

Electronic Prescription of Controlled Substances (EPCS) Job Aid v05.04.18

Electronic Prescription of Controlled Substances (EPCS) allows licensed providers to use ORCHID to electronically prescribe controlled substances, including ordering and transmitting prescriptions through *Surescripts* to a designated pharmacy for dispensing. After completing an enrollment process and registering their personal smart device, providers with an active DEA license in good-standing can use **EPCS**.

A smart device is necessary to complete the Two-Factor Authentication process for EPCS. Smart devices include mobile phones/tablets. No PHI (Protected Healthcare Information) will be saved or stored to your device. Each EPCS user can utilize only a single device. For your convenience, utilizing your personal device is recommended.

Ordering a Controlled Substance

1. From the **Orders + Add** window, search and add the selected controlled substance. Fill in order details. Ensure there is a routing pharmacy listed in the **Send To:** window. Click **Sign**.

< :	- 🔒 Orders										[1] Full screen	🛱 Print	₽ 3 minutes ago
+ A	dd 🕼 Document Medication by	Hx Reconciliation • 🔈 Ch	eck Interactions 🛅 External R	×History ▼ R×Plans (0): No Be	nefit Found •						Reconciliation St Heds History	itus 🔒 Admissio	on 🔒 Discharge
Orde	Medication List Document In	n Plan											
H	Orders for Signature												
	🔊 \$ 🕜 🖳 🕅 Ord	er Name Status	Start Details			CA DI-	10.01.01						^
		Vastatin (Lipitor L., Prescribe DROcodone-acetam Prescribe	 1/17/2018 10:31 PST 10 mg 1/17/2018 10:31 PST 1 tabs, 	E Ltabs, Oral, QDAY, = 30 tabs, Oral, Q4H, PRN pain, # 30 tabs,	0 Refill(s), Phar	macy: CA Pharmacy macy: CA Pharmacy	10.6MU						-
		done-acetamino	phen (Norco 325 i	mg-5 mg oral table	et) 🔻					Send To: CA	A Pharmacy 10.6MU (6	5432 Caberne	et Turn) 🔻 📖
	Details Details Order Comments] 🚱 Diagnoses]		0 0									
	'Dose 'I	Route of Administration	'Frequency	Duration	'Dispense	30 90 Refil	I						
	1 tabs	🕘 Oral	🖬 Q4H		🔷 30 tabs	•	0	•	- % lh.	# ¥			
	'PRN	pain	v		s	pecial Instructions:			_				^
	Requested Refil Date	xpxpax	Der Der										
	To direction					l Start Date (Timer)	01/17/2018	1021		DCT			
	Indication					Start Date/Time:	01/17/2010			251			=
	Type Of Therapy	Acute				'Stop Date/Time:	01/17/2019	• • 100	-	PST			
		C Maintenance			Select	Prescriber Address:							
	DAW	Yes 🖲 No				Print DEA Number:	🖲 Yes 🌔 N	lo					
	Samples	:	~			Drug Form:	Tab		¥				-
	0 Missing Required Details Dx 1	Table Orders For Cosignati	ure Orders For Nurse Review										Sign

Note for Physician Assistant's: California law requires the name of the supervising provider be added to the electronic controlled substance prescription. This information can be added to the **'eRx Note to Pharmacy'** field during order entry.





Routing a Prescription

2. If there is not a pharmacy listed, you can search and add one by clicking the ellipsis 🛄 and click the **Search** tab.

Prescription Routing			
*Send to: Pharmacy Apply to: Selected Pending Press and All Pending Presscriptic All Pending Non-Tam	cription(s) ns perproof Prescriptions	Las	t Reviewed: 12/14/2017 10:49 PST
Patient Preferred Search	•		
Pharmacy Name	Pharmacy Name	Address	Cross-Street
Address			
City]		
Torrance	1		
State			
CA			
Zip Code			
Phone			
Pharmacy Type: Filter Results By: Retail Specialty Mail Order 24-hour Long-term Care			
Search	J		
Remember search options			
			F
	ZZZZTEST, EF	PCS - 10094478	84 OK Cancel

Send to:		~	Send to Pharmacy is not available because at least one of your
pply to: 🛛 🗍	o Not Send	Prescription(s)	unsigned prescriptions is not eligible.
P	rinter	riptions	
	All Pending Ta	mperproof Prescriptions	
Condina	to phormoo		aution if.

