



RESOURCE AND PATIENT MANAGEMENT SYSTEM

IHS Pharmacy Modifications

(APSP)

EPCS Supplemental User Guide

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Preface

The purpose of this manual is to provide the user with the information needed to process prescriptions within the new Electronic Prescribing of Controlled Substance (EPCS) function of Indian Health Service (IHS) Resource and Patient Management System (RPMS).

This manual contains reference information about new processes and step-by-step procedures to show end users how to perform activities related to processing prescriptions to meet both Drug Enforcement Administration (DEA) and the Department of Health and Human Services (HHS) regulations. Further, it walks through the safe-ordering and pharmacy-fulfillment processes when controlled substances are integrated into the patient's plan of care.

EPCS builds upon the already existing functionality of RPMS-EHR ordering and medication components and the outpatient pharmacy suite within RPMS. Customization of the RPMS menus is allowed, therefore some screenshots contained within this manual may differ from the provider's version; however, all functionality remains consistent.

For more information about EPCS, the DEA list of controlled substances, or other matters related to e-prescribing, users may consult these resources:

- EPCS: www.ihs.gov/ehr.
- EPCS Training: <https://www.ihs.gov/rpms/training>.
- DEA list of controlled substances: https://www.deadiversion.usdoj.gov/schedules/orangebook/e_cs_sched.pdf.
- Controlled substance dispensing authority by Mid-Level Practitioners by State: https://www.deadiversion.usdoj.gov/drugreg/practioners/mlp_by_state.pdf.

1.0 Introduction

In 2014, the Office of the National Coordinator (ONC) for Health Information Technologies published its second set of rules related to the adoption of standards, implementation, and certification criteria for Electronic Health Record (EHR) technology. IHS must meet these HHS ONC 2014 certification requirements, and EPCS has been created to accomplish this. EPCS provides enhancements to the existing electronic prescription (eRx) process within RPMS-EHR to allow for secure electronic prescribing and dispensing of controlled substance (CS) medications.

1.1 Purpose

EPCS implements key controlled substance prescribing regulations and fulfillment screens and allows practitioners to transmit a controlled substance prescription with an approved signing function. This new feature also requires a second layer of security in addition to an electronic signature that providers must use before signing the prescription. As many IHS sites are multi-divisional, EPCS permits providers associated with many facilities to order controlled substances for patients in multiple sites. The Pharmacy component of EPCS allows controlled substances to be dispensed from internal pharmacies safely and efficiently.

By streamlining the process of ordering and fulfilling patients' prescriptions that contain controlled drugs, medication errors and prescribing misuses may be minimized, if not avoided. EPCS supports other care-related activities directly or indirectly through various interfaces, including provider-profile credentialing for prescribing controlled medications electronically, pharmacy management and tracking of controlled substances, and patient medication management.

EPCS, along with the implementation of electronic health records, supports the continued progress of healthcare that strengthens the relationship between patients and clinicians. The ability to retrieve timely data from this system will enable providers to make better decisions and provide better care, while ensuring that patients receive the medications they need to control their pain or improve their health.

EPCS is designed for outpatient prescriptions only. Inpatient prescriptions for controlled substances do not require EPCS, however, when ordering a CS medication for an inpatient, the provider must have authority for the schedule of the CS medication selected as a validation check is now performed. Outpatient prescriptions that are sent by paper to internal or external pharmacies do not require two-factor authentication.

EPCS impacts the Outpatient Pharmacy Suite in several ways, which are explained in further detail throughout this User Manual, and include but are not limited to:

- New key and parameters

- New information and steps for processing CS orders
- New reports available

1.2 Key Terms and Definitions

There are several key terms related to EPCS which should be understood prior to reading the remainder of this user manual:

- **Two-Factor Authentication (2FA):** A type of multifactor authentication. This term indicates that a user must authenticate using two different methods. The most recognizable example for the average user will be an ATM, where you must have both a card and a PIN to get cash. If only one method is presented, no cash is dispensed. The most common methods of authentication are:
 - something you have, such as a card or token
 - something you know, such as a password or PIN
 - something you are, such as a fingerprint or facial scan.
- **Digital Signature:** In the EPCS regulations, this is defined as “a record created when a file is algorithmically transformed into a fixed length digest that is then encrypted using an asymmetric cryptographic private key associated with a digital certificate.” Each Provider wishing to use EPCS must obtain a digital signing certificate from an IHS-authorized vendor. In addition, the staff who will be verifying the Provider’s EPCS profiles will also need a digital signing certificate.
- **Electronic Signature:** In the EPCS regulations, this is defined as “a method of signing an electronic message that identifies a particular person as the source of the message and indicates the person's approval of the information contained in the message.”
- **Electronic Signature Code:** This term is used within RPMS and EHR to refer to the specialized password used to apply an electronic signature as defined previously to an item such as an order or a note.
- **Hash:** A hash as it relates to EPCS, in extremely simplified terms, is a numerical representation of certain aspects of the order as it was created and signed by the provider. It is set at the time the provider signs the order, transmitted with the order to the pharmacy, then checked (by recalculating from the aspects used to create the hash initially) at the time the pharmacy processes the order. When the hash calculation at processing does not match the hash set at signing, it indicates that the order has been tampered with or corrupted in transmission. It is important to remember that not all hash mismatches indicate deliberate tampering.

2.0 Pharmacy-Related Configuration

This section describes the set up required in the pharmacy package, as well as the pharmacy and ordering related parameters needed to use the EPCS system.

The RPMS Pharmacy application is maintained by software releases in the APSP namespace. The APSP patch for EPCS is APSP*7.0*1023. APSP*7.0*1023 is a pre-requisite of EHR*1.1*25.

Note: Although EPCS will not be live for providers until the site is turned on, all the functions and requirements for pharmacy as described in this user manual will become active immediately upon installation.

2.1 Keys and Menus

Within RPMS and EHR, security keys control both access to options and the ability to perform specific functions.

Historically, pharmacy keys have been widely allocated, often even outside the pharmacy staff. Likewise, the pharmacy manager menu is often assigned to all pharmacy personnel regardless of job duties and functions. This menu option offers access to the Delete function for prescriptions, which per the EPCS regulations must be restricted.

A new key is delivered with EPCS, and some existing keys now have additional effects. Sites should review pharmacy key and menu assignments, preferably before the installation of the EPCS patches, to ensure that users do not have access that exceeds their authority. In addition, some sites have modified the main pharmacy manager menu to include all options necessary for the highest level of pharmacy access and management, and these modifications should be considered when reviewing menu options assigned to users.

To assist in such a review, Table 2-1 provides an overview of some pharmacy keys and their effect on users. The new PSDRPH key is only to be given to those pharmacists who have the capability of processing CS orders.

Table 2-1: Pharmacy Keys and their Effects

Key	Function	Effect	Notes
PSOTCORE	Tech menu	Unlocks the tech menu, PSO USER2	For pharmacy aides and technicians who need basic access to input and process backdoor prescriptions.
PSOPCORE	Pharmacist menu	Unlocks the pharmacist menu, PSO USER1	Should be the preferred menu for most pharmacy staff.

Key	Function	Effect	Notes
PSOMCORE	Manager menu	Unlocks the manager menu (PSO MANAGER), including the Delete option for active/verified prescriptions	Allows for managing the pharmacy, including setting up cost reports, TaskMan jobs, and deleting Rx, and is not intended for all users
PSORPH	Designates person as pharmacist	In relation to EPCS, this key allows a user to refill processed CS prescriptions, and to enter backdoor CS orders to a non-verified status.	Should be given only to users with authority to process non-controlled substance orders, and to refill controlled substance prescriptions.
PSDRPH (new)	CS dispensing key	In relation to EPCS, this key allows a user to process CS orders, and to enter backdoor CS orders to a verified status. Note: This key will need to be assigned immediately after the patch is installed.	Should be given only to users with authority to process controlled substance orders.

Figure 2-1 shows a digitally signed order for a user without the PSORPH key and without the PSDRPH key. Note that the actions in parentheses – Edit, Discontinue, Finish, and Flag/Unflag – indicate the user is not allowed to select them. In this example, the user cannot perform any processing functions and can only bypass the order. The same is true for a user with the PSORPH key but without the PSDRPH key.

```

Pending OP Orders (ROUTINE)   Jan 31, 2018 12:46:28   Page:   1 of   3
DEMO,PATIENT BEONE-SEVEN                                     <A>
  PID: XXX-XX-2480   (HRN: XXXX52)                       Ht (cm): 177.80 (02/08/2010)
  DOB: SEP 3,19XX (XX)                                       Wt (kg): 133.36 (01/23/2012)
-----
Processing Digitally Signed Order
* (1) Orderable Item: AMPHETAMINE/DEXTROAMPHETAMINE XR CAP, SA
  (2)      Drug: AMPHETAMINE/DEXTROAMPHET XR 10MG CAP
  (3)      *Dosage: 10 (MG)
           Verb: TAKE
           Dispense Units: 1
           Noun: CAPSULE
           *Route: ORAL
           *Schedule: DY
  (4) Pat Instruct: FOR ADHD
  Provider Comments:
           Instructions: TAKE ONE CAPSULE PO DY
           SIG: TAKE ONE CAPSULE BY MOUTH DAILY FOR ADHD
Clinical Indication: Shoulder pain M25.519
+-----Digitally Signed Order-----
BY Bypass           DC (Discontinue)           FL (Flag/Unflag)
ED (Edit)           FN (Finish)
Select Item(s): Next Screen//

```

Figure 2-1: Digitally signed order

The RPMS output in Figure 2-2 displays an example of prescriptions shown as Non-verified. They are listed in a separate section titled Non-Verified and have a status of N. A CS order will go to a non-verified state if it is entered as a backdoor order by a user without the PSDRPH key.

```

DEMO,PATIENT ALLTWO-FIVE
  PID: XXX-XX-5898 (HRN: XXXX83)          Ht (cm): 162.56 (09/26/2016)
  DOB: MAY 2,19XX (XX)                   Wt (kg): 63.05 (09/26/2016)
  SEX: FEMALE

                                     ISSUE  LAST REF DAY
+-----+-----+-----+-----+-----+-----+-----+
6 513706  GUAIFENESIN/CODEINE 100MG/10MG/5ML SYRUP A 12-08 12-08  0  6
                                     Qty: 118
7 513702  IBUPROFEN 400MG TAB          40 A> 12-08 12-08  0 10
8 513710  LISINOPRIL 5MG TAB          30 A> 12-08 12-08  5 30
9 513595  OMEPRAZOLE 20MG EC CAP      30 A> 11-02 11-02 11 30
-----NON-VERIFIED-----
10 513708  LORAZEPAM 0.5MG TAB         20 N> 12-08 12-08  0 10
11 513709  METHYLPHENIDATE ER 18MG TAB 30 N  12-08 12-08  0 30
12 513715  OXYCODONE/APAP 5MG/325MG TAB 12 N  12-08 12-08  0  5
-----Outside Medications-----
-----Enter ?? for more actions-----
PU Patient Record Update          NO New Order
PI Patient Information             SO Select Order
Select Action: Quit//

```

Figure 2-2: Non-verified Prescriptions

A user with the PSDRPH and PSORPH keys will be able to perform all functions, as shown in Figure 2-3.

```

Pending OP Orders (ROUTINE) 31, 2018 12:37:06          Page: 1 of 3
DEMO,PATIENT BEONE-SEVEN                                     <A>
  PID: XXX-XX-2480 (HRN: XXXX52)          Ht (cm): 177.80 (02/08/2010)
  DOB: SEP 3,19XX (XX)                   Wt (kg): 133.36 (01/23/2012)
+-----+-----+-----+-----+-----+-----+-----+
Processing Digitally Signed Order
*(1) Orderable Item: AMPHETAMINE/DEXTROAMPHETAMINE XR CAP,SA
(2)          Drug: AMPHETAMINE/DEXTROAMPHET XR 10MG CAP
(3)          *Dosage: 10 (MG)
              Verb: TAKE
              Dispense Units: 1
              Noun: CAPSULE
              *Route: ORAL
              *Schedule: DY
(4) Pat Instruct: FOR ADHD
Provider Comments:
  Instructions: TAKE ONE CAPSULE PO DY
              SIG: TAKE ONE CAPSULE BY MOUTH DAILY FOR ADHD
Clinical Indication: Shoulder pain M25.519
+-----Digitally Signed Order-----
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish

```

```
Select Item(s): Next Screen//
```

Figure 2-3: A user with the PSDRPH and PSORPH keys

2.2 Parameters

There are several parameters affecting the pharmacy package and provider ordering that can be set. It is important to set these based on local laws and regulations, as well as for IHS policy and whether the site is enabled for EPCS and for Surescripts.

Most parameters can be set at multiple levels, with the more specific levels generally overriding the less specific levels. For example, if a parameter can be set at the system and user settings, a user setting will override the setting at the system level for that user. Sites are encouraged to review the current settings at each level prior to setting or re-setting the parameters described here.

2.2.1 APSP AUTO RX SCHEDULE RESTRICT

This parameter controls which schedules can be transmitted through Surescripts. It is an existing parameter but prior to EPCS the parameter was not editable. It should only be edited after the site is approved for Surescripts transmission. This parameter should have at least a 1 included as schedule 1 drugs may not be prescribed by law. This parameter may be set at the division or system levels, as shown in Figure 2-4.

```
Select PARAMETER DEFINITION NAME: APSP AUTO RX SCHEDULE RESTRICT   Holds
restricted schedule codes.

APSP AUTO RX SCHEDULE RESTRICT may be set for the following:

      700 Division          DIV      [choose from INSTITUTION]
      800 System           SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 800 System 2017-DEMO-HQ.ABQ.IHS.GOV

Setting APSP AUTO RX SCHEDULE RESTRICT for System: 2017-DEMO-HQ.ABQ.IHS.GOV
List of schedule codes: 1// ?

Enter the schedule codes that are not available for eRx. (ie. 234).

List of schedule codes: 1//
```

Figure 2-4: APSP AUTO RX SCHEDULE RESTRICT

2.2.2 APSP AUTO RX CII PRESCRIBING

This parameter controls whether a site can create C-II orders in the EHR for internal or external pharmacies. It is an existing parameter but should be reviewed after EPCS is installed. This parameter may be set at the user, class, division, or system levels. An example setting is shown Figure 2-5.

```

Select PARAMETER DEFINITION NAME: APSP AUTO RX CII PRESCRIBING   Facility
allows CII prescribing

APSP AUTO RX CII PRESCRIBING may be set for the following:

    100 User           USR      [choose from NEW PERSON]
    200 Class          CLS      [choose from USER CLASS]
    700 Division       DIV      [choose from INSTITUTION]
    800 System         SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 800   System   2017-DEMO-HQ.ABQ.IHS.GOV

Setting APSP AUTO RX CII PRESCRIBING for System: 2017-DEMO-HQ.ABQ.IHS.GOV
Allow CII prescribing: YES//

```

Figure 2-5: APSP AUTO RX CII PRESCRIBING

2.2.3 APSP AUTO RX ERX OF CS II

This parameter controls whether a site can send C-II orders to Surescripts. It is an existing parameter but was not editable prior to EPCS. This parameter should only be edited after the site is approved and configured for Surescripts, including approval for CS orders. This parameter may be set at the user, division, or system levels. An example setting is shown in Figure 2-6.

```

Select PARAMETER DEFINITION NAME: APSP AUTO RX ERX OF CS II   Facility
allows eRx of CII medications

APSP AUTO RX ERX OF CS II may be set for the following:

    100 User           USR      [choose from NEW PERSON]
    700 Division       DIV      [choose from INSTITUTION]
    800 System         SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 800   System   2017-DEMO-HQ.ABQ.IHS.GOV

Setting APSP AUTO RX ERX OF CS II for System: 2017-DEMO-HQ.ABQ.IHS.GOV --
Allow eRx of CII medications: YES//

```

Figure 2-6: APSP AUTO RX ERX OF CS II

2.2.4 APSP CS II ORDER DATE MAX

This new parameter holds the number of days after the issue date or the earliest fill date (if available) that a C-II order can continue to be processed. There is no default for this parameter, so it is extremely important that sites review and set this appropriately before processing CS orders. The maximum value is 365 days. This parameter may be set at the division or system levels. If the pending order is older than this value, the pharmacy is not able to process the order and it must be discontinued. An example setting is shown in Figure 2-7.

```

Select PARAMETER DEFINITION NAME: APSP CS II ORDER DATE MAX      CS II MAX
ORDER DATE

APSP CS II ORDER DATE MAX may be set for the following:

      800 Division      DIV      [choose from INSTITUTION]
      900 System        SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 900 System 2017-DEMO-HQ.ABQ.IHS.GOV

- Setting APSP CS II ORDER DATE MAX for System: 2017-DEMO-HQ.ABQ.IHS.GOV -
Max age of CS II order: 365// ??

Parameter holds number of days that a CS II order is valid after written
date.

Max age of CS II order: 365//

```

Figure 2-7: APSP CS II ORDER DATE MAX

2.2.5 APSP CS II RX EXPIRE DAYS

This new parameter holds the number of days before a C-II prescription will expire. There is no default for this parameter, so it is extremely important that sites review and set this appropriately before processing CS orders. The maximum value is 365 days. This parameter can be set at the division and system levels. An example setting is shown in Figure 2-8.

```

Select PARAMETER DEFINITION NAME: APSP CS II RX EXPIRE DAYS Days that CS II
Rx Expires

APSP CS II RX EXPIRE DAYS may be set for the following:

      800 Division      DIV      [choose from INSTITUTION]
      900 System        SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 900 System 2017-DEMO-HQ.ABQ.IHS.GOV

- Setting APSP CS II RX EXPIRE DAYS for System: 2017-DEMO-HQ.ABQ.IHS.GOV -
Days to expire: 30// ??

Holds the number of days that a CS II prescription will expire from the
Issue date.

Days to expire: 30//

```

Figure 2-8: APSP CS II RX EXPIRE DAYS

2.2.6 BEHORX REQUIRE SUPERVISOR CS

This parameter controls which TIU user classes will have a supervisor set and displayed for ordering controlled substance medications. The supervisor will display on printed prescriptions, when the prescription is being processed on in-house prescriptions, in the message to Surescripts, and when viewing a prescription. Sites may use the existing user classes or create new ones as needed. This parameter can be set at the division and system levels.

