<th>CURES 2.0 Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Activity Report Data</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Filled</td>
<td></td>
</tr>
<tr>
<td>Date Sold*</td>
<td></td>
</tr>
<tr>
<td>Drug Name</td>
<td></td>
</tr>
<tr>
<td>Drug Form</td>
<td></td>
</tr>
<tr>
<td>Drug Strength</td>
<td></td>
</tr>
<tr>
<td>Quantity</td>
<td></td>
</tr>
<tr>
<td>Days Supply</td>
<td></td>
</tr>
<tr>
<td>Patient Name</td>
<td></td>
</tr>
<tr>
<td>Patient DOB</td>
<td></td>
</tr>
<tr>
<td>Patient Address</td>
<td></td>
</tr>
<tr>
<td>Patient Gender*</td>
<td></td>
</tr>
<tr>
<td>Pharmacy Name</td>
<td></td>
</tr>
<tr>
<td>Pharmacy License Number</td>
<td></td>
</tr>
<tr>
<td>Doctor’s Name</td>
<td></td>
</tr>
<tr>
<td>Doctor’s DEA Cert Number</td>
<td></td>
</tr>
<tr>
<td>Compact*</td>
<td></td>
</tr>
<tr>
<td>Payment Method*</td>
<td></td>
</tr>
<tr>
<td>Prescription Number</td>
<td></td>
</tr>
<tr>
<td>Refill Number</td>
<td></td>
</tr>
<tr>
<td>Refills Authorized*</td>
<td></td>
</tr>
<tr>
<td>Species Code*</td>
<td></td>
</tr>
</tbody>
</table>

*Fields available in excel format*
**CURES 2.0 Features**

**Compakts**

Prescribers can easily notate their patients with whom they have treatment exclusivity agreements (referred to as “compakts”), forewarning other providers that additional prescribing to these patients could be potentially counter-productive to their existing treatment regimen. Users can view if a compact exists for a patient.

**Peer-to-Peer Communication**

Users can view prescriber contact information. Prescribers and dispensers can securely send messages to prescribers concerning mutual patients within CURES.

Messages are encrypted in transit and at rest.
CURES 2.0 provides the capability for a prescriber to make other practitioners aware of a treatment exclusivity compact with a specific patient whenever that patient is queried in CURES 2.0. This optional feature is provided to help avert potentially counter-productive treatment/prescribing.

If you wish to indicate a treatment exclusivity compact exists between you and a patient, click the “Add” button next to the patient entity(ies). You must specifically identify your patient by name, date of birth, and address.

The compact status should be rescinded as soon as it is no longer in force. The compact status will continue to display until it is rescinded by the prescriber who established it. Prescribers are encouraged to regularly review their compact listings and remove outdated designations.
CURES 2.0 Features

Peer Messaging

Peer messaging is available with prescribers that have a CURES 2.0 account.

<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
<th>Phone #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

From: [Placeholder]

Regarding: Above listed patients

Message:

Send Message

Prescribers NOT in CURES 2.0

Peer messaging is available only with prescribers that have a CURES 2.0 account. The following prescribers do not have a CURES account and their contact information is unknown. The address provided is based on DEA record information.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No prescribers found for this patient entity</td>
</tr>
</tbody>
</table>
CURES 2.0 Self-Service

Password resets are required every 90 days.

Reminder emails are sent to the user prior to the password expiration date.
Self-Service Forgot User ID:
1. Click “Forgot your ID?” link on Login Screen.
2. Forgot User ID page is displayed.
3. Enter email address on record.
4. User receives email with User ID.
5. User proceeds to Login Screen.
Self-Service Forgot Password:

1. Click "Forgot your Password?" link on Login Screen.
2. Forgot Password page is displayed.
3. Enter User ID.
4. Answer Challenge Questions presented.
5. User receives an email with Temporary Password.
6. User proceeds to login with Temporary Password.
7. User prompted to create new unique password.

Challenge Question Process:

- User presented with 3 randomly chosen questions from list of 5 available.
- User must answer 3 correctly.
- If User answers any question incorrectly, an error will appear stating the verification information provided does not match.
- After 5 incorrect attempts, the user must contact the CURES Help Desk for assistance.
Self-Service Change Password:

1. From the Navigation Menu, select “User Account.”
2. Select “Change Password“ from the drop down.
3. User navigated to change password page.
4. Enter new password and confirm new password.
5. Complete the CAPTCHA.
6. Click “Submit.”
7. Password now updated.
8. Click “Return to Previous Application” link in upper right-hand corner.
Self-Service: Change Security Questions:

1. From the Navigation Menu, select “User Profile.”
2. Select “Change Password” from the drop down.
3. User is navigated to change password page.
4. Select one of the following links in the upper left-hand corner:
   - “DOJ Modify My Help Desk Questions and Answers”
   - “DOJ Modify My Security Questions and Answers”
5. Select new questions and enter answers.
6. Click “Submit.”
7. Questions and answers now updated.
8. Click “Return to Previous Application” link in upper right-hand corner.
Questions?
Thank you!