 The Electronic Prescription Preview window displays. Provider <u>must</u> review patient's address before signing to correctly identify patient. Place a checkmark next to each controlled substance.

Note: There will not be a checkmark required for	r non-controlled medications.	Click Sign.
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Electron	
ZZZZTEST EPCS	Sex Female
MRN: 100944784	DOB: 01-01-1975 Home: (323) 409-8231
Address: 123 Main St Torrance, CA 90502	DOD. 01-01-13/3 Florine. (323) 403 6231
Address. 123 Main 3(, 10hance, CA 30302	
	Rx Plans (0): No Benefit Found
TestChew, Leland	National Provider Identifier:[1764098798] DEA: L07564278 👻
2051 Marengo Street, Los Angeles, CA 90033 Phone	: 8163453456 Fax: 8163453457
CA Pharmacy 10.6MU — 65432 Cabernet Tur	n, Sonoma, CA 95476 Phone: 7072107071 Fax: 7072107072
📝 Norco 325 mg-5 mg oral tablet [Sched	lule 2] [Modify]
1 tabs Oral Q4H,PRN:pain	
#30 tabs, Refills:0, DAW:No, Date Written	01-17-2018
Lipitor 10 mg oral tablet	[Modify]
1 tabs Oral QDAY	
#30 tabs, Refills:11, DAW:No, Date Writter	n:01-17-2018
New for EPCS	
By completing the two-factor authentication protocol at this tim authorizing the transmission of the above information to the ph authentication protocol may only be completed by the practition appear above.	e, you are legally signing the prescription(s) and amacy for dispensing. The two-factor ner whose name and DEA registration number

Dual Factor Authentication

4. <u>1st Factor Authentication</u>

A. The Confirm your identity page appears. Enter your network (active directory) password. Press Enter key.

Confirm your identity -	este604656@hosted.lac.com - Imprivata Confirm ID		×
Confirm your identity İl imprivata	* * * * Network password	HINT: Enter the same password you use to login to ORCHID	

5. <u>2nd Factor Authentication</u>

A. **Push Notification (requires Wi-Fi)** An ID challenge push notification from the Imprivata app will appear on your personal smart device. Click **Approve** OR...



B. Token (no Wi-Fi needed): If you do not respond to the push notification within 30 seconds, the Imprivata app will generate a different 6-digit token code every 30 seconds. Enter the current visible code from the Imprivata app into the Imprivata ID field. Press Enter key or click \bigcirc .

After about 2-3 seconds the **Prescription Preview** window closes and the prescription(s) are routed to the selected pharmacy.



Additional EPCS Worflow Considerations

- Schedule II medications <u>cannot</u> be ordered with refills due to legal requirements. It is permissible to order up to a 90 day supply, but it must be done with separate transactions. In order to allow for this, an **Earliest Fill Date** field is available for C-II prescriptions. After you setup an initial prescription for the first 30 days, you could add 1 or 2 additional prescriptions for the same medication with earliest fill dates 30 and 60 days out.
- If you have **additional information** that needs to be provided for the controlled substance you are sending electronically, it should be included in the **eRx Note to Pharmacy** field. This would include additional identifiers such as an NADEA number, information for the pharmacist, or other provider specific identifiers.
- If you need to order a compound medication that includes a controlled substance, then it will be necessary to send multiple prescriptions for each component. Make sure to include a note in the eRx Note to Pharmacy field so the pharmacy knows the prescriptions are meant to be linked to provide a compound medication.