Supervisors are designated in the CHIEF field of the SERVICE/SECTION file (#49). The user is then assigned to that Service/Section through their NEW PERSON file (#200) entry. Sites may create new Service/Section entries as needed. For example, if all mid-level providers at a site require a supervisor for prescribing CS medications and that supervisor is the same person for all, then the site could create a “MIDLEVEL PROVIDER” service/section, set the supervisor in the CHIEF field, and then assign that service to all the mid-level providers at the site. If only certain mid-level providers require a supervisor for CS medications, or if each mid-level requires a different supervisor, then multiple service/sections could be set up such as “MIDLEVEL – SMITH” and “MIDLEVEL – JONES” for mid-levels who will be supervised by Smith and Jones, respectively. Note that the Service/Section file and the CHIEF field will also have implications for sites who have notifications set to be forwarded to a supervisor after a set number of days. See the *ehr_0110.25o_EPCS_Supplemental_User_Guide* for an example of the SERVICE/SECTION set up. An example setting for BEHORX REQUIRE SUPERVISOR CS is shown in Figure 2-9.

```
Select PARAMETER DEFINITION NAME:  BEHORX REQUIRE SUPERVISOR CS  Require
Supervisor Name for CS

BEHORX REQUIRE SUPERVISOR CS may be set for the following:

      100 Division      DIV      [choose from INSTITUTION]
      200 System        SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 100  Division  INSTITUTION
Select INSTITUTION NAME: 2017 DEMO CLINIC  HEADQUARTERS WEST
ALBUQUERQUE      01      NM      8068

--- Setting BEHORX REQUIRE SUPERVISOR CS  for Division: 2017 DEMO CLINIC ---
Select Sequence: ?

Sequence  Value
-----  -----
5         NURSE PRACTITIONER

Select Sequence: 5

Sequence: 5//      5
User Class: NURSE PRACTITIONER//  NURSE PRACTITIONER
Select Sequence: 10
Are you adding 10 as a new Sequence? Yes// y  YES
```

```

Sequence: 10//      10
User Class: PHYSICIAN ASSISTANT
Select Sequence: ?

Sequence  Value
-----  -
5         NURSE PRACTITIONER
10        PHYSICIAN ASSISTANT

```

Figure 2-9: BEHORX REQUIRE SUPERVISOR CS

2.2.7 BEHORX ENABLE EARLIEST DATE

This new parameter controls the visibility of the Earliest Date field on the Outpatient Medication Ordering dialog. It may be set at the system or division level. An example setting is shown in Figure 2-10.

```

Select PARAMETER DEFINITION NAME: BEHORX ENABLE EARLIEST DATE      Enable
Earliest Date Feature

BEHORX ENABLE EARLIEST DATE may be set for the following:

      800 Division      DIV      [choose from INSTITUTION]
      900 System        SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 800  Division  INSTITUTION
Select INSTITUTION NAME: 2017 DEMO CLINIC      HEADQUARTERS WEST
ALBUQUERQUE      01      NM      8068

-- Setting BEHORX ENABLE EARLIEST DATE for Division: 2017 DEMO CLINIC --
Enable: YES//

```

Figure 2-10: BEHORX ENABLE EARLIEST DATE

2.2.8 BEHORX HARDCOPY AT SIGNING

This new parameter controls the availability of a check box in the signing dialog when CS meds are present and the user is EPCS enabled. The intention of this parameter is to set it for a user when there is a compelling reason for the provider to create a paper order for a CS Medication even though they are EPCS enabled (e.g., the user left their token at home or the user is locked out of their token), and then remove it when that reason is fulfilled or no longer applicable. It is not intended to be set for all users for all time and may *not* be used when a user's token is lost, stolen, or otherwise compromised. In these cases, the user's EPCS access should be inactivated in the Credentialing Component of EHR. The parameter may be set at the system, division, and user levels, though it is strongly recommended to be set at the user level only. An example setting is shown in Figure 2-11.

```

Select PARAMETER DEFINITION NAME: BEHORX HARDCOPY AT SIGNING      Allow
selection of Hardcopy at signing.

BEHORX HARDCOPY AT SIGNING may be set for the following:

      100 User           USR      [choose from NEW PERSON]
      800 Division      DIV      [choose from INSTITUTION]
      900 System        SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 100 User NEW PERSON
Select NEW PERSON NAME: EPCS, PROVIDER EDSCII-V PE

-- Setting BEHORX HARDCOPY AT SIGNING for User: EPCS, PROVIDER EDSCII-V ---
Allow selection of Hardcopy at signing: YES

```

Figure 2-11: BEHORX HARDCOPY AT SIGNING

2.2.9 BEHORX MAX DAYS SUPPLY CS

This new parameter controls the upper limit for days' supply of a dispensed CS medication. The range is 1–90 days' supply and definable for schedules 2 through 5. If a schedule is not defined, the max days' supply will default to 30. It may be set at the system and division levels. An example setting is shown in Figure 2-12.

```

Select PARAMETER DEFINITION NAME: BEHORX MAX DAYS SUPPLY CS      Maximum
Allowable Days Supply CS

BEHORX MAX DAYS SUPPLY CS may be set for the following:

      800 Division      DIV      [choose from INSTITUTION]
      900 System        SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 900 System 2017-DEMO-HQ.ABQ.IHS.GOV

- Setting BEHORX MAX DAYS SUPPLY CS for System: 2017-DEMO-HQ.ABQ.IHS.GOV -
Select Medication DEA Schedule (2-5): ?

Medication DEA Schedule (2-5) Value
-----
2                               7
3                               30
4                               30
5                               30

Select Medication DEA Schedule (2-5): 5

Medication DEA Schedule (2-5): 5// 5
Maximum Allowable Days Supply: 30//
Select Medication DEA Schedule (2-5):

```

Figure 2-12: BEHORX MAX DAYS SUPPLY CS

2.2.10 BEHORX PRINT FORMATS

This parameter determines the default print format the providers will see for each type of order, label, or receipt. The provider is able to change from the default as needed. This is an existing parameter but must be reviewed after EPCS installation because of significant changes made to the print formats to comply with EPCS regulations. Sites using customized formats are strongly encouraged to review the new EPCS formats and adjust any existing custom formats as needed. At minimum, the sites *must* add the REPRINT field to all existing CS print templates, and the DEA should be added if not already present.

Other potential changes include required clinical indication for gamma-hydroxybutyrate (GHB) medications, DEA X for detoxification, earliest fill date, and supervisor information if these types of orders might be issued. The sites may edit the delivered templates as well, though the software will not permit the removal of the REPRINT field. Sites who elect to use old templates or edit the new templates are encouraged to review the DEA regulations relating to required fields in Title 21 USC, part 1306.05, “Manner of issuance of prescriptions” at https://www.deadiversion.usdoj.gov/21cfr/cfr/1306/1306_05.htm, as well as any local or state regulations. Sites are ultimately responsible for ensuring all such regulations are met. As is already available, one site or Area may develop a regionally specific template, then export and share those with the other sites in the Area or region.

The new EPCS formats include:

- Prescription CII EPCS
- Prescription CII EPCS Spvsr
- Prescription C3-5 EPCS
- Prescription C3-5 EPCS Spvsr
- Order for Signature CII EPCS
- Order for Signature CII EPCS Spvsr
- Order for Signature C3-5 EPCS
- Order for Signature C3-5 EPCS Spvsr

The parameter may be set at the system, division, location, class, or user level. The parameter is set by print type. The designations are as follows, though only the Prescription and Order formats have been changed for EPCS:

- PC – Prescription C-II
- PF – Prescription C-III through V
- PN – Prescription non-CS
- OC – Order C-II

- OF – Order C-III through V
- ON – Order non-CS
- RC – Receipt C-II
- RN – Receipt non-C-II
- LC – Label C-II
- LN – Label non-C-II

An example setting is shown in Figure 2-13.

```

Select PARAMETER DEFINITION NAME: BEHORX PRINT FORMATS      Rx and label
format

BEHORX PRINT FORMATS may be set for the following:

    100 User          USR      [choose from NEW PERSON]
    200 Class         CLS      [choose from USR CLASS]
    300 Location      LOC      [choose from HOSPITAL LOCATION]
    700 Division      DIV      [choose from INSTITUTION]
    800 System        SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 800 System 2017-DEMO-HQ.ABQ.IHS.GOV

--- Setting BEHORX PRINT FORMATS for System: 2017-DEMO-HQ.ABQ.IHS.GOV ---
Select Format Type: ?

Format Type  Value
-----
OC           ORDER FOR SIGNATURE CII EPCS
OF           ORDER FOR SIGNATURE C3-5 EPCS
ON           ORDER FOR SIGNATURE (NON-CII) (SAMPLE) (NEW)
PC           PRESCRIPTION CII EPCS
PF           PRESCRIPTION C3-5 EPCS
PN           PRESCRIPTION (NON-CII) (SAMPLE) (NEW)
RC           RECEIPT (CII) (SAMPLE) (NEW)
RN           RECEIPT (NON-CII) (SAMPLE) (NEW)

Select one of the following:

    PC          PC
    PN          PN
    OC          OC
    ON          ON
    RC          RC
    RN          RN
    LC          LC
    LN          LN
    PF          PF
    OF          OF

Select Format Type: PC

Format Type: PC//      PC

```

```
Format: PRESCRIPTION CII EPCS// PRESCRIPTION CII EPCS
```

Figure 2-13: BEHORX PRINT FORMATS

2.2.11 BEHORX PRINT QUEUE C35

This parameter is no longer being used. The print queue will be turned on for all controlled substances that are not signed with two-factor authentication.

3.0 Pharmacy Processing

This section describes the steps in-house pharmacy staff will follow to process the EPCS medications ordered by the provider.

Unless otherwise specified, the term “order” refers to the item created by a prescribing user which has not yet been processed in the pharmacy package or has not been auto-finished, and the term “prescription” refers to the item after it has been processed or auto-finished.

Providers may order CS medications in two ways:

- A hard copy (HC), paper, signed-in-ink order:
 - Started in the EHR and then printed
 - Completely on paper with no portion already in the EHR or RPMS prior to pharmacy processing
- A digitally signed (DS) electronic prescription

Note: For prescribers who have access to the EHR system where the order will be filled, the orders should be entered in the EHR, even if they must then be printed and signed, to reduce transcription errors.

3.1 Processing Option Changes

EPCS does not add any new processing menus, but some existing menus and displays have been adjusted for EPCS. Most changes are to assist users in determining if an order is digitally signed or requires a separate, signed-in-ink hardcopy.

3.1.1 Complete Orders from OE/RR Changes

The **Complete Orders from OE/RR** menu option (Figure 3-1) has been adjusted to allow the user to limit the processing to only digitally signed orders.

```

Enter 'PA' to process orders by patients
    'RT' to process orders by route (mail/window)
    'PR' to process orders by priority
    'CL' to process orders by clinic
    'FL' to process flagged orders
or 'E' or '^' to exit

Select one of the following:

        PA      PATIENT
        RT      ROUTE
        PR      PRIORITY
        CL      CLINIC
        FL      FLAGGED
  
```

```

          DS          DIGITALLY SIGNED CS
          E           EXIT
Select By: (PA/RT/PR/CL/FL/DS/E): PATIENT// DS DIGITALLY SIGNED CS

```

Figure 3-1: Complete Orders from OE/RR menu option

After selecting **DS**, the user is prompted to select which schedule(s) to process (Figure 3-2).

```

          Select a schedule(s)

          Select one of the following:

          1          SCHEDULE II
          2          SCHEDULES III - V
          3          SCHEDULES II - V
          E          EXIT
Select Schedule(s): 3//

```

Figure 3-2: Select a schedule

Processing will then proceed as usual for this menu option, with the orders restricted based on the selections made by the user.

3.1.2 Complete OE/RR Orders LM Changes

There are few adjustments to the **Complete Pending Orders (CPO)** menu option, but new symbols have been added to allow the user to quickly identify HC and DS CS orders within the list.

Both types of orders will have a symbol immediately left of the patient name. There is a plus (+) symbol for the HC orders, and a dollar sign (\$) for the DS orders. A user can easily remember these symbols by considering that a HC order requires the electronic order plus the hard copy, and that a DS order has a DS-initialed symbol (dollar sign = digitally signed). The symbols are displayed in Figure 3-3.

```

Complete Pending Orders      Jul 26, 2018 11:36:13      Page: 38 of 39
Outpatient Pharmacy Pending Orders  Related Institution: ALL
Sorted by: Order Date  Restrict to locations: OFF
+Item--HRN----C-Patient-----DOB-----Order Date-----H
482  XXXX92  $DEMO, PATIENT BESIX-ONE  08/17/20XX  07/17/2018 14:07  M
483  XXXX92  DEMO, PATIENT BESIX-ONE  08/17/20XX  07/17/2018 14:07  M
484  XXXX92  $DEMO, PATIENT BESIX-ONE  08/17/20XX  07/17/2018 14:07  M
485  XXXX92  $DEMO, PATIENT BESIX-ONE  08/17/20XX  07/17/2018 14:07  M
486  XXXX92  DEMO, PATIENT BESIX-ONE  08/17/20XX  07/17/2018 14:07  M
487  XXXX92  $DEMO, PATIENT BESIX-ONE  08/17/20XX  07/17/2018 14:07  M
488  XXXX92  $DEMO, PATIENT BESIX-ONE  08/17/20XX  07/17/2018 14:07  M
489  XXXX22  DEMO, PATIENT FOUR      03/09/19XX  07/17/2018 14:28  D
490  XXXX29  +DEMO, PATIENT ALLNINE  04/30/19XX  07/19/2018 20:41  D
491  XXXX29  +DEMO, PATIENT ALLNINE  04/30/19XX  07/19/2018 20:41  D
492  XXXX14  +DEMO, PATIENT BEFIVE   01/18/19XX  07/24/2018 20:10  D

```

```

493   XXXX14   +DEMO,PATIENT BEFIVE           01/18/19XX  07/24/2018 20:10  D
494   XXXX93   $DEMO,PATIENT ALLSIX-ZERO        04/01/19XX  07/25/2018 09:12  D
+-----Enter ?? for more actions----->>>
PO   Process orders                    OP   Toggle Orders/Pts
TRL  (Toggle Loc Restrict)            CO   Add/Edit Comment
SO   Sort List                        RLE  Create/Edit Loc Restrict Lists
RF   Refresh List                    RLS  Select Location Restrict List
CPL  Check patient lock
Select Item(s): Next Screen//

```

Figure 3-3: Complete Pending Orders

3.2 Processing Orders

There is additional information displayed when processing or viewing orders. There will be differing processes used depending on whether you are processing a HC order or a DS order. In the following sections, it is assumed that the user has the appropriate security keys to process the orders fully.

3.2.1 Medication Profile Screen Changes

The symbols of plus sign (+) for HC and dollar sign (\$) for DS will also display on the patient's medication profile screen as seen in Figure 3-4. If the order is for a C-II medication, there may also be an earliest fill date (EFDT) which will be discussed later in this guide.

```

Medication Profile           Jul 26, 2018 13:47:12           Page:    1 of    2
DEMO,PATIENT ACFIVE-SIX
  PID: XXX-XX-9153   (HRN: XXXX82)           Ht (cm): 101.60 (01/27/2014)
  DOB: JUN 18,20XX (X)           Wt (kg):  15.60 (01/27/2014)
  SEX: MALE

                                     ISSUE  LAST REF DAY
-----
-----ACTIVE OTHER PHARMACY-----
  X513794  ACETAMINOPHEN/COD #3 TABLET           20 A  02-05  02-05   0   4
  X513862  APAP/CODEINE 120MG/12MG/5ML ELIXIR 120 A  03-12  03-12   0   5
-----DISCONTINUED-----
  3 513615  LORAZEPAM 1MG TAB                           30 DC 11-06 11-06   0  10
-----PENDING-----
  4 AMPHETAMINE/DEXTROAMPHET XR 20MG CAP
                                     QTY: 30           + ISDT: 06-11 EFDT: 06-11
  5 DIPHENOXYLATE/ATROPINE TAB           QTY: 24           $ ISDT: 06-11 REF:
  6 GUAIFENESIN/CODEINE 100MG/10MG/5ML SYRUP
                                     QTY: 118          $ ISDT: 06-11 REF:
+-----Enter ?? for more actions-----
PU  Patient Record Update                NO  New Order
PI  Patient Information                  SO  Select Order
Select Action: Next Screen//

```

Figure 3-4: Medication Profile

3.2.2 Provider Information

When processing or viewing orders, the provider information is expanded to include the provider address, DEA or VA number, and if needed, DEA X and Supervisor information. In general, the site address is used as the provider address, as that is the practice location. If the provider has no personal DEA number and is using a VA Number instead, the VA number is displayed as a suffix to the institutional DEA number and is clearly labeled as a VA Number.

A Provider using a VA number is shown in Figure 3-5.

```

Pending OP Orders (ROUTINE)   Nov 05, 2018 10:45:50           Page:   1 of   3
DEMO,PATIENT TWELVE                                     <A>
  PID: XXX-XX-5584   (HRN: XXXX07)                       Ht (cm): 142.24 (09/30/2015)
  DOB: APR 16,19XX (XX)                                   Wt (kg): 69.10 (09/30/2015)
(5) Patient Status: OUTPATIENT
(6)   Issue Date: OCT 25,2018                           (7) Fill Date: NOV 5,2018
(8)   Days Supply: 10                                    (9)   QTY (TABLET): 30
                                                    QTY DSP MSG: 6

  Provider ordered 0 refills
(10)  # of Refills: 0                                    (11)  Routing: WINDOW
(12)   Clinic: DEMO CLINIC
(13)   Provider: EPCS,PROVIDER ONE
        VA#: AS7654321-PE9XXX
        Site Address: 321 NORTH RIVER ROAD
                    ANYTOWN, NORTH DAKOTA 58123
(14)   Copies: 1
(15)   Remarks:
Enter a zero (0) to edit IHS specific fields.
+       Digitally Signed Order
BY Bypass          DC (Discontinue)          FL (Flag/Unflag)
ED (Edit)         FN Finish

```

Figure 3-5: Provider with a VA number shown concatenated to the institutional DEA number

A provider with a personal DEA number is shown in Figure 3-6.

```

Pending OP Orders (ROUTINE)   Nov 05, 2018 10:46:50           Page:   1 of   3
DEMO,PATIENT ONE
  PID: XXX-XX-5088   (HRN: XXXX14)                       Ht (cm): _____ (_____)
  DOB: DEC 26,19XX (XX)                                   Wt (kg): 98.40 (10/06/2016)
(5) Patient Status: OUTPATIENT
(6)   Issue Date: OCT 26,2018                           (7) Fill Date: NOV 5,2018
(8)   Days Supply: 2                                    (9)   QTY (TAB): 16
  Provider ordered 0 refills
(10)  # of Refills: 0                                    (11)  Routing: WINDOW
(12)   Clinic: DEMO CLINIC
(13)   Provider: EPCS,PROVIDER
        DEA#: AP000XXXX
        Site Address: 321 NORTH RIVER ROAD
                    ANYTOWN, NORTH DAKOTA 58123
(14)   Copies: 1
(15)   Remarks:
Enter a zero (0) to edit IHS specific fields.

```

```

NDC: 00603-2338-21
AWP: 0.421200      Unit Cost: 0.044900
+      Digitally Signed Order
BY Bypass          DC (Discontinue)      FL (Flag/Unflag)
ED (Edit)         FN Finish

```

Figure 3-6: Provider with a Personal DEA Number

If a provider is required to have supervisor information included (see Section 2.2.6), the provider's supervisor information is also included as shown in Figure 3-7.

```

Pending OP Orders (ROUTINE)   Nov 05, 2018 11:13:01      Page: 2 of 4
DEMO,PATIENT FIVE
  PID: XXX-XX-1232   (HRN: XXXX32)      Ht (cm): _____ (_____)
  DOB: DEC 31,19XX (XX)      Wt (kg): _____ (_____)
+-----+-----+-----+-----+-----+-----+-----+-----+-----+-----+
(5) Patient Status: OUTPATIENT
(6) Issue Date: OCT 24,2018      (7) Fill Date: NOV 5,2018
(8) Days Supply: 10      (9) QTY (TAB): 20
    Provider ordered 0 refills
(10) # of Refills: 0      (11) Routing: WINDOW
(12) Clinic: DEMO
(13) Provider: EPCS,PROVIDER TWO
    DEA#: AP098XXXX
    Site Address: 5300 Homestead RD NE
                ALBUQUERQUE, NEW MEXICO 87110
    Supervisor: EPCS,PROVIDER EDSCII-V PE4567890
(14) Copies: 1
(15) Remarks:
Enter a zero (0) to edit IHS specific fields.
+-----+-----+-----+-----+-----+-----+-----+-----+-----+-----+
BY Bypass          DC Discontinue      FL Flag/Unflag
ED Edit           FN Finish

```

Figure 3-7: Provider's Supervisor Information

3.2.3 Hard Copy Orders

Once the user selects a HC order, an indicator displays at the top of the order above line 1 and on the ribbon bar. The message in the ribbon bar may disappear as the user navigates through the order depending on the terminal type set for your RPMS session. The message above line 1 will remain and is visible whenever the user navigates to that portion of the order regardless of terminal type setting.

```

TEST,CAD ONE
  PID: XXX-XX-9919   (HRN: XXXX92)      Ht (cm): _____ (<A>_____)
  DOB: APR 22,19XX (XX)      Wt (kg): 79.38
(07/13/2011)
-----
Processing Hardcopy Printed Prescription
* (1) Orderable Item: DIAZEPAM TAB
  (2) Drug: DIAZEPAM 5MG TAB**

```

```

(3)      *Dosage: 10 (MG)
          Verb: TAKE
          Dispense Units: 2
          Noun: TABLETS
          *Route: ORAL
          *Schedule: QHS
(4) Pat Instruct: MCD
Provider Comments:
      Instructions: TAKE TWO TABLETS PO QHS
      SIG: TAKE TWO TABLETS MOUTH AT BEDTIME MCD
Clinical Indication: Recurrent manic episodes, moderate | F31.89

+-----Hardcopy Printed Prescription-----
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Next Screen//

```

Figure 3-8: Hardcopy Order

During processing, pharmacists must enter an electronic signature to verify that they have received the hard copy before processing the CS order. The RPMS output in Figure 3-9 shows the process of finishing the HC order. Note that when the user is typing in the Signature code, no indication of the input will be displayed on the screen.

```

Pending OP Orders (ROUTINE)   Jul 26, 2018 14:39:59   Page:   1 of   3
DEMO,PATIENT BEFIVE
  PID: XXX-XX-7255 (HRN: XXXX14)           Ht (cm): 187.33 (06/16/2016)
  DOB: JAN 18,19XX (XX)                   Wt (kg):  90.26 (06/16/2016)
-----
Order Checks:
Duplicate drug class order: AMPHETAMINE LIKE STIMULANTS (LISDEXAMFETAMINE
CAP,ORAL 10MG TAKE TWO (2) CAPSULES BY MOUTH EVERY MORNING [UNRELEASED])
  Overriding Provider: EPCS,PROVIDER EDNSCII-V

Processing Hardcopy Printed Prescription
*(1) Orderable Item: METHYLPHENIDATE PATCH
(2)      Drug: DAYTRANA 30MG/9HR PATCH
          Verb: APPLY
(3)      *Dosage: 1 PATCH
          *Route: TRANSDERMAL
          *Schedule: DY
(4) Pat Instruct: PUT ON FOR 9 HOURS THEN REMOVE FOR 15 HOURS AT A TIME.
Provider Comments:
+-----Hardcopy Printed Prescription-----
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Next Screen// FN Finish
Order requires Hardcopy Printed Prescription Do you want to Continue? Yes//
YES

Enter your Current Signature Code:   SIGNATURE VERIFIED

```

Figure 3-9: Finishing a hardcopy order

This action will be saved in the activity log (Figure 3-10) for the prescription.

```

Rx Activity Log                Feb 12, 2018 15:23:18                Page:    1 of    1
DEMO,PATIENT THREE-FOUR                                <A>
  PID: XXX-XX-6413   (HRN: XXXX62)                       Ht(cm): 166.37 (10/21/2016)
  DOB: JAN 8,19XX (XX)                                   Wt(kg):  89.58 (01/13/2017)
-----
Rx #: 513806   Original Fill Released: 02/07/18
Routing: Window   Finished by: EPCS,PHARMACIST PSDRPH

Activity Log:
#   Date       Reason           Rx Ref           Initiator Of Activity
=====
1   02/07/18   PATIENT INSTR. ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2   02/07/18   PKI/DEA           ORIGINAL         EPCS,PHARMACIST PSDRPH
Comments: Hard copy prescription was reviewed

-----Enter ?? for more actions-----

Select Action:Quit//

```

Figure 3-10: Activity Log

3.2.4 Digitally Signed Orders

Once the user selects a DS order, an indicator displays at the top of the order above line 1 and on the ribbon bar. The message in the ribbon bar may disappear as the user navigates through the order, depending on the terminal type set for your RPMS session. The message above line 1 will remain and is visible whenever the user navigates to that portion of the order, regardless of terminal type setting.

```

Pending OP Orders (ROUTINE)   Jan 31, 2018 12:46:28                Page:    1 of    3
DEMO,PATIENT BEONE-SEVEN                                <A>
  PID: XXX-XX-2480   (HRN: XXXX52)                       Ht(cm): 177.80 (02/08/2010)
  DOB: SEP 3,19XX (XX)                                   Wt(kg): 133.36 (01/23/2012)
-----
Processing Digitally Signed Order
* (1) Orderable Item: AMPHETAMINE/DEXTROAMPHETAMINE XR CAP,SA
  (2)      Drug: AMPHETAMINE/DEXTROAMPHET XR 10MG CAP
  (3)      *Dosage: 10 (MG)
           Verb: TAKE
           Dispense Units: 1
           Noun: CAPSULE
           *Route: ORAL
           *Schedule: DY
  (4) Pat Instruct: FOR ADHD
  Provider Comments:
           Instructions: TAKE ONE CAPSULE PO DY
           SIG: TAKE ONE CAPSULE BY MOUTH DAILY FOR ADHD
Clinical Indication: Shoulder pain M25.519
+-----Digitally Signed Order-----
BY Bypass                DC (Discontinue)                FL (Flag/Unflag)
ED (Edit)                FN (Finish)

```

```
Select Item(s): Next Screen//
```

Figure 3-11: Pending OP Orders

3.2.4.1 Auto-Discontinue

Each transmitted prescription includes a hash, which is set at signing and recalculated at processing. When the recalculated hash does not match the transmitted hash, the order is automatically discontinued.

When the hash does not match, a message displays to the pharmacist as shown in Figure 3-12. The software includes the term “tampered” in the message, but the hash can fail to match for many reasons, not all of them deliberate.

```
X513664      OXYCODONE/APAP 5MG/325MG TAB      1 A  12-05 12-05  0  1
-----PENDING-----
 4 IBUPROFEN 200MG TAB      QTY: 30      ISDT: 12-05> REF:  0
 5 IBUPROFEN 200MG TAB      QTY: 30      ISDT: 12-06> REF:  0
 6 NAPROXEN 500 MG TABLET  QTY: 20      ISDT: 12-18> REF:  0
 7 OXYCODONE/APAP 5MG/325MG TAB  QTY: 1      ISDT: 01-30 REF:  0
 8 OXYCODONE/APAP 5MG/325MG TAB  QTY: 1      ISDT: 01-31 REF:  0
+-----Enter ?? for more actions-----
PU Patient Record Update      NO New Order
PI Patient Information         SO Select Order
Select Action: Next Screen// 7
OXYCODONE/APAP 5MG/325MG TAB requires an FDA medication guide.
Please take appropriate action and print a patient medication guide if
necessary.
Enter RETURN to continue or '^' to exit: //
Order has been modified or tampered and will be discontinued
Press ENTER to continue: //
```

Figure 3-12: Auto-Discontinue

The ordering provider is notified if an order is discontinued, as shown in Figure 3-13. Processing this alert will open the patient’s ordering component so the provider can attempt the order again.

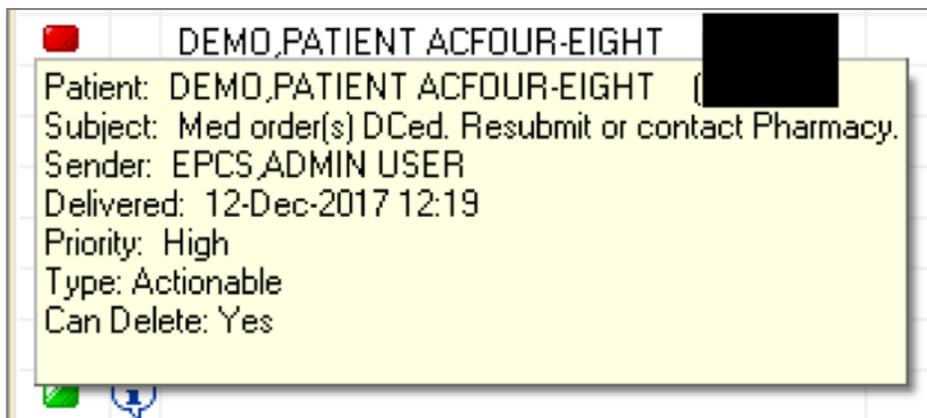


Figure 3-13: Provider Alert for discontinued medication

A message like the one shown in Figure 3-14 is sent to a specific MailMan group, who will monitor these events to ensure there is no breach or fraud incident. The group membership is maintained locally.

```

Subj: 8268 - DIGITALLY SIGNED NEW ORDER AUTO DISCONTINUED  [#4406]
11/29/17@17:23  14 lines
From: POSTMASTER  In 'IN' basket. Page 1  *New*
-----
Following order was auto discontinued when finishing a pending order due to
a tampered order
Division      : DEMO PHARMACY
CPRS Order #  : 492357
Patient       : DEMO,PATIENT TWO-NINE
Address       : 233 CR 4187
               ALBUQUERQUE, NM  87119
Drug          : DIAZEPAM 5MG TAB
Quantity      : 15
Provider      : EPCS,PROVIDER
VA#           : BU1916521-PE3XXX
  
```

Figure 3-14: Email Alert for Discontinued Medication

Occasionally the hash-checking software is unavailable. From the pharmacy perspective, DS orders cannot be processed until the issue is fixed. When pharmacists begin to process one of these orders, they will get a message to that effect, as shown in Figure 3-15 in the ribbon bar above the actions. The order will remain pending until the issue is resolved.

```

Medication Profile      Sep 18, 2018 16:45:23      Page: 1 of 1
DEMO,PATIENT SIX
  PID: XXX-XX-6440  (HRN: XXXX52)      Ht (cm): _____ (_____)
  DOB: AUG 15,19XX (XX)      Wt (kg): _____ (_____)
  SEX: FEMALE

-----ISSUE  LAST REF DAY-----
-----ACTIVE OTHER PHARMACY-----
  X513498      MORPHINE 60MG SA TAB      60 A 10-18 10-18  0 30
-----PENDING-----
  2 CLONAZEPAM 0.5MG TAB      QTY: 15      $ ISDT: 09-11 REF:
  3 FERROUS SULFATE 325MG TAB (RED)      QTY: 30      ISDT: 12-06> REF:
  1
  4 PREGABALIN 75MG CAP      QTY: 90      $ ISDT: 09-11> REF:
  5 TRAMADOL HCL 50MG TAB      QTY: 90      $ ISDT: 09-11 REF:
-----Outside Medications-----

-----Digitally Signed Order Failed Verification-----
PU Patient Record Update      NO New Order
PI Patient Information      SO Select Order
Select Action: Quit//
  
```

Figure 3-15: Order verification failure

3.2.4.2 Editing Starred Fields

The editing of a DS order within the outpatient pharmacy package is restricted. In general, more fields are considered not editable than in a hardcopy CS Order or non-CS order. Prior to EPCS, if a user edited a starred field – which include orderable item, dosage, route, and schedule – a new order was created. With EPCS, editing these fields is not allowed. As shown in Figure 3-16, the system will allow the user to attempt to edit the starred line item 3 since item 3 contains other elements that are editable. However, editing any portion of this item other than the verb or adding a limited duration (which is then not editable) is not allowed.

```
Select Item(s): Next Screen// 3

Possible SIG: TAKE 1 TABLET BY MOUTH EVERY 4 HOURS IF NEEDED FOR SEVERE
PAIN
                **MAY CAUSE DROWSINESS**
Available Dosage(s)
    1. 1 TABLET
    2. 2 TABLETS

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 TABLET// 2 2 TABLETS

You entered 2 TABLETS is this correct? Yes//  YES
VERB: TAKE// TAKE
ROUTE: ORAL// ORAL
Schedule: Q4H// (EVERY 4 HOURS)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
```

Figure 3-16: Editing starred fields

Attempting to edit a non-editable field generates an error message like the one in Figure 3-17. This message displays in the ribbon bar and so it may be difficult to see that no changes have been saved to the order.

```
Pending OP Orders (ROUTINE) Feb 01, 2018 18:20:48 Page: 1 of 3
DEMO, PATIENT ALLTHREE-ONE
  PID: XXX-XX-1956 (HRN: XXXX53) Ht (cm): 172.72 (06/22/2016)
  DOB: OCT 10,19XX (XX) Wt (kg): 83.01 (06/22/2016)
-----
* (1) Orderable Item: ACETAMINOPHEN/OXYCODONE TAB
  (2) Drug: OXYCODONE/APAP 5MG/325MG TAB
  Verb: TAKE
  (3) *Dosage: 1 TABLET
  *Route: ORAL
  *Schedule: Q4H
  (4) Pat Instruct: IF NEEDED FOR SEVERE PAIN **MAY CAUSE DROWSINESS**
  Provider Comments:
  Instructions: TAKE 1 TABLET PO Q4H
  SIG: TAKE 1 TABLET BY MOUTH EVERY 4 HOURS IF NEEDED FOR
  SEVERE PAIN **MAY CAUSE DROWSINESS**
  (5) Patient Status: OUTPATIENT
```

```

(6)      Issue Date: FEB 1,2018          (7) Fill Date: FEB 1,2018
(8)      Days Supply: 1                  (9)      QTY (TAB): 1
+-----Digitally Signed Order - No such changes allowed.-----
AC Accept          ED Edit          DC Discontinue
Select Item(s): Next Screen//

```

Figure 3-17: Editing a non-editable field

3.2.4.3 Editing Other Fields

Users may edit some other fields via the outpatient pharmacy package. However, there are additional restrictions on certain fields that are not present in non-DS orders. The **# of Refills** and **Provider** fields are not editable. The **QTY** and **Days' Supply** fields are editable but may only ever be decreased. These fields may not be increased, even if the user edited the quantity and then wants to return to the original quantity. The RPMS output in Figure 3-18 shows a quantity (QTY) edit. Attempting to edit Days' Supply results in a similar error message.

```

(8)      Days Supply: 1                  (9)      QTY (TAB): 1
        Provider ordered 0 refills
(10)     # of Refills: 0                (11)     Routing: WINDOW
(12)     Clinic: ASSISTANT
(13)     Provider: EPCS, PROVIDER EDSCII-V
        DEA#: PE456XXXX
        Site Address: 5300 Homestead RD NE
        ALBUQUERQUE, NEW MEXICO 87110
(14)     Copies: 1
(15)     Remarks:
Enter a zero (0) to edit IHS specific fields.
        NDC: 00406-0512-01
        AWP: 0.178400          Unit Cost: 0.029500
+-----Enter ?? for more actions-----
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Next Screen// 9
QTY ( TAB ) : 1// 2
Digitally Signed Order - QTY cannot be increased

```

Figure 3-18: Editing other fields

As is standard, everything done in RPMS is logged. Changes to the digitally signed prescriptions are logged, tagged with the logged-in user's name, and visible in the activity log. The activity log can also be searched in FileMan if necessary.

Note: It is advisable to add a comment to the prescription to indicate the reason for the change or to document the reasons in a note, in EHR, or both. Sites will decide which option will be used. Comments in prescriptions are less visible but are tied to the prescription in question. Notes in EHR are more visible but are not tied to the prescription. Using both methods requires a duplication of effort but covers both association with the order and discoverability.

```

Rx Activity Log                Feb 13, 2018 17:02:35                Page:    1 of    1
DEMO, PATIENT ALLTWO-FOUR                <A>
  PID: XXX-XX-6109  (HRN: XXXX73)                Ht (cm): 167.64  (04/07/2016)
  DOB: JUN 7,19XX (XX)                Wt (kg): 75.98  (10/04/2016)
-----
Rx #: 513819  Original Fill Released:
Routing: Mail                Finished by: EPCS, PHARMACIST
Activity Log:
#   Date           Reason           Rx Ref           Initiator Of Activity
=====
1   02/13/18       PATIENT INSTR. ORIGINAL
Comments: Patient Instructions Sent By Provider.
2   02/13/18       PKI/DEA         ORIGINAL         EPCS, PHARMACIST
Comments: DAYS SUPPLY: 15
3   02/13/18       PKI/DEA         ORIGINAL         EPCS, PHARMACIST
Comments: QTY: 5
-----Enter ?? for more actions-----
Select Action:Quit//

```

Figure 3-19: Activity Log

3.2.5 Pharmacy Entry of Order (Backdoor Entry)

The entry of controlled substance orders through the outpatient pharmacy package is still allowed. However, when entering these backdoor orders, there will still be a check of the provider's credentials as shown in Figure 3-20. Both the allowed schedules and the DEA/VA number validity are checked. You will not be able to select a provider who does not have the proper authority for the medication being entered. For prescribers who are not physically present in the facility and for whom the DEA expiration date is unknown, the system will assume the DEA is current if the DEA expiration date is not filled in.

```

QTY ( CAPSULE ) : 30// 30
COPIES: 1// 1
No refills allowed on Narcotics.
PROVIDER: EPCS, PROVIDER EDNSCIV-V
Provider not authorized to write Federal Schedule 2n prescriptions.
PROVIDER:

```

Figure 3-20: Backdoor entry of order

3.2.6 Earliest Fill Date and Multiple Orders

EPCS introduces the ability of providers to create C-II medication orders with a fill date in the future. In addition, it is now possible for a provider to create multiple orders for the same drug on the same day with different fill dates and have them remain pending until the desired fill date is reached.