M	Orders for Signatu	ite										
	& \$	0 5 7 0	Order Name	Status	Start	Details						^
		I I • •	-WDROcodone- nophen (Norco	acetam Prescribe 325	1/18/2018 07:12 PST	1 tabs, Oral, Quantity lim	Q4H, PRN pain, # 3 it of 45 tablets per f	0 tabs, 0 Refill(ill; maximum	s), Pharmacy: 135 tablets per	CA Pharma 75 days. Pr	cy 10.6MU ior Authorizatio	on require
	▪ Details for	HYDRO	codone-a	acetaminor	ohen (Norco	325 mg-	5 mg or	Send To:	CA Pharmac	y 10.6MU (6	5432 Cabernet	• Tum) •
	😭 Details 🕕	Order Commer	nts 🕽 📝 Diagno:	ses	-							
	'Dose	'Route	of Adminis 'F	requency	Duration	'Dispense	30 90 Refill					I
	🥚 1 tabs	i Ora	. D	Q4H		🔷 30 tabs	• 0		🛨 骺 In.	₩ ≈		
		Indicati	ion:				Start Date/Time:	01/18/2018	-	0712	🗧 PST	^
		Type Of Thera	ipy: 💽 Acute	:			'Stop Date/Time:	01/18/2018	-	0713	PST	
			C Maint	tenance		Select P	rescriber Address:					
		DA	W: Yes			F	rint DEA Number:	🙆 Yes 🤇	No			
		Samp	les:		~		Drug Form:	Tab		~		=
	eR×	Note to Pharma	ncy:			Restri	cted Criteria Met?:	C Yes C) No			
							Approval Code:					
	Approving Pr	rovider/Consult	ant:				Earliest Fill Date:	** /** /****	-			-
	0 Missing Requir	ed Details	Dx Table C	Irders For Cosignatu	e Orders For Nurse F	Review						Sign

Provider Monthly Controlled Substance Report

At the beginning of every month, providers using EPCS will receive a report of the controlled substances that they prescribed for the previous month. Providers are expected to review the auto generated report upon receipt in their Message Center. The report is scheduled to run on the first of every month. If there is a discrepancy or suspicious activity found within the report, the provider should immediately contact their local Risk Management or Pharmacy Director and log a SI (safety intelligence) incident as an 'EPCS Discrepancy'. The provider will be instructed to report any suspicious activity found within the report down within the report within one business day to the Medical Board and DEA. This workflow has been documented and approved by DHS Risk Management in the <u>Process for Monthly EPCS Provider Activity Report</u>.

Accessing Monthly Provider Report

- 1. Access Message Center.
- 2. Click on General Messages in the Inbox. Locate message with the subject EPCS Reporting from X date to Y date (Do not reply).

Inbox Summary 🛛 🖁	General Messages X					
Inbox Proxies Pools	🎦 Communicate 🔹 💕 Open 🚑	Reply 🙆 Reply All 🙆 Forwa	ard 🎽 Delete 📓 Message Journal	🖦 Select Patient	🗮 Select All 🎄 Patient Match	
Direlas I. 100 D	Accigned Create Date V	D From	Datient Name Driority	Statue	Subject	То
Display: Last 90 Days 👻 🛄	10/12/2016 10:39	:07 Castellano, Conn	IOF	Pending	EPCS Reporting from January 1, 2015 12:00:00 AM CST to January 31, 2015 11:59:59 PM CST (Do n	Castellano, Co
Inbox Items (1)						
Documents						
Results						
Orders						
 Messages (1/1) 						
General Messages (1/1)						
Results FYI						
 Work Items (0) 						
Saved Documents						
Documents to Dictate						
Reminders						
Notifications						
Sent Items						
Trash						
Notify Receipts						

3. Click blue hyperlink to open attachment. Review for suspicious activity and immediately report any discrepancies to IT/Security Office.