3.2.6.1 Earliest Fill Date

The Earliest Fill Date field was introduced to allow providers to create orders that may not be filled until a future date. When enabled, the Earliest Fill Date will be present for C-II orders, defaulted to today. If the provider enters a future date for the earliest fill date, the pharmacy will not be able to process the order until the indicated date.

When a provider creates more than one order for the same medication in the same session, there are controls that force the selection of appropriate earliest fill dates based on the days' supply selected and the previously selected earliest fill date. Orders with a pick-up location of Clinic will be excluded from this check, as these orders are generally for items administered in the clinic or items dispensed by the provider directly. The pharmacist may not fill an order prior to the designated earliest fill date, as shown in Figure 3-21. In addition, the orders will not show in the **Complete OE/RR Orders LM** option until the Earliest Fill Date is reached. The **Earliest Fill Date** field may be used for a single order or in a series of orders as described here and in Section 3.2.6.2.

```

Medication Profile          Jul 26, 2018 18:49:05          Page:    1 of    1
DEMO, PATIENT TWO
  PID: XXX-XX-3710  (HRN: XXXX92)          Ht (cm): 73.66 (08/31/2015)
  DOB: JUN 14, 20XX (XX)          Wt (kg): 16.78 (12/20/2016)
  SEX: FEMALE

                                     ISSUE  LAST REF DAY
-----
-----ACTIVE-----
1 513919          ACETAMINOPHEN/COD #3 TABLET          12 E 04-10 04-26 0 4
-----PENDING-----

2 HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB
                                     QTY: 5          $ ISDT: 07-26 EFD: 08-04
-----Outside Medications-----

-----Enter ?? for more actions-----
PU Patient Record Update          NO New Order
PI Patient Information          SO Select Order
Select Action: Quit// 2
HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB requires an FDA medication guide.
Please take appropriate action and print a patient medication guide if
necessary.
Enter RETURN to continue or '^' to exit: //

```

```

Pending OP Orders (ROUTINE)   Jul 26, 2018 18:49:17       Page:    1 of    3
DEMO,PATIENT TWO
  PID: XXX-XX-3710   (HRN: XXXX92)                   Ht (cm): 73.66 (08/31/2015)
  DOB: JUN 14,20XX (XX)                               Wt (kg): 16.78 (12/20/2016)
-----
Processing Digitally Signed Order
*(1) Orderable Item: HYDROCODONE/APAP 5/325 TAB
  (2)           Drug: HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB
              Verb: TAKE
  (3)           *Dosage: 1 TABLET
              *Route: ORAL
              *Schedule: Q6H PRN
  (4) Pat Instruct: FOR PAIN
+-----Digitally Signed Order-----
BY Bypass           DC Discontinue           FL Flag/Unflag
ED Edit             FN Finish
Select Item(s): Next Screen// FN Finish
This RX cannot be filled until Aug 04, 2018

```

Figure 3-21: Earliest fill date

3.2.6.2 Multiple Orders

The EPCS system introduces the ability to create multiple orders for the same medication in a single session, with fill dates progressively into the future, and allow them to remain pending even as the current order is processed. Orders for the same medication that are not created in a single session will behave as normal, with any remaining pending orders being discontinued in order to process the current order. For the purposes of the RPMS software, a “single session” is the same calendar day. This functionality is closely tied to the **Earliest Fill Date** field (Section 3.2.6.1).

When processing a pending C-II order where multiple orders were created, there will be no prompt to discontinue any orders with the same issue date and with an earliest fill date later than today. The current order will be processed but the others will remain pending.

However, if duplicate pending orders for the same drug exist from previous issue dates, the user will be prompted to discontinue pending orders as is currently done.

3.2.7 Partial Fills

Partial fills of CS orders are no longer permitted in RPMS. The DEA regulations regarding partial fills could not be fulfilled with the currently available Partial function.

3.3 Verification Options

If a user without the PSDRPH key enters a backdoor CS medication order, the prescription will be left in a non-verified status. Other orders including non-CS medication orders may also be left in a non-verified status, depending on the site and user set up. Any non-verified CS prescriptions must be verified by a user with the PSDRPH key in order to print a label. There are several ways to verify a prescription, from verifying a single prescription using the patient profile, to batch verifying prescriptions in the main pharmacy options. There are also options to count or list non-verified prescriptions.

3.3.1 List Non-Verified Orders

The **Verification** menu option on the main pharmacist and pharmacy manger menus provides a user with the ability to list the non-verified prescriptions, though this option is not limited to CS orders.

The process is shown in Figure 3-22. From the **Verification** menu option in RPMS, select the **List Non-Verified Scripts** option. The “Sort By Patient or Clerk:” prompt displays with a default of Patient. Select the desired sort method.

The “Device” prompt displays. Choose a device to print or press Enter to display to the screen. The list will include a heading noting the date and time, the sort method, and the body of the report listing the prescriptions in an unverified state. Information present includes Patient name, Rx #, Issue date, Drug, and the Internal Entry Number (IEN) of the user who processed the order.

```
Select Pharmacist Menu Option: VERIFICATION

      List Non-Verified Scripts
      Non-Verified Counts
      Rx Verification by Clerk

Select Verification <TEST ACCOUNT> Option: LIST Non-Verified Scripts
Sort By Patient or Clerk: P// ATIENT
DEVICE: HOME//  TELNET

                                NON-VERIFIED PRESCRIPTIONS
                                AS OF NOV 6,2018@17:57:16
                                SORTED BY PATIENT
                                (# indicates Critical Drug Interaction)

Patient name                                     Page: 1
Rx #      Issued      Drug                                     Entry By
-----
      DEMO,PATIENT THREE-THREE
514015      08/23/18  ACETAMINOPHEN/COD #3 TABLET                 2543

      DEMO,PATIENT TWO-TWO
513859      03/05/18  LISINOPRIL 10MG TAB 1000'S                 2543
```

```
Press Return to continue:
```

Figure 3-22: List non-verified order

3.3.2 Non-Verified Counts

The process is shown in Figure 3-23. From the **Verification** menu option in RPMS, select the **Non-Verified Counts** option. The “Device” prompt displays. Press Enter to display the information to the screen or select a printer for a hard copy report.

```
Select Verification Option: non-verified Counts
DEVICE: HOME// TELNET

NON-VERIFIED PRESCRIPTION COUNTS
NOV 6,2018@18:01:03

TOTAL NUMBER OF NON-VERIFIED PRESCRIPTIONS : 2

NUMBER OF PATIENTS WITH ONE OR MORE NON-VERIFIED PRESCRIPTIONS : 2

(NOTE: Total number of patients listed here may not always equal the number
at the bottom, since some patients at the bottom may be counted more than
once, possibly having non-verified Rx's entered on different days.)

      # of                # of
      Date                Non-verified Rx's        Different Patients
      ----                -
03-05-18                1                        1
08-23-18                1                        1
                        ----
TOTAL                   2                        2

Enter RETURN to continue or '^' to exit:
```

Figure 3-23: Non-Verified Counts

3.3.3 Verify from the Verification Menu

The process is shown in Figure 3-24. From the Verification menu option in RPMS, select **Rx Verification by Clerk**. The “Enter Clerk Name:” prompt displays. Enter the name of the user who entered or processed the orders and was unable to verify them. Each order awaiting verification will be shown in turn, with an “EDIT” prompt. The available choices include Yes, No (default), and Profile. Select **Yes** to edit the prescription, **Profile** to review the patient’s medication profile, or **No** to verify the prescription. The PSDRPH key is required to use this option to verify a prescription.

```
Select Verification Option: RX Verification by Clerk

Enter Clerk Name: EPCS  EPCS,PHARMACIST      PE

HRX: 514015          PATIENT: DEMO,PATIENT THREE-THREE (XXXX42)
```

```

STATUS: Non-Verified
  DRUG: ACETAMINOPHEN/COD #3 TABLET
  NDC: 00603-2338-21 (0.421200) (0.082200)
  QTY: 20      4 DAY SUPPLY
  NDC: 00603-2338-21 (0.421200) (0.082200)
SUBSTITUTION : ALLOWED
DISCHARGE MEDICATION: NO
CASH DUE:
  SIG: TAKE 1 TABLET BY MOUTH EVERY 4 HOURS IF NEEDED FOR PAIN
  LATEST: 08/30/2018      # OF REFILLS: 0  REMAINING: 0
  ISSUED: 08/23/18      PROVIDER: EPCS, PROVIDER NEDSCII-V
  LOGGED: 08/23/18      CLINIC: DEMO
  EXPIRES: 02/23/19      DIVISION: 2017 DEMO PHARMACY
(8068)
  CAP: SAFETY      ROUTING: MAIL
  ENTRY BY: EPCS, PHARMACIST      VERIFIED BY:

ACTIVITY LOG:
#  DATE      REASON      RX REF      INITIATOR OF ACTIVITY
=====

Enter RETURN to continue or '^' to exit:

ACTIVITY LOG:
#  DATE      REASON      RX REF      INITIATOR OF ACTIVITY
=====

1  08/30/18  PATIENT INST.ORIGINAL
COMMENTS: Patient Instructions Sent By Provider.
2  08/30/18  PKI/DEA  ORIGINAL      EPCS, PHARMACIST
COMMENTS: Hard copy prescription was reviewed
PATIENT STATUS : OUTPATIENT      COPIES : 1
EDIT: (Y/N/P): N// O
Fill Priority: WAITING// WAITING

Print/Queue/Cpro/Med sheet/pWh/Hold/SUspend/Refill/Cancel///'^'=Exit: P//
rint Label
  DEMO, PATIENT THREE-THREE  112642
  TAKE 1 TABLET BY MOUTH EVERY 4
  HOURS IF NEEDED FOR PAIN
  Fill 1 of 1

  ACETAMINOPHEN/COD #3 TABLET
  Rx 514015 [00603-2338-21] MAMN#20 TAB
  EPCS, P. MD      8-30-18

Enter Clerk Name:
    
```

Figure 3-24: Verify from the Verification menu

3.3.4 Verify from the Medication Profile

The process is shown in Figure 3-25. From the patient's medication profile, select the non-verified prescription. Select the hidden option **VF** for verify. The prescription details show with the "EDIT" prompt. The available choices include Yes, No (default), and Profile. Select **Yes** to edit the prescription, **Profile** to review the patient's medication profile, or **No** to verify the prescription. The PSDRPH key is required to use this option to verify a prescription.

```

OP Medications (NON-VERIFIED) Nov 06, 2018 18:06:12      Page:    1 of    3
DEMO,PATIENT TWO-TWO
  PID: XXX-XX-6982  (HRN: XXXX92)                      Ht (cm): _____ (_____)
  DOB: MAR 25,19XX (XX)                                Wt (kg): 73.94 (11/17/2015)
-----
Rx #: 513859
(1) *Orderable Item: LORAZEPAM TAB
(2)      CMOF Drug: LORAZEPAM 0.5MG TAB
(3)      *Dosage: 0.5 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL
          *Schedule: DAILY
(4) Pat Instructions: FOR ANXIETY
          SIG: TAKE ONE (1) TABLET BY MOUTH DAILY FOR ANXIETY
Clinical Indication:
(5) Patient Status: OUTPATIENT
(6)      Issue Date: 03/05/18                          (7) Fill Date: 03/05/18
+-----Enter ?? for more actions-----
DC  Discontinue          PR  (Partial)                RL  (Release)
ED  Edit                 RF  (Refill)                 RN  (Renew)
Select Action: Next Screen// VF  VF

HRX: 513859          PATIENT: DEMO,PATIENT TWO-TWO (XXXX92)
STATUS: Non-Verified
      DRUG: LORAZEPAM 0.5MG TAB
      NDC: 00378-2321-01 (.01449) (.0114)
      QTY: 30      30 DAY SUPPLY
      NDC: 00378-2321-01 (.01449) (.0114)
SUBSTITUTION :
DISCHARGE MEDICATION:
CASH DUE:
      SIG: TAKE ONE (1) TABLET BY MOUTH DAILY FOR ANXIETY
      LATEST: 03/05/2018          # OF REFILLS: 0  REMAINING: 0
      ISSUED: 03/05/18           PROVIDER: EPCS, PROVIDER EDSCII-V
      LOGGED: 03/05/18          CLINIC: NOT ON FILE
      EXPIRES: 03/06/19         DIVISION: 2017 DEMO PHARMACY
(8068)
      CAP: SAFETY                ROUTING: WINDOW
      ENTRY BY: EPCS,PHARMACIST  VERIFIED BY:

PATIENT STATUS : OUTPATIENT          COPIES : 1
EDIT: (Y/N/P): N// O

Medication Profile      Nov 06, 2018 18:06:26      Page:    1 of    2

```

```

DEMO,PATIENT TWO-TWO
  PID: XXX-XX-6982 (HRN: )                Ht (cm): _____ (_____)
  DOB: MAR 25,19XX (XX)                   Wt (kg): 73.94
(11/17/2015)
  SEX: FEMALE

                                           ISSUE  LAST REF DAY ----
-----
-----ACTIVE-----
1 513859          LORAZEPAM 0.5MG TAB                30 A> 03-05 03-05  0 30
-----PENDING-----
4 ACETAMINOPHEN/COD #3 TABLET          QTY: 10          + ISDT: 01-26 REF:
5 APAP/CODEINE 120MG/12MG/5ML ELIXIR    QTY: 120         + ISDT: 01-22 REF:
+-----Enter ?? for more actions-----
PU Patient Record Update                 NO New Order
PI Patient Information                    SO Select Order Select Action:
Next Screen// QUIT

Fill Priority: WAITING// WAITING

Print/Queue/Cpro/Med sheet/pWh/Hold/SUspend/Refill/Cancel///'^'=Exit: P//
rint Label
      DEMO,PATIENT TWO-TWO          112492
      TAKE ONE (1) TABLET BY MOUTH
      DAILY FOR ANXIETY
                                Fill 1 of 1

      LORAZEPAM 0.5MG TAB
      Rx 513859 [00378-2321-01] PE #30 TAB
      EPCS,P. MD                    3-05-18

```

Figure 3-25: Verify from the medication profile

3.4 Viewing Prescriptions

The process is shown in Figure 3-26. From the **Rx (Prescriptions)** option, select **VIEW PRESCRIPTIONS**. The “VIEW PRESCRIPTION” prompt displays. Enter the prescription number and press Enter to view the prescription details. The full prescription details including the log information displays on successive screens. No edits or other processing may occur from this screen. The same provider information that appears in the processing screens will be shown here.

```

Select Rx (Prescriptions) Option: VIEW Prescriptions

VIEW PRESCRIPTION: 513860          OXYCODONE/APAP 5MG/325MG TAB          00406-0512-
01
Rx View (Expired)                  Nov 08, 2018 16:07:15          Page: 1 of 5
DEMO,PATIENT ACNINE-ZERO          <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-2665 (HRN: XXXX62)    Ht (cm): _____ (_____)
  DOB: DEC 16,19XX (XX)             Wt (kg): _____ (_____)
-----
      Rx #: 513860
      Orderable Item: ACETAMINOPHEN/OXYCODONE TAB
      Drug: OXYCODONE/APAP 5MG/325MG TAB
      NDC: 00406-0512-01

```

```

BENCHMARK PRICE: 0.178400    UP: 0.029500
TRIPPLICATE #:
SUBSTITUTION: ALLOWED
DISCHARGE MEDICATION: NO
CASH DUE:
  Verb: TAKE
  *Dosage: 1 TABLET
  *Route: ORAL
  *Schedule: Q4H
Patient Instructions: IF NEEDED FOR SEVERE PAIN **MAY CAUSE DROWSINESS**
  SIG: TAKE 1 TABLET BY MOUTH EVERY 4 HOURS IF NEEDED FOR
        SEVERE PAIN **MAY CAUSE DROWSINESS**
+-----Digitally Signed Order-----
Select Action:Next Screen//    NEXT SCREEN
Rx View (Expired)              Nov 08, 2018 16:07:24          Page:    2 of    5
DEMO,PATIENT ACNINE-ZERO      <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-2665 (HRN: XXXX62)          Ht (cm): _____ (_____)
  DOB: DEC 16,19XX (XX)                  Wt (kg): _____ (_____)
+-----+
Clinical Indication: Chart evaluation by healthcare professional |    Z02.9

Patient Status: OUTPATIENT
  Issue Date: 03/01/18                    Fill Date: 03/06/18
  Last Fill Date: 03/06/18 (Window)
  Last Release Date:                      Lot #:
  Expires: 09/01/18                       MFG:
  Days Supply: 1                           QTY (TAB): 1
  # of Refills: 0                          Remaining: 0
  Provider: EPCS,PROVIDER
  DEA#: AP123XXXX                          DEA X#: XK234XXXX
  Site Address: 5300 Homestead RD NE
        ALBUQUERQUE, NEW MEXICO 87110
  Routing: Window
  Copies: 1
  Method of Pickup:
+-----+-----Enter ?? for more actions-----
Select Action:Next Screen//    NEXT SCREEN
Rx View (Expired)              Nov 08, 2018 16:07:34          Page:    3 of    5
DEMO,PATIENT ACNINE-ZERO      <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-2665 (HRN: XXXX62)          Ht (cm): _____ (_____)
  DOB: DEC 16,19XX (XX)                  Wt (kg): _____ (_____)
+-----+
Clinic: DEMO
Division: 2017 DEMO PHARMACY (8068)
Pharmacist:
Remarks:
Finished By: EPCS,PHARMACIST
Entry By: EPCS,PROVIDER                    Entry Date: 03/01/18 12:01:50

Original Fill Released:          Routing: Window

Refill Log:
#   Log Date   Refill Date   Qty           Routing   Lot #       Pharmacist
=====
There are NO Refills For this Prescription

Partial Fills:
    
```

```

#   Log Date   Date      Qty          Routing   Lot #       Pharmacist
+-----Enter ?? for more actions-----
Select Action:Next Screen//      NEXT SCREEN
Rx View (Expired)                 Nov 08, 2018 16:07:36      Page:    4 of    5
DEMO,PATIENT ACNINE-ZERO          <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-2665   (HRN: XXXX62)      Ht (cm): _____ (_____)
  DOB: DEC 16,19XX (XX)                Wt (kg): _____ (_____)
+-----+
=====
There are NO Partial for this Prescription

Activity Log:
#   Date      Reason          Rx Ref          Initiator Of Activity
=====
1   03/06/18   PATIENT INSTR. ORIGINAL
Comments: Patient Instructions Sent By Provider.

Label Log:
#   Date      Rx Ref          Printed By
=====
There are NO Labels printed.

ECME Log:
#   Date/Time      Rx Ref          Initiator Of Activity
+-----Enter ?? for more actions-----
Select Action:Next Screen//      NEXT SCREEN
Rx View (Expired)                 Nov 08, 2018 16:07:39      Page:    5 of    5
DEMO,PATIENT ACNINE-ZERO          <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-2665   (HRN: XXXX62)      Ht (cm): _____ (_____)
  DOB: DEC 16,19XX (XX)                Wt (kg): _____ (_____)
+-----+
=====
There's NO ECME Activity to report

-----Enter ?? for more actions-----
Select Action:Quit//      QUIT

VIEW PRESCRIPTION:

```

Figure 3-26: Viewing prescriptions

3.5 Printing Prescriptions – VA Laser Labels

Printed labels that use the VA Laser label format are slightly altered for EPCS. The portion of the laser label document that has the Pharmacy fill and patient fill sections will have a designation of whether the order had been digitally signed. This designation will **not** display on the portion that affixes to the bottle. Figure 3-27 and Figure 3-28 show examples of the designations.

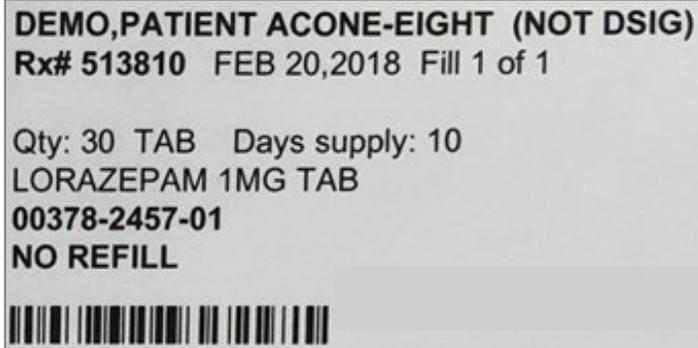


Figure 3-27: Not digitally signed

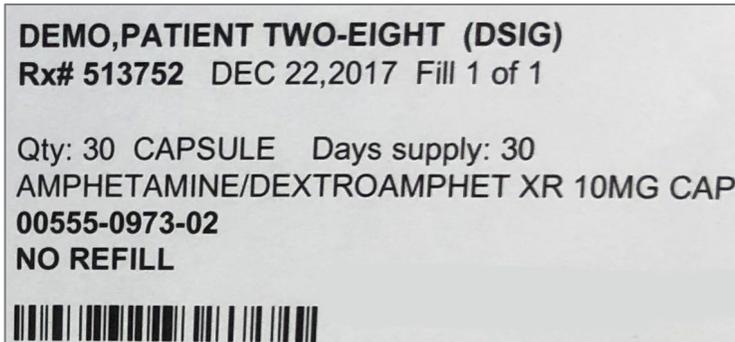


Figure 3-28: Digitally signed

4.0 Supervisor Functions

EPCS regulations require that access to functions such as deleting orders and prescriptions be limited to authorized personnel only. The site should review the assignment of the PSO MANAGER menu option within the facility and any menu modifications that were done locally.

4.1 Deleting Orders or Prescriptions

The Outpatient Pharmacy Suite Supervisor menu includes the **PSO RXDL Delete a Prescription** option. This allows a user to logically delete a prescription from view, though there remains a record of the prescription and the actions taken on it, including the deletion. The process of deleting a prescription is shown in Figure 4-1.

```

Select Supervisor Functions Option: DElete a Prescription

DELETE PRESCRIPTION: 513820          LORAZEPAM 0.5MG TAB          00378-2321-01
Rx View (Expired)          Dec 03, 2018 19:22:27          Page:    1 of    5
DEMO,PATIENT ONE
  PID: XXX-XX-7062  (HRN: XXXX82)          Ht (cm) : _____ (_____)
  DOB: OCT 24,19XX (XX)          Wt (kg) : _____ (_____)

-----

Rx #: 513820
Orderable Item: LORAZEPAM TAB
CMOP Drug: LORAZEPAM 0.5MG TAB
NDC: 00378-2321-01
BENCHMARK PRICE: .075    UP: .0136
TRIPPLICATE #:
SUBSTITUTION: ALLOWED
DISCHARGE MEDICATION:
CASH DUE:
  *Dosage: 0.5MG
  Verb: TAKE
Dispense Units: 1
  Noun: TABLET
  *Route: ORAL
  *Schedule: TID PRN
Patient Instructions: FOR ANXIETY
+-----Enter ?? for more actions-----

Select Action:Next Screen//    NEXT SCREEN

Rx View (Expired)          Dec 03, 2018 19:22:30          Page:    2 of    5
DEMO,PATIENT ONE
  PID: XXX-XX-7062  (HRN: XXXX82)          Ht (cm) : _____ (_____)
  DOB: OCT 24,19XX (XX)          Wt (kg) : _____ (_____)
+-----
SIG: TAKE ONE (1) TABLET BY MOUTH THREE TIMES A DAY IF
NEEDED
FOR ANXIETY
Clinical Indication:

```

```

Patient Status: OUTPATIENT
Issue Date: 02/13/18           Fill Date: 02/13/18
Last Fill Date: 02/13/18 (Window)
Last Release Date: 02/13/18     Lot #:
Expires: 08/16/18             MFG:
Days Supply: 10                QTY (TAB): 10
# of Refills: 3                Remaining: 3
Provider: EPCS, PROVIDER EDSCII-V
DEA#: PE456XXXX
Site Address: 5300 Homestead RD NE
ALB, NEW MEXICO 87110
Routing: Window

+-----Enter ?? for more actions-----+

Select Action:Next Screen//      NEXT SCREEN

Rx View (Expired)                Dec 03, 2018 19:22:32      Page:      3 of      5
DEMO, PATIENT ONE
PID: XXX-XX-7062 (HRN: XXXX82)      Ht (cm): _____ (_____)
DOB: OCT 24,19XX (XX)                Wt (kg): _____ (_____)

+-----+
Copies: 1
Method of Pickup:
Clinic: Not on File
Division: 2017 DEMO PHARMACY (8068)
Pharmacist: EPCS, PROVIDER RPH
Remarks:
Finished By: EPCS, PROVIDER RPH
Entry By: EPCS, PROVIDER RPH          Entry Date: 02/13/18 18:26:50

Original Fill Released: 02/13/18      Routing: Window

Refill Log:
# Log Date Refill Date Qty Routing Lot # Pharmacist
=====
There are NO Refills For this Prescription

+-----Enter ?? for more actions-----+

Select Action:Next Screen//      NEXT SCREEN

Rx View (Expired)                Dec 03, 2018 19:22:34      Page:      4 of      5
DEMO, PATIENT ONE
PID: XXX-XX-7062 (HRN: XXXX82)      Ht (cm): _____ (_____)
DOB: OCT 24,19XX (XX)                Wt (kg): _____ (_____)

+-----+
Partial Fills:
# Log Date Date Qty Routing Lot # Pharmacist
=====
There are NO Partial for this Prescription

Activity Log:
# Date Reason Rx Ref Initiator Of Activity
    
```

```

=====
1  02/13/18  PATIENT INSTR. ORIGINAL
Comments: Patient Instructions Sent By Provider.

Label Log:
#   Date           Rx Ref           Printed By
=====
1  02/13/18  ORIGINAL           EPCS, PROVIDER RPH
Comments: From RX number 513820

+-----Enter ?? for more actions-----

Select Action:Next Screen//  NEXT SCREEN

Rx View (Expired)           Dec 03, 2018 19:22:36           Page: 5 of 5
DEMO, PATIENT ONE
  PID: XXX-XX-7062  (HRN: XXXX82)           Ht (cm): _____ (_____)
  DOB: OCT 24,19XX (XX)           Wt (kg): _____ (_____)
=====

ECME Log:
#   Date/Time           Rx Ref           Initiator Of Activity
=====
There's NO ECME Activity to report

-----Enter ?? for more actions-----

Select Action:Quit//  QUIT

The Original Fill has already been released for Rx # 513820
Drug: LORAZEPAM 0.5MG TAB           DEMO, PATIENT ONE

Return this fill to stock and delete the prescription? N// YES

  Returning Medication to Stock..

Comments: this is a test of the delete function
Rx # 513820 Returned to Stock.

  Deleting prescription..

Nature of Order: SERVICE CORRECTION//  S
Comments: Per Pharmacy Request Replace
...PRESCRIPTION #513820 MARKED DELETED!!

DELETE PRESCRIPTION:
    
```

Figure 4-1: Deleting Orders or Prescriptions

4.2 Editing a Provider

The Outpatient Pharmacy Suite Supervisor menu includes the PSO PROVIDER EDIT option. This option allows a user to view and edit provider information such as the DEA number, the VA number, authorized schedules, the provider's address, the provider class, and many others.

Once the site is enabled for EPCS, the preferred method of editing many of these fields is the EHR EPCS Credentialing component. This component may be used to edit providers even if they are not currently enabled for EPCS. However, the PSO PROVIDER EDIT option may still be used for providers who are not yet enabled or for sites which are not yet EPCS sites, or for adding non-IHS (outside) providers for whom your pharmacy may fill written prescriptions.

With the EPCS release, the editing of certain fields must be more tightly controlled. The PSO PROVIDER EDIT option will no longer display certain fields when the user is attempting to edit these fields for an EPCS provider at an EPCS-enabled site. The following fields no longer display or are available to edit once a provider is EPCS enabled: **DEA#**, **DEA Expiration Date**, **VA#**, **DEA X#**, and all the schedule fields.

The RPMS outputs in Figure 4-2 and Figure 4-3 compare the available fields for a non-EPCS-enabled provider and an EPCS-enabled provider at the same site.

Provider Is Not EPCS Enabled:

```
Select Provider: EPCS, PROVIDER NOTENABLED      PNE
Provider: EPCS, PROVIDER NOTENABLED

AUTHORIZED TO WRITE MED ORDERS: YES    DEA#: PE162XXXX
PROVIDER CLASS: MD                      PROVIDER TYPE: FULL TIME

FAX NUMBER: 555-123-1234

NON-VA PRESCRIBER:
TAX ID:
EXCLUSIONARY CHECK PERFORMED:
DATE EXCLUSIONARY LIST CHECKED:
ON EXCLUSIONARY LIST:
AUTHORIZED TO WRITE MED ORDERS: YES//
DEA#: PE562XXXX//
DEA EXPIRATION DATE: MAY 1, 2019//
VA#:
DEA X#:
SCHEDULE II NARCOTIC: Yes//
SCHEDULE II NON-NARCOTIC: Yes//
SCHEDULE III NARCOTIC: Yes//
SCHEDULE III NON-NARCOTIC: Yes//
SCHEDULE IV: Yes//
SCHEDULE V: Yes//
INACTIVE DATE:
PROVIDER CLASS: MD//
PROVIDER TYPE: FULL TIME//
```

```

REQUIRES COSIGNER:
REMARKS:
STREET ADDRESS 1:
STREET ADDRESS 2:
STREET ADDRESS 3:
CITY:
STATE:
ZIP CODE:
PHONE (HOME):
OFFICE PHONE:
PHONE #3:
PHONE #4:
FAX NUMBER: 555-123-1234//
ROOM:
EMAIL ADDRESS: TEST.FAKE@NOTREAL.EMAIL Replace

```

Figure 4-2: Editing a non-EPCS-enabled provider

Provider Is EPCS Enabled:

```

Select Provider:  EPCS, PROVIDER ENABLED      PEE
Provider: EPCS, PROVIDER ENABLED

  AUTHORIZED TO WRITE MED ORDERS: YES    DEA#: AN798XXXX
  PROVIDER CLASS: MD                      PROVIDER TYPE: FULL TIME
  DETOX/MAINTENANCE ID NUMBER: XN298XXXX

  FAX NUMBER: 555-123-1212

NON-VA PRESCRIBER:
TAX ID:
EXCLUSIONARY CHECK PERFORMED:
DATE EXCLUSIONARY LIST CHECKED:
ON EXCLUSIONARY LIST:
AUTHORIZED TO WRITE MED ORDERS: YES//
INACTIVE DATE:
PROVIDER CLASS: MD//
PROVIDER TYPE: FULL TIME//
REQUIRES COSIGNER:
REMARKS:
STREET ADDRESS 1:
STREET ADDRESS 2:
STREET ADDRESS 3:
CITY:
STATE:
ZIP CODE:
PHONE (HOME):
OFFICE PHONE:
PHONE #3:
PHONE #4:
FAX NUMBER: 555-123-1212//
ROOM:
EMAIL ADDRESS: TEST.FAKE2@NOTREAL.EMAIL Replace

```

Figure 4-3: Editing an EPCS-enabled provider

5.0 Reports

There are many new and revised reports available for EPCS. The available reports are outlined in the sections that follow.

Some reports are mandated by regulation, while others are based on IHS policies and procedures. These reports also contain personally identifiable information as well as protected health information, so access is restricted by security key. Reports are in two general locations: The IHS-Specific Pharmacy Options (PIHS) and the RPMS-EHR Configuration Master Menu (BEH). In some cases, the reports appear in both locations.

It is important to note that while the CSM report gained some new functionality, the actual output of that report is not sufficient for the regulatory requirements and is not considered an official “EPCS report” here. The changes to the CSM report are listed at the end of this section.

The EPCS report related PIHS menu option structure is as follows, with security keys noted:

- PIHS: IHS-Specific Pharmacy Options
 - EPCS: EPCS Pharmacy Reports... (locked with PSDRPH)
 - CSO: Controlled Substance Order Report
 - CSA: Controlled Substance Audit Report
 - IND: Individual Dig Sig Order Export (locked with PSDRPH)
 - PAL: EPCS Pharmacy Audit Log Summary (locked with PSDRPH)
 - RXE: Pharmacy Dig Sig RX Export (locked with PSDRPH)

The EPCS report related BEH menu option structure is as follows, with security keys noted:

- BEH: RPMS-EHR Configuration Master Menu (locked with BEHOZMENU)
 - EPCS IHS EPCS Main Menu
 - AUD: EPCS Audit Reports (Locked with BEHOZEPCSREPORT)
 - PAR: EPCS Ad hoc Provider Audit Report (locked with BEHOZEPCSREPORT)
 - PPI: EPCS Provider Profile Integrity Report (locked with BEHOZMENU)
 - ALS: EPCS Audit Log Summary (locked with BEHOZMENU)
 - PIR: EPCS Provider Profile Integrity Mismatch Report (locked with BEHOZMENU)

- PCR: EPCS Provider Certificate Name Report (locked with BEHOZMENU)
- PHAR EPCS Pharmacy Reports (locked with BEHOZEPCSREPORT)
 - CSO: Controlled Substance Order Report
 - CSA: Controlled Substance Audit Log Report
 - PAL: EPCS Audit Log Summary (locked with BEHOZMENU)
 - VAL: EPCS Validation Reports
 - CFG: Provider Incomplete Configuration
 - DEX: DEA X List
 - DUP: Duplicate VA Numbers
- CONF EPCS Configuration Menu: (locked with OREPCSSITE)
 - CFGC Check Provider EPCS Configuration
- EXP: EPCS Export Reports: (locked with BEHOZEPCSREPORT)
 - AD: EPCS Ad hoc Provider Order Export
 - ORD: Export Orders for Provider
 - RX: Digitally Signed Rxs Export

5.1 Controlled Substance Order Report

The **Controlled Substance Order Report (CSO)** option shows orders written by one, multiple, or all providers over a selected date range. This report retrieves its data from the ORDER DEA ARCHIVE INFO file, which is also the file used to run the provider's monthly report. It does not run off the ORDER (100) file or the PRESCRIPTION (52) file. The report is intended for printing or browsing on screen. It is pre-paginated and 80 columns wide. An example report is shown in Figure 5-1.

```
Controlled Substance Orders Report

*** Date Range Selection ***
Begin with DATE: DEC 03, 2018//
End with DATE: DEC 03, 2018//

Select one of the following:

1          C-II
2          C-II through C-V
3          C-III through C-V

Drug Class Types: 2//   C-II through C-V

Select one of the following:

1          One Provider
2          Multiple Providers
```

```

3          All Providers

Prescriber Selection: 1// 3 All Providers

Select one of the following:

1          Drug Name
2          Sign Date
3          Patient

Enter response: // 1 Drug Name
Include TEST Patients? No// YES
DEVICE: HOME// TELNET

Provider Controlled Substance Orders. Run:12/04/2018 10:15
Report Criteria:
  Inclusive Dates: 12/03/2018 to 12/03/2018
  Pharmacy Division: All
  Drug Class: C-II through C-V
  Providers: ALL
  Sorted by: Drug Name
  Test Pts: Included
  Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)
Report contains 5 pages

Page 1 of 5
Press Return to continue or '^' to Halt:
SENSITIVE INFORMATION
Signed DatePatient Name          HRN    DOB          Drug
QuantPharmacy                    Back Door Order
SIG

Provider: EPCS, PROVIDER EDNSCII-V
12/03/2018 DEMO,PATIENT BEFIVE    XXXX14  01/18/19XX  DAYTRANA 30MG/9HR
PATC
30 Internal
SIG: APPLY ONE (1) PATCH TO CLEAN NON-HAIRY AREA ON THE SKIN DAILY
12/03/2018 DEMO,PATIENT ALLNINE  XXXX29  04/30/19XX  DEXMETHYLPHENIDATE XR
30 Internal
SIG: TAKE ONE (1) TABLET BY MOUTH EVERY MORNING

Provider: EPCS, PROVIDER EDNSCIII-V
12/03/2018 DEMO,PATIENT ACONE-NI  XXXX76  03/11/19XX  ACETAMINOPHEN/COD
#3 T
20 Test Pharmacy 3
SIG: TAKE ONE (1) TABLET BY MOUTH EVERY 4 HOURS AS NEEDED
12/03/2018 DEMO,PATIENT ACONE-SE  XXXX56  12/15/19XX  ACETAMINOPHEN/COD
#3 T
20 Internal

Page 2 of 5
Press Return to continue or '^' to Halt:
SENSITIVE INFORMATION
Signed DatePatient Name          HRN    DOB          Drug
QuantPharmacy                    Back Door Order
SIG

SIG: TAKE ONE (1) TABLET APAP/CODEINE 300MG/30MG TAB BY MOUTH EVERY 6
    
```

HOURS
 12/03/2018 DEMO,PATIENT ACONE-SE XXXX56 12/15/19XX
 ASA/BUTALBITAL/CAFFEIN
 30 Internal
 SIG: TAKE 1-2 CAPSULES ASA/BUTALBITAL/CAFFEINE CAP BY MOUTH EVERY 4
 HOURS
 12/03/2018 DEMO,PATIENT ACNINE-Z XXXX62 12/16/19XX
 ASA/BUTALBITAL/CAFFEIN
 30 Internal
 SIG: TAKE 1-2 CAPSULES ASA/BUTALBITAL/CAFFEINE CAP BY MOUTH EVERY 4
 HOURS

Page 3 of 5

Press Return to continue or '^' to Halt:

SENSITIVE INFORMATION

Signed Date	Patient Name	HRN	DOB	Drug	Back Door Order
Quant	Pharmacy				

SIG

2/03/2018	DEMO,PATIENT ALLFOUR-	XXXX91	07/15/19XX	LORAZEPAM 0.5MG TAB	
20	Test000 Pharmacy Store		10.6		