General Messages × General Messages: ×		
🙈 Reply 🖓 Reply All 🙈 Forward 🎦 Delete 冯 Print 😭 👎 🍓 Mark Unread 🛛 Inbox View Summary View 🔭 Launch	Orders	
From: Castellano, Connor	Caller:	٦
Sent: 10/12/2016 10:39:07 CDT	Action:	
Subject: EPCS Reporting from January 1, 2015 12:00:00 AM CST to January 31, 2015 11:59:59 PM CST (Do not reply)	Due:	
To: Castellano,Connor	Target Document Type: Phone Message/Call	
EPCS Reporting from January 1, 2015 1		
<add text=""></add>		
Dec Albert word		
See Attachment		
		1
		9
	📓 Save to Chart 🛛 🐼 Reject All 🛛 🚱 Accept All 🚯 🔞 Accept All and Next	
	—	

Sample: Prescriber EPCS Activity Report Data

	from September 1, 2016 12:00:	00 AM CDT to September 30, 201	6 11:59:59 PM CDT (Do not reply)								
न सा											
Prescr	iber EPCS	Activity Re	port								
Prescriber Id	Prescriber Last Name	Prescriber First Name	Prescriber Address Line 1	Prescriber Add	ress Line 2 Pre	escriber City	Prescriber State	Prescriber Zip	Code DEA Number	Patient Id	Patient Last Nam
1020971	Test	Physician2	450 E 23rd St		Fre	emont	NE	68025	NE1234555	7273129	Swift
1020971	Test	Physician2	450 E 23rd St		Fre	emont	NE	68025	NE1234555	7273130	Kyle
1020971	Test	Physician2	450 E 23rd St		Fre	emont	NE	68025	NE1234555	7273129	Swift
EPCS Reporting	g from September 1, 2016 12:	00:00 AM CDT to September 3	0, 2016 11:59:59 PM CDT (Do not re	:ply)							
Patient First I	Name Patient Addres	s Line 1 Patient Addre	ess Line 2 Patient City	Patient State	Patient Zip Co	ode Patient	Date of Birth P	rescription Id	Prescription Name		
						oue runeme			r resemption nume		
Johnathan	99238 Vertigo	Lane	Minneapolis	MN	55427	1979-1	0-24 1	98197501	OxyCONTIN 10 mg	oral tablet	, extended releas
Johnathan Selena	99238 Vertigo 23230 Port	Lane	Minneapolis South Arlingtor	MN OH	55427 44306	1979-1 1966-1	0-24 1 0-11 1	98197501 98197949	OxyCONTIN 10 mg OxyCONTIN 80 mg	oral tablet oral tablet	extended releas
Johnathan Selena Johnathan	99238 Vertigo 23230 Port 99238 Vertigo	Lane	Minneapolis South Arlington Minneapolis	MN OH MN	55427 44306 55427	1979-1 1966-1 1979-1	0-24 1 0-11 1 0-24 1	98197501 98197949 98197481	OxyCONTIN 10 mg OxyCONTIN 80 mg OxyCONTIN 80 mg	oral tablet oral tablet oral tablet	, extended releas , extended releas , extended releas
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Johnathan Selena Johnathan EPCS Reporting f 4 4	99238 Vertigo 23230 Port 99238 Vertigo from September 1, 2016 12:00:0	Lane 0 0 AM CDT to September 30, 2016	Minneapolis South Arlington Minneapolis 11:59:59 PM CDT (Do not reply)	MN OH MN	55427 44306 55427	1979-1 1966-1 1979-1	0-24 1 0-11 1 0-24 1	98197501 98197949 98197481	OxyCONTIN 10 mg OxyCONTIN 80 mg OxyCONTIN 80 mg	oral tablet oral tablet oral tablet	extended releases extended releases extended releases
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Johnathan Selena Johnathan EPCS Reporting f 3 1 Prescriptio e 60	99238 Vertigo 23230 Port 99238 Vertigo from September 1, 2016 12000	Lane AM CDT to September 30, 2016 Prescription Directions 1 tab(s) PO q12hR	Minneapolis South Arlingtor Minneapolis 1159:59 PM CDT (Do not reply) Prescription Date Written 2016-09-27	MN OH MN	55427 44306 55427 est Fill Date Prr NE	1979-1 1966-1 1979-1 1979-1 1979-1	0-24 1 0-11 1 0-24 1 0-24 1	98197501 98197949 98197481 umber Of Refills	OxyCONTIN 10 mg OxyCONTIN 80 mg OxyCONTIN 80 mg Prescription Pharm	oral tablet oral tablet oral tablet acy Note F	extended releas extended releas
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