Provider: EPCS, PROVIDER EDNSCIV-V
 No Data Found for Requested Date Range

Provider: EPCS, PROVIDER EDSCIII-V
 No Data Found for Requested Date Range

Page 4 of 5

Press Return to continue or '^' to Halt:

Provider Totals

Provider:EPCS, PROVIDER EDNSCII-V
 DAYTRANA 30MG/9HR PATC: 1
 DEXMETHYLPHENIDATE XR : 1
 CLASS II: 2
 Total: 2

Provider:EPCS, PROVIDER EDNSCIII-V
 ACETAMINOPHEN/COD #3 T: 2
 ASA/BUTALBITAL/CAFFEIN: 2
 LORAZEPAM 0.5MG TAB: 1
 CLASS III: 4
 CLASS IV: 1
 Total: 5

Provider:EPCS, PROVIDER EDNSCIV-V
 Total: 0

Page 5 of 5

Press Return to continue or '^' to Halt:

Provider:EPCS, PROVIDER EDSCIII-V
 Total: 0

Totals

```

ACETAMINOPHEN/COD #3 T: 2
ASA/BUTALBITAL/CAFFEIN: 2
DAYTRANA 30MG/9HR PATC: 1
DEXMETHYLPHENIDATE XR : 1
LORAZEPAM 0.5MG TAB: 1
CLASS II: 2
CLASS III: 4
CLASS IV: 1

```

Figure 5-1: Controlled Substance Order Report

5.2 Controlled Substance Audit Report

The **Controlled Substance Audit Report (CSA)** option displays the most information about CS orders. The data in this file comes from the APSP CS AUDIT LOG file. This file is a compilation of all the actions taken on a controlled substance order, from both the order and the pharmacy sides. Users have a wide range of options for data inclusion and exclusion with this report. While the report can be printed (to a 132-column printer) or browsed on screen, using the XML export provides the most complete data. The process of running the XML report is shown in Figure 5-2, and a portion of the resulting XML report as imported into Excel is shown in Figure 5-3.

```

Select EPCS Pharmacy Reports <TEST ACCOUNT> Option: CSA  Controlled
Substance Audit Report

EPCS Audit Report

*** Date Range Selection ***
Begin with DATE: DEC 03, 2018//-180 (JUN 07, 2018)
End with DATE: DEC 03, 2018//T (DEC 04, 2018)
Would you like all divisions? Yes//  YES

Select one of the following:

1          C-II
2          C-II through C-V
3          C-III through C-V

Med Class Types: 2//  C-II through C-V

Select one of the following:

1          Include order attempts
2          Exclude order attempts
3          Only order attempts

Order Attempts: 2// 1  Include order attempts

Select one of the following:

1          Include tampered entries
2          Exclude tampered entries

```

```

3          Only tampered entries

Tampered entries: 2// 1  Include tampered entries

Select one of the following:

1          Include pharmacy entries
2          Exclude pharmacy entries
3          Only pharmacy entries

Pharmacy order entry: 2// 1  Include pharmacy entries

Select one of the following:

1          Summary
2          Detail

Report Type: 2//  Detail

Select one of the following:

1          Medication
2          Event Date
3          Med Schedule/Med Name
4          Patient
5          Prescriber
6          Event Actor

Sort report by: 3//  Med Schedule/Med Name

Select one of the following:

1          Standard Report
2          Data Export

Output Mode: 1// 2  Data Export
Export report totals? No// YES
Export ALL activity for audit record? No// YES
DEVICE: HOME// HFS  HOST FILE SERVER
HOST FILE NAME: F:\TMP\TMP.HFS//F:\EHR-TEST\TMP\CSA.XML
ADDRESS/PARAMETERS: "WN
S"//

Won't you queue this ? Y// NO
    
```

Figure 5-2: Controlled Substance Audit Report

K	L	M	N	O	P	Q	R	S	T	U	V	W
EventDate	Al	Tyr	PatientName	Patie	Orde	Prescri	DrugName	Dr	Prescriber	Prescrib	AuditUser	Result
11/06/2017 11:54	367	C-II	DEMO,PATIENT ACTHREE-NINE		492279	X513604	HYDROCODONE 7.5/APAP 325 SOLN	C-II	EPCS,PROVIDER EDSCII-V	PEA	EPCS,PROVIDER EDSCII-V	SUCCESS
11/03/2017 14:01	359	C-II	DEMO,PATIENT ONE		492273	513627	OXYCODONE/APAP 5MG/325MG TAB	C-II	EPCS,PROVIDER EDSCII-V	PEA	EPCS,PROVIDER EDSCII-V	SUCCESS
11/06/2017 12:46	371	C-III	DEMO,PATIENT ACTHREE-NINE		492284	X513608	ACETAMINOPHEN/COD #3 TABLET	C-III	EPCS,PROVIDER EDSCIII-V	PEA	EPCS,PROVIDER EDSCIII-V	SUCCESS
11/06/2017 12:52	375	C-IV	DEMO,PATIENT ACTHREE-TWO		492287	X513611	TRAMADOL HCL 50MG TAB	C-IV	EPCS,PROVIDER EDSCIV-V	PEA	EPCS,PROVIDER EDSCIV-V	SUCCESS
11/03/2017 12:06	353	C-III	DEMO,PATIENT ACEIGHT		492271	X513598	ACETAMINOPHEN/COD #3 TABLET	C-III	EPCS,PROVIDER EPSCSCP	AEZ	EPCS,PROVIDER EPSCSCP	SUCCESS
11/03/2017 12:35	354	C-III	DEMO,PATIENT ACFIVE		492272	X513599	ACETAMINOPHEN/COD #3 TABLET	C-III	EPCS,PROVIDER EPSCSCP	AEZ	EPCS,PROVIDER EPSCSCP	SUCCESS
11/06/2017 12:37	370	C-II	DEMO,PATIENT ACFOUR-TWO		492282	X513606	HYDROCODONE 7.5/APAP 325 SOLN	C-II	EPCS,PROVIDER EPSCSCP	AEZ	EPCS,PROVIDER EPSCSCP	SUCCESS
11/03/2017 11:47	352	C-II	DEMO,PATIENT ACEIGHT		492270	X513597	OXYCODONE/APAP 5MG/325MG TAB	C-II	EPCS,PROVIDER EPSCSCP	AEZ	EPCS,PROVIDER EPSCSCP	SUCCESS
11/06/2017 16:28	381	C-II	DEMO,PATIENT ACONE-NINE		492293	X513617	OXYCODONE/APAP 5MG/325MG TAB	C-II	EPCS,PROVIDER EPSCSCP	AEZ	EPCS,PROVIDER EPSCSCP	SUCCESS
11/06/2017 09:14	366	C-II	DEMO,PATIENT BETHREE		492278		AMPHETAMINE/DEXTRAMPHET XR 10MG CAP	C-II	EPCS,PROVIDER EDSCII-V	PEA	EPCS,PROVIDER NENDNSNC	SUCCESS
11/06/2017 14:38	380	C-IV	DEMO,PATIENT BRONE		492292	X513616	DIAZEPAM 5MG TAB	C-IV	EPCS,PROVIDER EDSCIII-V	PEA	EPCS,PROVIDER EDSCIII-V	SUCCESS

Figure 5-3: Controlled Substance Audit Report example

5.2.1 Controlled Substance Audit Report (Task)

The same report with default selections is available to run as a tasked job. Users who require this option to be tasked should contact the personnel who manage the RPMS database for their site to set it up for them.

5.3 Individual Dig Sig Order Export

The **Individual Dig Sig Order Export (IND)** option exports a single CS order, which may be needed for DEA audits or incident response activities. This must be run as an export, as it will be in XML format even if printed or browsed on the screen. Note that because this is exporting an order, the order number and not the prescription number is needed. Pending orders can be exported as well. The process of running the option is shown in Figure 5-4, and a portion of an example output as imported into Excel is shown in Figure 5-5.

```

Controlled Substance Individual Pharmacy Export
This report is designed for Export ONLY of one digitally signed controlled
substance order. The data will be created in XML format for uploading into
EXCEL or uploaded into some other database.

*** Order Selection ***
Select Order:      494210
DEVICE: HOME// HFS  HOST FILE SERVER
HOST FILE NAME: F:\TMP\TMP.HFS//F:\EHR-TEST\TMP\IND.XML
ADDRESS/PARAMETERS: "WN
S"//

Won't you queue this ? Y// NO

```

Figure 5-4: Individual Digitally Signed Order Export

Provider	Provider_DE	Provider	Prov_Address	Prov_City	Prov_Sta	Prov_RX	Drug	Issue_Date	DEA	Quant	Refill	Earlie	Sche	Dos	Uni	UnitsP	DoseForm	Route	SIG	DigSig
EPCS, PROVIDER	A	DEA X	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110 514033	AMPHETAMINE/DEXTROA MPHET XR 10MG CAP	12/04/2018	2	7	0	12/04 /2018	DY	10	MG	1	CAPSULE	ORAL	TAKE ONE (1) CAPSULE BY MOUTH DAILY FOR ADHD	QwG7yr /dy6nvo NZLk1R2 yYBn0M JUYJMnj

Figure 5-5: Individual Digitally Signed Order Export example

5.4 EPCS Pharmacy Audit Log Summary

The **EPCS Pharmacy Audit Log Summary (PAL)** option is a snapshot of the Pharmacy Audit log. It includes potential incidents and compares events to defined thresholds. This report should be reviewed daily. It is usually tasked to run nightly to be sent as a MailMan message. The report may be printed or browsed on the screen as well. An example report is shown in Figure 5-6. Note that the thresholds on the test system were set to be extremely sensitive to trigger the warning language. Each section is further discussed below.

```

Select EPCS Pharmacy Reports <TEST ACCOUNT> Option: PAL  EPCS Pharmacy
Audit Log Summary

Report is available in Roll and scroll only!
The report can be exported to the HFS host system or sent through MailMan.
A site has the ability to assign a user (i.e. security officer) to access
the report.

Report DATE: -1 (DEC 04, 2018)
DEVICE: 0;80;999  TELNET

Pharmacy Audit Summary Report                                DEC 05, 2018  10:18  PAGE 1

Report Date Range: 12/4/2018 through 12/4/2018
-----
                PHARMACY ENABLED PROVIDER AUTHENTICATION
=====
Failed RPMS Login Attempts
  Number of Failed Events                                0
  Total Logon Events                                    6
  Ratio                                                  0

Electronic Signature - Paper Prescription
  Number of Failed Events                                0
  Total Events                                           2
  Ratio                                                  0

                PHARMACY PROVISIONING
=====
Number of EPCS Enabled Pharmacists
  Total                                                  42
  Assigned                                               1
  Removed                                                1

Provision Pharmacy Keys
  Total                                                  4
  Assigned                                               2
  Removed                                                2

                PHARMACY SYSTEM STATUS
=====
Time Synchronization
  Total Events                                           3
  Failed Checks                                         0
  Events Over 3 Minutes                                 0
  Events Over 5 Minutes                                 0
  Last Event                                           Time Sync Check, offset: -
52 ms

                ORDER HANDLING
=====
Received Orders
  Total                                                  4
  Failed Integrity                                       0

Pharmacy Orders
  Number of Pharmacists                                  1
    
```

CS Rx Dispense	2
Pharmacy Discontinued Order	4
SYSTEM INTEGRITY	
=====	
Audit Log	
Number of Records	46099
Number of Mismatches	18
Number of Deletions	0
Prescription Archive File	
Number of Records	366
Number of Mismatches	4
Number of Deletions	24
THRESHOLD SUMMARY	
=====	
Please initiate appropriate incident response to look into identified issues.	
*** Large percentage of pharmacists added. This could indicate an attempt to tamper with system.	
*** Large percentage of pharmacists removed. This could indicate an attempt to tamper with system.	
*** Large percentage of Received Orders were discontinued. This could indicate potential tampering with system.	
*** Large number of Prescriptions were dispensed by pharmacists. This could indicate potential tampering with system.	
*** Large percentage of pharmacists had EPCS related keys added. This could indicate potential tampering with system.	
*** Large percentage of pharmacists had EPCS related keys removed. This could indicate potential tampering with system.	
*** Issue found in BUSA integrity check process, possible system problem.	
*** HASH Mismatch found in 3 BUSAS IENs:	
***	521163 on: 2/6/2018
***	521164 on: 2/6/2018
***	521165 on: 2/6/2018
*** Issue found in Pharmacy Order Integrity process, possible system problem.	
*** Missing IEN identified:	
***	APSPDEA is missing entry for IEN: 349
***	APSPDEA is missing entry for IEN: 388
***	APSPDEA is missing entry for IEN: 389
***	APSPDEA is missing entry for IEN: 390
*** HASH Mismatch found:	
***	HASH Mismatch in APSPDEA IEN: 350
***	HASH Mismatch in APSPDEA IEN: 379
***	HASH Mismatch in APSPDEA IEN: 459
***	HASH Mismatch in APSPDEA IEN: 581
=====	
Please initiate appropriate incident response to look into identified issues	

Figure 5-6: EPCS Pharmacy Audit Log Summary

5.4.1 Pharmacy Enabled Provider Authentication

This section consists of the Failed RPMS Login Attempts and Electronic Signature – Paper Prescription portions. A large number of failures in either portion may indicate an attempt to “brute force” an Access and Verify code to gain access to RPMS or an Electronic Signature code to process a hardcopy order when not authorized to do so. Sites should investigate these failures as needed according to site-defined procedures.

5.4.2 Pharmacy Provisioning

This section consists of the Number of EPCS Enabled Pharmacists and Provision Pharmacy Keys portions. Both portions are looking at the assignment or removal of the PSORPH or PSDRPH keys, the first in relation to the overall number of key holders, and the second in relation to the overall number of key provisioning events. The provisioning of keys for this section includes both outright allocation as well as the delegation of keys to a user. Large numbers of assignments or removals may indicate an attempt to bypass normal key allocation processes or attempts to bypass the EPCS security controls. Sites should investigate as needed according to site-defined procedures.

5.4.3 Pharmacy System Status

This section consists of the time synchronization events, and includes total events, failed events, checks that are off by over three or over five minutes, and information on the last time sync check. If the time sync is failing, or if the offset is high, the site should investigate the issue according to site-defined procedures. Note that entries in the “Events Over 5 Minutes” are of particular concern as per the DEA regulations, the system clock should stay within five minutes of the National Institute of Standards and Technology (NIST) clock.

5.4.4 Order Handling

This section consists of the Received Orders and Pharmacy Orders portions. The Received Orders portion lists the total orders sent to the pharmacy, and the number that failed verification. The Pharmacy Orders portion lists the number of pharmacists involved in dispensing events, the number of CS dispensing events, and the number of orders that were either canceled or automatically discontinued due to hash mismatches. Large numbers of failures or discontinues may indicate a system problem or attempts to fraudulently edit orders. A larger-than-normal number of CS dispensing or a smaller-than-normal number of pharmacists involved may also indicate an issue. Sites should investigate according to site-defined procedures.

5.4.5 System Integrity

This section consists of the Audit Log and Prescription Archive File portions. These are making sure that no tampering was done to the two files. Any mismatches or deletions should be investigated according to site-defined procedures.

5.4.6 Threshold Summary

This section offers various messages about the preceding sections, if any portion of those sections exceeds the defined thresholds. Thresholds are set in the EPCS Configuration Menu using the **EPCS Incident Report Variable Edit** option, described below. There are default thresholds, which should be appropriate for the majority of the sites, with the possible exception of the Pharmacy Orders CS Dispense threshold. Potential messages include but are not limited to:

- Excessive Failed verify code attempts. This could indicate an attempt to brute force verify codes.
- Excessive Failed electronic signature code attempts. This could indicate an attempt to brute force electronic signature codes.
- Large percentage of pharmacists added. This could indicate an attempt to tamper with system.
- Large percentage of pharmacists removed. This could indicate an attempt to tamper with system.
- Large percentage of pharmacists had EPCS related keys added. This could indicate potential tampering with system.
- Large percentage of pharmacists had EPCS related keys removed. This could indicate potential tampering with system.
- Large number of Prescriptions were dispensed by pharmacists. This could indicate potential tampering with system.
- Large percentage of Received Order Integrity checks failed. This could indicate potential tampering with system.
- Large percentage of Received Orders were discontinued. This could indicate potential tampering with system.
- Excessive number of failed time synchronization checks. Indicates a possible configuration issue with time checks.
- Time drift is exceeding +/- 3 minutes. Indicates a possible issue with time synchronization.
- Time drift is exceeding +/- 5 minutes. Indicates system may no longer be in compliance with DEA time synchronization regulations.
- Mismatch detected in daily integrity check, possible system problem.

- Missing EPCS100 indicator for starting the nightly BUSA compile check.
- Missing EPCS101 indicator for completing the nightly BUSA compile check.
- Mismatch detected Pharmacy Order Integrity Compile, possible system problem.
 - Missing EPCS106 indicator for Pharmacy Order Integrity Compile check.
- Mismatch detected in BUSA Integrity Compile, possible system problem.
 - Missing EPCS108 indicator for BUSA Integrity Compile check.
 - Missing EPCS109 indicator for completing BUSA Integrity Compile check.
- Issue found in Pharmacy Order Integrity process, possible system problem.
 - HASH Mismatch found followed by IEN.
 - Missing IEN identified followed by IEN.
- Issue found in BUSA integrity check process, possible system problem
 - Number of records is incorrect in BUSA integrity check process.
 - Missing <n> BUSAS IENs followed by a list of IENs.
 - HASH Mismatch found in <n> BUSAS IENs followed by a list of IENs and creation date.
 - Missing Timestamp in BUSAS IEN followed by a list of IENs.
- HASH code mismatch detected, possible system compromise followed by a list of IENs.

5.4.6.1 Adjusting Thresholds

The default thresholds delivered with the system should be adequate for most, if not all, sites, with the possible exception of the Pharmacy Orders CS Dispense (for pharmacy audit) and EPCS Orders per Providers (for EPCS audit). The site does have the ability to adjust thresholds if needed. Extreme caution should be used when adjusting the thresholds to avoid excessive warnings and MailMan messages and to ensure that appropriate warnings are triggered for potential incidents. Adjusting the thresholds should only be done with the approval of the site personnel assigned to monitor EPCS security.

To adjust the thresholds, an authorized user will navigate to the EPCS Configuration Menu. From there, select the appropriate variables: EPCS or Pharmacy. A list of variables will display and can be edited as shown in Figure 5-7. The pharmacy variable edit is shown; the EPCS variable edit will be the same process. Once the site has set a variable, it will be listed in the Site Value column.

```
Select RPMS-EHR Configuration Master Menu Option: EPCS  IHS EPCS Main Menu
AUD      EPCS Audit Reports ...
PHAR     EPCS Pharmacy Reports ...
CONF     EPCS Configuration Menu ...
EXP      EPCS Export Reports ...
```

Select IHS EPCS Main Menu Option: CONF EPCS Configuration Menu

- SITE EPCS Site Configuration
- CFGC Check Provider EPCS Configuration
- VAR EPCS Incident Report Variable Edit

Select EPCS Configuration Menu Option: VAR EPCS Incident Report Variable Edit

Daily Incident Threshold Variable Edit Jul 11, 2019

Select one of the following:

- 1 EPCS Variables
- 2 Pharmacy Variables

Enter '1' for EPCS or '2' for Pharmacy variables.
 Selection (1/2) : 2 Pharmacy Variables

Daily Incident Threshold Variable Edit Jul 11, 2019
 Editing the Pharmacy Variables

Select one of the following variables to modify:

Variable name	Default Value	Site Value
1 Pharmacy Discontinued Order	35.00%	-
2 Pharmacy EPCS Assigned Pharmacists	80.00%	-
3 Pharmacy EPCS Keys Added	30.00%	-
4 Pharmacy EPCS Keys Removed	30.00%	-
5 Pharmacy EPCS Removed Pharmacists	80.00%	-
6 Pharmacy Login Failures	20.00%	-
7 Pharmacy Orders CS Dispense	150	-
8 Pharmacy Paper Signature Failures	20.00%	-
9 Pharmacy Received Orders Integrity	30.00%	-
10 Pharmacy Time Synchronization Checks	20.00%	-

Enter the number of variable to modify : 7 POCD
 Modifying the Site defined value:
 Pharmacy Orders CS Dispense Default Value: 150
 To delete the existing Site Value enter '@'
 Enter an integer number with no decimals : 80

Daily Incident Threshold Variable Edit Jul 11, 2019
 Editing the Pharmacy Variables

Select one of the following variables to modify:

Variable name	Default Value	Site Value
1 Pharmacy Discontinued Order	35.00%	-
2 Pharmacy EPCS Assigned Pharmacists	80.00%	-
3 Pharmacy EPCS Keys Added	30.00%	-
4 Pharmacy EPCS Keys Removed	30.00%	-
5 Pharmacy EPCS Removed Pharmacists	80.00%	-
6 Pharmacy Login Failures	20.00%	-

7	Pharmacy Orders CS Dispense	150	80
8	Pharmacy Paper Signature Failures	20.00%	-
9	Pharmacy Received Orders Integrity	30.00%	-
10	Pharmacy Time Synchronization Checks	20.00%	-

Enter the number of variable to modify :

Figure 5-7: EPCS Incident Report Variable Edit

If the site wishes to remove the Site Value and return to the default value, the at (@) symbol is used as shown in Figure 5-8. Once again, the Pharmacy variable edit is shown; the EPCS variable edit is the same process. When the Site Value is removed, it will no longer display in the table.

```

Daily Incident Threshold Variable Edit                               Jul 11, 2019
      Editing the Pharmacy Variables

Select one of the following variables to modify:

      Variable name                Default Value      Site Value
=====
1 Pharmacy Discontinued Order      35.00%            -
2 Pharmacy EPCS Assigned Pharmacists 80.00%            -
3 Pharmacy EPCS Keys Added          30.00%            -
4 Pharmacy EPCS Keys Removed        30.00%            -
5 Pharmacy EPCS Removed Pharmacists 80.00%            -
6 Pharmacy Login Failures           20.00%            -
7 Pharmacy Orders CS Dispense        150                80
8 Pharmacy Paper Signature Failures  20.00%            -
9 Pharmacy Received Orders Integrity 30.00%            -
10 Pharmacy Time Synchronization Checks 20.00%            -

Enter the number of variable to modify : 7  POCD
Modifying the Site defined value:
Pharmacy Orders CS Dispense      Default Value: 150      Current Site Value:
80
To delete the existing Site Value enter '@'
Enter an integer number with no decimals : @

Daily Incident Threshold Variable Edit                               Jul 11, 2019
      Editing the Pharmacy Variables

Select one of the following variables to modify:

      Variable name                Default Value      Site Value
=====
1 Pharmacy Discontinued Order      35.00%            -
2 Pharmacy EPCS Assigned Pharmacists 80.00%            -
3 Pharmacy EPCS Keys Added          30.00%            -
4 Pharmacy EPCS Keys Removed        30.00%            -
5 Pharmacy EPCS Removed Pharmacists 80.00%            -
6 Pharmacy Login Failures           20.00%            -
7 Pharmacy Orders CS Dispense        150                -
8 Pharmacy Paper Signature Failures  20.00%            -
9 Pharmacy Received Orders Integrity 30.00%            -
    
```

10	Pharmacy Time Synchronization Checks	20.00%	-
Enter the number of variable to modify :			

Figure 5-8: Daily Incident Threshold Variable Edit

5.4.6.2 Pharmacy Variables

The Pharmacy Variables should be set at a threshold that will pick up potential incidents while not triggering excessive false alarms. The Pharmacy Variables are as follows:

- Pharmacy Discontinued Order – The percentage of the total orders received to orders canceled by pharmacy or auto-discontinued due to hash mismatch.
- Pharmacy EPCS Assigned Pharmacists – The percentage of pharmacists assigned the PSORPH or PSDRPH key to the total number of active EPCS-enabled pharmacists.
- Pharmacy EPCS Keys Added – The percentage of keys assigned to the total number of key-provisioning events.
- Pharmacy EPCS Keys Removed – The percentage of keys removed to the total number of key-provisioning events.
- Pharmacy EPCS Removed Pharmacists – The percentage of pharmacists with PSORPH or PSDRPH keys removed to the total number of active EPCS pharmacists.
- Pharmacy Login Failures – The percentage of failed login attempts to total login events where the access code used corresponds to a user holding the PSORPH and PSDRPH keys.
- Pharmacy Orders CS Dispense – The ratio of CS orders finished to the total number of active EPCS enabled pharmacists. This will essentially be the average number of CS prescriptions processed per EPCS pharmacist.
- Pharmacy Paper Signature Failures – The percentage of HC signature failures to total HC signature events.
- Pharmacy Received Orders Integrity – The percentage of orders that fail the integrity check to the total number of received orders.
- Pharmacy Time Synchronization Checks – The percentage of failed time synchronization checks to total time-synchronization events.

5.5 Pharmacy Dig Sig Rx Export

The **Pharmacy Dig Sig Rx Export (RXE)** option exports all digitally signed prescriptions for a provider over a defined date range. The basis of this report is the ORDER DEA ARCHIVE FILE (101.52), but since this is an export of prescriptions, it uses this file to retrieve the prescription and then includes the prescription data in the fields. The export is in XML format and can be imported into Excel or another system. The process to initiate the export is shown in Figure 5-9, and a portion of an example of the output as imported into Excel is shown in Figure 5-10.

```
Digitally Signed Controlled Substance Pharmacy Export
This report is designed for Export ONLY.
The data will be created in XML format for uploading into EXCEL or
uploaded into some other database.

*** Provider Selection ***
Select Prescriber:      EPCS, PROVIDER          PE

*** Date Range Selection ***
Begin with DATE: DEC 03, 2018//-180 (JUN 07, 2018)
End with DATE: DEC 03, 2018//T (DEC 04, 2018)
Include TEST Patients? No// YES
DEVICE: HOME// HFS  HOST FILE SERVER
HOST FILE NAME: F:\TMP\TMP.HFS//F:\EHR-TEST\TMP\RXE.XML
ADDRESS/PARAMETERS: "WN
S"//

Won't you queue this ? Y// NO
```

Figure 5-9: Pharmacy Dig Sig Rx Export

R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD
Prov_ZIP	RX	Drug	Issue_Date	DEA_Sch	Quant	Refills	Schedule	Dosage	UnitsPerDose	DoseForm	Route	Units
87110	513935A	ACETAMINOPHEN/COD #3 TABLET	07/03/2018	3	10	1	Q6H PRN	1 TABLET			ORAL	
87110	1241	AMPHETAMINE/DEXTRAMPHET XR 10MG CAP	07/09/2018	2	30	0						
87110	513996	LORAZEPAM 0.5MG TAB	07/09/2018	4	10	0	BID PRN	0.5	1	TABLET	ORAL	MG
87110	513995	DIPHENOXYLATE/ATROPINE TAB	07/09/2018	5	4	0	TID PRN	1 TABLET			ORAL	
87110	514004	FENTANYL CITRATE 200MCG ORAL TRANSMUCOSAL LOZENGE	07/17/2018	2	28	0	Q6H PRN	1 LOZENGE			ORAL	
87110	514002	AMPHETAMINE/DEXTRAMPHET XR 10MG CAP	07/18/2018	2	30	0	DY	10	1	CAPSULE	ORAL	MG
87110	514010	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	07/25/2018	2	5	0	Q6H PRN	2 TABLETS			ORAL	
87110	514012	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	08/15/2018	2	14	0	Q6H	1 TABLET			ORAL	
87110	514012	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	08/15/2018	2	14	0	Q6H	2 TABLETS			ORAL	
87110	514012	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	08/15/2018	2	14	0	Q8H	1 TABLET			ORAL	
87110	514012	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	08/15/2018	2	14	0	Q6H	1 TABLET			ORAL	
87110	514012	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	08/15/2018	2	14	0	Q8H	1 TABLET			ORAL	
87110	514012	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	08/15/2018	2	14	0	QAM	1 TABLET			ORAL	
87110	514012	HYDROCODONE/ACETAMINOPHEN 5MG/325MG TAB	08/15/2018	2	14	0	QAM	1 TABLET			ORAL	
87110	514016	DIAZEPAM 5MG TAB	08/23/2018	4	15	2	BID	2.5	0.5	TABLET	ORAL	MG

Figure 5-10: Digitally Signed Controlled Substance Pharmacy Export example

5.6 EPCS Ad Hoc Provider Audit Report

The **EPCS Ad hoc Provider Audit Report (PAR)** option shows the actions taken to create, edit, verify, and revoke a provider or verifier in the EPCS Credentialing component. The user selects the date range and may select one, multiple, or all users who took an action. To select specific users, type a name at the “Select User Name” prompt. Type additional names at successive user name prompts or enter past to stop user selection. To select all users, press Enter at the first “Select User Name” prompt; typing **all** at this prompt will trigger a search for a user name starting with “all.” An example is shown in Figure 5-11.

```
Select EPCS Audit Reports <TEST ACCOUNT> Option: PAR  EPCS Ad hoc Provider
Audit Report

Report is available in Roll and scroll only!
The report can be exported to the HFS host system.
A site has the ability to assign a user (i.e. security officer) to access
the report.
Report is run ad hoc.
File input = BUSA

Do you want to include DISUSERed and TERMINATED users
in the output? NO//
Select User Name: ALL

Start DATE: -30  (NOV 04, 2018)

End DATE: T  (DEC 04, 2018)

DEVICE:  TELNET
EPCS LOGICAL ACCESS AUDIT REPORT          DEC 04, 2018  10:21  PAGE 1
Data Sensitivity Label
Sensitivity Level:                        Sensitive
Type of data contained on this media:     CUI:PRVCY
Date of creation:                         DEC 04, 2018
Date coverage contained on the media:     NOV 03, 2018 and DEC 04, 2018
Data Owner:                               EPCS,PROVIDER

LOG DATE/TIME          USER NAME          ACTION
DESCRIPTION
-----
NOV 07, 2018@16:11:31  EPCS,ADMIN USER   Copy
Verify EPCS Provider Access Admin: 2501 - EPCS,PROVIDER EPCSPAA
NOV 07, 2018@16:12:59  EPCS,ADMIN USER   Copy
Pending Profile Activated, Provider: 2561 - ECPS,PROVIDER PPA
NOV 07, 2018@16:12:59  EPCS,ADMIN USER   Copy
Pending Profile Created, Provider: 2561 - ECPS,PROVIDER PPA
NOV 07, 2018@16:29:58  EPCS,PROVIDER EPCSPAA  Copy
Verify Provider Profile, Provider: 2561 - EPCS,PROVIDER PAA, Status
Change:
NOV 29, 2018@13:23:07  EPCS,PROVIDER     Copy
Pending Profile Created, Provider: 2543 - EPCS,PROVIDER
NOV 29, 2018@13:23:25  EPCS,PROVIDER CII-V  Copy
Pending Profile Created, Provider: 2543 - EPCS,PROVIDER
```

```

NOV 29, 2018@13:36:51          EPCS,PROVIDER EPCSPAA          Copy
  Verify EPCS Provider Access Admin: 2575 - EPCS,USER PAA
NOV 29, 2018@13:37:49          EPCS,PROVIDER CIII-V          Copy
  Verify Provider Profile, Provider: 2543 - EPCS,PROVIDER, Status Change:
NOV 29, 2018@17:49:04          EPCS,PROVIDER CIV-V          Copy
  Pending Profile Created, Provider: 2543 - EPCS,PROVIDER

                                [END OF REPORT]
    
```

Figure 5-11: EPCS Ad hoc Provider Audit Report

5.7 EPCS Provider Profile Integrity Report

The **EPCS Provider Profile Integrity Report (PPI)** option (Figure 5-12) shows any user with an EPCS hash in the **New Person** file and displays the status. Select one or more providers by typing the names at the successive “User Name” prompts, or view all providers by entering past the “Select User Name” prompt. Users with a hash mismatch will display first.

```

Select EPCS Audit Reports <TEST ACCOUNT> Option: PPI  EPCS Provider Profile
Integrity Report

This report loops through users with EPCS PROFILE HASH; field
in the NEW PERSON FILE (#200). Report will display Mismatch Profile first.

Do you want to include DISUSERed and TERMINATED users
in the output? NO//
Select User Name: ALL
DEVICE: 0;80;999  TELNET

PROVIDER PROFILE INTEGRITY REPORT          DEC 05, 2018  10:21  PAGE 1
Data Sensitivity Label
Sensitivity Level:          Sensitive
Type of data contained on this media:  CUI:PRVCY
Date of creation:          DEC 05, 2018
Date coverage contained on the media:  DEC 05, 2018
Data Owner:          EPCS,PROVIDER

NAME          DEA#          HASH STATUS          ACCOUNT STATUS
-----
EPCS,PROVIDER EDNSCII-V          PE123XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER EDNSCIII-V         PE234XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER EDNSCIV-V          PE345XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER EDSCII-V           PE456XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER EDSCIII-V          PE567XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER EDSCIV-V           PE678XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER ENDSNC             MISMATCH          ACTIVE
EPCS,PROVIDER II-EPSCCP          AE564XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER NEDSCII-V          PE891XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER NEDSCIV-V          PE145XXXX  MISMATCH          ACTIVE
EPCS,PROVIDER NENDNSNC           MISMATCH          ACTIVE
EPCS,PROVIDER CHANGEABLE ONE     FE562XXXX  MATCH             ACTIVE
EPCS,PROVIDER CHANGEABLE TWO     MATCH             ACTIVE
EPCS,PROVIDER EEDSNC             MATCH             ACTIVE
    
```

EPCS, PROVIDER EPCSPAA		MATCH	ACTIVE
EPCS, PROVIDER NEDNSCII-V2	AE200XXXX	MATCH	ACTIVE
EPCS, PROVIDER NEDSCIII-V	PE956XXXX	MATCH	ACTIVE
[END OF REPORT]			

Figure 5-12: EPCS Provider Profile Integrity Report

5.8 EPCS Audit Log Summary

The **EPCS Audit Log Summary (ALS)** option is a snapshot of the EPCS Audit log. This report is like the PAL report but shows the audit log events for the ordering side instead of the pharmacy side. It includes potential incidents and compares events to defined thresholds. This report should be reviewed daily. It is usually tasked to run nightly to be sent as a MailMan message.

The report may be printed or browsed on the screen as well. An example report is shown in Figure 5-13; note that the thresholds on the test system were set to be extremely sensitive to trigger the warning language. Each section is further discussed below.

```
Select EPCS Audit Reports <TEST ACCOUNT> Option: ALS EPCS Audit Log
Summary

Report is available in Roll and scroll only!
The report can be exported to the HFS host system or mailed from MailMan.
A site has the ability to assign a user (i.e. security officer) to access
the report.

Report DATE: 7/24 (JUL 24, 2018)
DEVICE: 0;80;999 TELNET

EPCS Audit Summary Report                                JUL 25, 2018  10:30  PAGE 1

Report Date Range: 7/24/2018 through 7/24/2018
-----
      EPCS ENABLED PROVIDER AUTHENTICATION
=====
RPMS Login Attempts
  Number of Failed Events                1
  Total Logon Events                    18
  Ratio                                  5.56

MFA Authentication Number Attempts
  Number of Failed Events                0
  Total Events                          11
  Ratio                                  0

Electronic Signature Code
  Number of Failed Events                0

Token PIN
  Number of Failed Events                0
```

Unable to Complete Authentication		
Number of Failed Events		0
EPCS CREDENTIALING AND PROVISIONING		
=====		
Number of EPCS Enabled Divisions		
Total		2
Assigned		0
Removed		0
Number of EPCS Enabled Providers		
Total		23
Assigned		0
Removed		0
Number of Credentials		
Total		0
Assigned		0
Removed		0
Edit Provider Profile		
Total		0
Created		0
Removed		0
Failed		0
Verify/Activate Provider Profile		
Total		0
Assigned		0
Failed		0
EPCS DIGITAL SIGNING CERTIFICATE		
=====		
Number of Certificates		
Total		0
Revoked		0
EPCS SYSTEM STATUS		
=====		
Time Synchronization		
Total Events		4
Failed Checks		0
Events Over 3 Minutes		0
Events Over 5 Minutes		0
Last Event		Time Sync Check, offset:
-9 ms		
EPCS Certificate Checks		
Total Checks		8
Unsuccessful Checks		0
EPCS ORDERS		
=====		
Prescribing Events		
Number of EPCS Providers		3
Created		6

Edits	3
Canceled	2
Digitally Signed	3
Transmitted	3
Failed Events	0
SYSTEM INTEGRITY	
=====	
Provider Profile	
Number of Records	27
Number of Mismatches	8
Number of Deletions	0
Number of Failed Checks	0
CS Order Integrity Check	
Number of Records	816
Number of Mismatches	124
Number of Deletions	4
Number of Failed Checks	0
Audit Log	
Number of Records	46099
Number of Mismatches	18
Number of Deletions	0
Number of Failed Checks	0
Unaccounted System Type Events	
Total Events	8
Successful Events	8
Failed Events	0
Last Event	
THRESHOLD SUMMARY	
=====	
Please initiate appropriate incident response to look into identified issues.	
*** Large percentage of cancelled order events. This could indicate	
*** an attempt to tamper with system.	
*** Excessive Failed verify code attempts. This could indicate an attempt	
*** to brute force verify codes.	
*** Issue found in BUSA integrity check process, possible system problem.	
*** HASH Mismatch found in 5 BUSAS IENs:	
***	521176 on: 2/6/2018
***	521163 on: 2/6/2018
***	521164 on: 2/6/2018
***	521165 on: 2/6/2018
***	521166 on: 2/6/2018
*** Issue found in EPCS Monitoring Hash Check process, possible system	
problem.	
*** Hash Check failed on 7/24/2018 6:36:36 am for: 20-EPCS, PROVIDER	
NOSPI	
*** Issue found in CS Order Integrity Compile process, possible system	
problem.	
*** Missing IEN identified:	
***	ORPA(101.52) is missing entry for IEN: 22
***	ORPA(101.52) is missing entry for IEN: 23

```

***          ORPA(101.52) is missing entry for IEN: 27
***          ORPA(101.52) is missing entry for IEN: 29
***          HASH Mismatch found:
***          HASH Mismatch in ORPA(101.52) IEN: 472
***          HASH Mismatch in ORPA(101.52) IEN: 556
***          HASH Mismatch in ORPA(101.52) IEN: 560
***          HASH Mismatch in ORPA(101.52) IEN: 665

=====
Please initiate appropriate incident response to look into identified
issues.

```

Figure 5-13: EPCS Audit Log Summary

5.8.1 EPCS Enabled Provider Authentication

This section consists of the RPMS Login Attempts, MFA Authentication Number Attempts, Electronic Signature Code, Token PIN, and Unable to Complete Authentication portions. A large number of failures in any portion may indicate an issue with the EPCS Monitoring system or attempts by unauthorized persons to gain access to the system or order CS medications. Sites should investigate these failures as needed according to site-defined procedures.

5.8.2 EPCS Credentialing and Provisioning

This section consists of the Number of EPCS Enabled Divisions, Number of EPCS Enabled Providers, Number of Credentials, Edit Provider profile, and Verify/Activate Provider Profile portions. Large numbers of divisions or providers added or removed, or credentials assigned or removed, may indicate attempts to misuse the system. Large numbers of Provider profiles created, removed, or verified may also indicate misuse, while large numbers of failures in these portions may indicate a problem with the system. Sites should investigate as needed according to site-defined procedures.

5.8.3 EPCS Digital Signing Certificate

This section shows the Number of Certificates and how many have a status of revoked.

5.8.4 EPCS System Status

This section consists of the Time Synchronization and EPCS Certificate Checks portions. The Time Synchronization includes total events, failed events, checks that are off by over three or over five minutes, and information on the last time-sync check. Large numbers of failures in either portion or large offsets in time-synchronization checks may indicate a problem with the EPCS Monitoring service or other system problem. Note that entries in the “Events Over 5 Minutes” are of particular concern as per the DEA regulations, the system clock should stay within five minutes of the NIST clock. The site should investigate any issues according to site-defined procedures.

5.8.5 EPCS Orders

This section consists of the Prescribing Events, with information on number of EPCS providers authoring events, along with numbers of created, edited, canceled, digitally signed, transmitted, and failed events. Large numbers of failed events may indicate a system problem. Large numbers of edits or cancels or a very small number of digitally signed orders compared to orders created may indicate attempts to misuse the system. The site should investigate any issues according to site-defined procedures.

5.8.6 System Integrity

This section consists of the Provider Profile, CS Order Integrity Check, Audit Log, and Unaccounted System Type Events portions. These are to ensure that no tampering was done to the various files by providing information on total records, mismatches, deletions, and failures. Large numbers of failures may indicate a system problem. Mismatches or deletions may indicate attempts to misuse the system. The site should investigate according to site-defined procedures.

5.8.7 Threshold Summary

This section offers various messages about the preceding sections, if any portion of those sections exceeds the defined thresholds. Thresholds are set in the EPCS Configuration Menu using the EPCS Incident Report Variable Edit option, described in section 5.4.6.1. There are default thresholds which should be appropriate for the majority of the sites, with the possible exception of the EPCS Orders per Providers threshold. Potential messages include but are not limited to:

- Excessive Failed verify code attempts. This could indicate an attempt to brute force verify codes.
- Excessive number of failed multifactor authentication attempts. This could indicate an attempt to brute force verify Electronic Signature Code.
- Large percentage of providers added. This could indicate an attempt to tamper with system.

- Large percentage of providers removed. This could indicate an attempt to tamper with system.
- Large percentage of pharmacists added. This could indicate an attempt to tamper with system.
- Large percentage of assigned/verified provider profiles events. This could indicate an attempt to tamper with system.
- Large percentage of failed verify provider profiles events. This could indicate an attempt to tamper with system.
- Large percentage of cancelled order events. This could indicate an attempt to tamper with system.
- Excessive number of failed time synchronization checks. Indicates a possible configuration issue with time checks.
- Time drift is exceeding +/- 3 minutes. Indicates a possible issue with time synchronization.
- Time drift is exceeding +/- 5 minutes. Indicates system may no longer be in compliance with DEA time synchronization regulations.
- Large percentage of created provider profile events. This could indicate an attempt to tamper with system.
- Large percentage of removed provider profile events. This could indicate an attempt to tamper with system.
- Large percentage of failed provider profile events. This could indicate an attempt to tamper with system.
- Large number of providers assigned EPCS access. This could indicate an attempt to tamper with system.
- Large number of providers had EPCS access removed. This could indicate an attempt to tamper with system.
- Large number of created orders per prescribing provider. This could indicate an attempt to tamper with system.
- Excessive number of failed certificate revocation checks. This could indicate a configuration issue or possible attempt to tamper with system.
- Mismatch detected in daily integrity check, possible system problem.
 - Missing EPCS100 indicator for starting the nightly BUSA compile check.
 - Missing EPCS101 indicator for completing the nightly BUSA compile check.
- Mismatch detected BUSA audit integrity check, possible system problem.
 - Missing EPCS108 indicator for starting the nightly BUSA compile check.
 - Missing EPCS109 indicator for completing the nightly BUSA compile check.

- Issue found in BUSA integrity check process, possible system problem
 - Number of records is incorrect in BUSA integrity check process.
 - HASH Mismatch found in <n> BUSAS IENs followed by a list of IENs and creation date.
 - Missing Timestamp in <n> BUSAS IENs followed by a list of IENS.
 - Missing <n> BUSAS IENs followed by a list of IENs.
- Issue found in CS Order Integrity Compile process, possible system problem.
 - Missing IEN identified followed by missing IEN number.
 - HASH Mismatch found in ORPA(101.52) followed by list of IENs.

5.8.7.1 Adjusting Thresholds

See section 5.4.6.1 for instructions on adjusting the thresholds.

5.8.7.2 EPCS Variables

The EPCS Variables should be set at a threshold that will pick up potential incidents while not triggering excessive false alarms. The EPCS Variables are as follows:

- EPCS Assigned Verify Provider Profile – The percentage of verification events that are successful to the total number of verification events.
- EPCS Created Order Events – The percentage of canceled or deleted orders to the total number initiated.
- EPCS Created Provider Profile – The percentage of created or edited profiles to total profile events.
- EPCS Failed Certification Checks – The percentage of failed certificate checks to total certificate check events.
- EPCS Failed Provider Profile – The percentage of failed provider profile creations, edits, or deletions to total provider profile events.
- EPCS Failed Verify Provider Profile – The percentage of failed verification events to total verification events.
- EPCS Login Failures – The percentage of failed login attempts to total login events where the access code used corresponds to a user holding the ORES key.
- EPCS Multifactor Authentication – The percentage of failed MFA attempts to total MFA events.
- EPCS Number of Credentials Assigned – The percentage of assigned credential events to total credential events.
- EPCS Number of Credentials Removed – The percentage of removed credential events to total credential events.

- EPCS Orders Created – Signed – The percentage of the orders eligible for digital signature that were not signed to the total number of order created.
- EPCS Orders per Providers – The ratio of CS orders initiated to the total number of active EPCS enabled providers. This will essentially be the average number of CS orders created per EPCS provider.
- EPCS Pharmacists Added – The ratio of EPCS Provider Profile Administrators and EPCS Provider Access Administrators added divided by the total EPCS Provider Profile Administrator and EPCS Provider Access Administrator added or deleted.
- EPCS Providers Added – The percentage of providers added as EPCS enabled to the total number of EPCS-enabled providers.
- EPCS Providers Removed – The percentage of providers removed as EPCS enabled to the total number of EPCS-enabled providers.
- EPCS Removed Provider Profile – The percentage of provider profiles removed to the total provider profile events.
- EPCS Time Synchronization – The percentage of failed time-synchronization checks to total time-synchronization events.

5.9 EPCS Provider Profile Integrity Mismatch Report

The **EPCS Provider Profile Integrity Mismatch Report (PIR)** option (Figure 5-14) is like the Provider Profile Integrity report but only shows the providers with a hash mismatch and does not allow selection of providers. This report is only viewable on the screen.

```
Select EPCS Audit Reports <TEST ACCOUNT> Option: PIR  EPCS Provider Profile
Integrity Mismatch Report

IR EPCS INTEGRITY CHECK                      DEC 05, 2018  10:30  PAGE 1
Data Sensitivity Label
Sensitivity Level:                          Sensitive
Type of data contained on this media:       CUI:PRVCY
Date of creation:                          DEC 05, 2018
Date coverage contained on the media:       DEC 05, 2018
Data Owner:                                EPCS, PROVIDER

NAME                                          DEA#          HASH STATUS   ACCOUNT STATUS
-----
Press RETURN to continue or '^' to exit: ? YES//

IR EPCS INTEGRITY CHECK                      DEC 05, 2018  10:30  PAGE 2
**SENSITIVE INFORMATION**
NAME                                          DEA#          HASH STATUS   ACCOUNT STATUS
-----
EPCS, PROVIDER EDNSCII-V                    PE123XXXX    MISMATCH     ACTIVE
EPCS, PROVIDER EDNSCIII-V                   PE234XXXX    MISMATCH     ACTIVE
```

EPCS, PROVIDER EDNSCIV-V	PE345XXXX	MISMATCH	ACTIVE
EPCS, PROVIDER EDSCII-V	PE456XXXX	MISMATCH	ACTIVE
EPCS, PROVIDER EDSCIII-V	PE567XXXX	MISMATCH	ACTIVE
EPCS, PROVIDER EDSCIV-V	PE678XXXX	MISMATCH	ACTIVE
EPCS, PROVIDER ENDSNC		MISMATCH	ACTIVE
EPCS, PROVIDER MA-EPCSCP	AE564XXXX	MISMATCH	ACTIVE
EPCS, PROVIDER NEDSCII-V	PE891XXXX	MISMATCH	ACTIVE
EPCS, PROVIDER NEDSCIV-V	PE145XXXX	MISMATCH	ACTIVE
EPCS, PROVIDER NENDNSNC		MISMATCH	ACTIVE

[END OF REPORT]

Figure 5-14: EPCS Provider Profile Integrity Mismatch Report

5.10 EPCS Provider Certificate Name Report

The **EPCS Provider Certificate Name Report (PCR)** provides information about the digital signing certificates used by EPCS, specifically allowing for a comparison of the name on the certificate and the user name in RPMS. Additionally, the report will show the certificate issuer, expiration date, verification status, and certificate status.

Verification status, listed as Verify Status on the report, denotes whether the EPCS profile has been verified. The options for verification status are proposed, active, and retired. Proposed means the certificate was added to the EPCS profile, but the profile is not yet verified. Active means the certificate was added to the profile, and the profile was verified. Retired means the certificate was once part of the listed user's profile but is no longer attached to that provider. This may happen if the certificate was added to a different user's profile, or if the listed user has obtained a new certificate that was added to their profile.

Certificate status, listed as Cert Status on the report, denotes the status of the certificate according to the issuer. This will be either valid or revoked, though it will be blank when the EPCS provider profile is not verified.

The selection criteria allow for a specific user or users or for all users to be selected as well as selection of the verification status (Active, Retired, Proposed, or All). An example of creating the report is shown in Figure 5-15, while Figure 5-16 shows an example of the report output.

```
Select EPCS Audit Reports Option: PCR  EPCS Provider Certificate
Name Report
Do you want to include DISUSERed and TERMINATED users
in the output? NO//

Enter the list of users to be included in the report.
Hit ENTER at the first user to include ALL users.

Select User Name:
```

```

Enter the certificate verification status to display

      Select one of the following:

      R          RETIRED
      A          ACTIVE
      P          PROPOSED
      L          ALL

Which certificate verification status would you like to display: ALL//

This report requires a 132 character wide printer device

DEVICE: 0;132;9999  VIRTUAL

```

Figure 5-15: Running the EPCS Provider Certificate Name report

RPMS NAME	CERTIFICATE NAME	CERTIFICATE ISSUER	EXP DATE	VERIFY STATUS	CERT STATUS
EPCS,ADMIN USER	Admin U. Epcs -S (Affiliate)	U.S. Government: HHS Certifi	11/20/19	ACTIVE	REVOKED
EPCS,PROVIDER EPCSCP1	Epcs.Provider.E1.0RC3010029079.ID	WidePoint: ORC	09/17/19	RETIRED	VALID
EPCS,PROVIDER EPCSCP2	Provider E. Epcs -S (Affiliate)	U.S. Government: HHS Certifi	11/20/19	PROPOSED	
EPCS,PROVIDER EPCSCP3	Provider Epcs	IdenTrust: IdenTrust Global	06/29/19	ACTIVE	VALID

Figure 5-16: Example EPCS Provider Certificate Name report output

5.11 EPCS Validation Reports

The **EPCS Validation Reports (VAL)** option is used to find providers who have an incomplete configuration, who have a DEA X number, or who have duplicate or similar VA numbers.

5.11.1 Provider Incomplete Configuration

The **Provider Incomplete Configuration (CFG)** report (Figure 5-17) shows all active providers unable to sign CS orders, and the specific deficiencies in the configuration for EPCS. For the purposes of this report, a provider is a user holding the ORES key. If you choose to list the prescribable schedules, then all providers are listed and not just the ones unable to sign. You may opt to include inactive users too.

```

Select the data validation report to run: CFG  Provider Incomplete
Configuration

This report identifies all active providers who are unable to sign
controlled substance orders. For the purposes of this report, a provider is
a user who holds the ORES security key.

The report lists the prescribable schedules for each provider

```

```

(including those providers that are properly configured).

Do you want to include prescribable schedules in the output? NO// y YES

Do you want to include DISUSERed and TERMINATED users
in the output? NO//
Select division: 2017 DEMO CLINIC//          8999
Select another division:
DEVICE: 0;80;999 TELNET

PROVIDER INCOMPLETE CONFIGURATION REPORT          OCT 18, 2018  16:34  PAGE 1
DIVISION: 2017 DEMO CLINIC
PROVIDER NAME                                     DEFICIENCY/PRESCRIBABLE SCHEDULES
-----
EPCS, PROVIDER CHANGEABLE THREE                   Has neither a DEA number nor a VA number.
                                                    Has not been verified as an EPCS provider
                                                    in the credentialing component.
                                                    Is not authorized to write medication
                                                    orders.
                                                    Is permitted to prescribe all schedules.
                                                    Provider hash is good

EPCS, PROVIDER CHANGEABLE TWO                     Has a DEA number with no expiration date.
                                                    Has not been verified as an EPCS provider
                                                    in the credentialing component.
                                                    Is permitted to prescribe all schedules.
                                                    Provider hash is good
                                                    User cannot sign on.

EPCS, PROVIDER CHANGEABLE ONE                     Is permitted to prescribe all schedules.
                                                    Provider hash is good

EPCS, PROVIDER EDNSCII-V                          Is permitted to prescribe all schedules.
                                                    Provider hash does not exist or has been
                                                    tampered

EPCS, PROVIDER EDNSCIII-V                         Is permitted to prescribe schedules III
                                                    NARCOTIC, III NON-NARCOTIC, IV and V.
                                                    Provider hash does not exist or has been
                                                    tampered

                                                    [END OF REPORT]

```

Figure 5-17: Provider Incomplete Configuration

5.11.2 DEA X List

The **DEA X List (DEX)** report (Figure 5-18) shows all users who have a DEA X number assigned. You can choose to include the inactive users or not.

```

Select the data validation report to run: DEX  DEA X List

This report identifies all users who have a DEA X number
in the NEW PERSON FILE (#200).

```

```

Do you want to include DISUSERed and TERMINATED users
in the output? NO//
DEVICE: 0;80;999  TELNET

PROVIDERS WITH A DEA X ID                                DEC 05, 2018  10:32  PAGE 1
                DEA X
NAME                ID NUMBER                ACCOUNT STATUS
-----
EPCS, PROVIDER CHANGEABLE ONE                XE625XXXX                ACTIVE
EPCS, PROVIDER EDNSCIII-V                    XJ123XXXX                ACTIVE
EPCS, PROVIDER EPCS-EPCSCP                    XE564XXXX                ACTIVE
                [END OF REPORT]

```

Figure 5-18: DEA X List

5.11.3 Duplicate VA Numbers

The **Duplicate VA Numbers (DUP)** report shows users who have the same or similar VA Numbers. The system will find numbers that are identical as well as those that differ only by capitalization, hyphens, spaces, etc. as seen in Figure 5-19.

```

Select the data validation report to run: dup Duplicate VA Numbers

This report identifies all users with similar VA numbers. To identify
similar numbers, the software builds a temporary index. First, it removes
all non-alphanumeric characters (such as punctuation and spaces) from the
user's VA number, then changes all letters to uppercase, and finally adds
the VA number to the temporary index. It then uses that index to build a
list of similar or duplicate numbers. For example, kc123, KC 123, and KC-
123 are considered similar.

Do you want to include DISUSERed and TERMINATED users in the output? NO//
DEVICE: TELNET

NON-UNIQUE VA NUMBERS REPORT                            OCT 18, 2018  16:33  PAGE 1
VA#                NAME                                ACCOUNT STATUS
-----
1234567            PROVIDER, TEST A                        ACTIVE
1234567            PROVIDER, TEST D                        ACTIVE
=====
PE-2932            PROVIDER TEST Q                        ACTIVE
PE2932            PROVIDER TEST H                        ACTIVE
=====

                [END OF REPORT]

```

Figure 5-19: Duplicate VA Numbers

5.12 Check Provider EPCS Configuration

The **Check Provider EPCS Configuration (CFGC)** option (Figure 5-20) is for display only (i.e., this is not a printed or exported report). The option allows a user to check the configuration of a single provider. The output will contain the EPCS status, hash status, and authorized schedules.

```
Select the provider: EPCS,PROVIDER NEDSCIV-V      PE

This provider is not able to write controlled substance orders for the
following reasons:
Has neither a DEA number nor a VA number.
Has not been verified as an EPCS provider in the credentialing component.
Provider hash is good

Once all of the issues above are resolved, the provider is permitted to
prescribe all schedules.
```

Figure 5-20: Check Provider EPCS Configuration

5.13 EPCS Export Reports

The **EPCS Export Reports (EXP)** menu meets DEA regulations that require the ability to export orders and prescriptions, though this should be used in extremely rare instances within IHS. The available exports are described in the following sections.

5.13.1 EPCS Ad hoc Provider Order Export

The **EPCS Ad Hoc Provider Order Export (AD)** report can be printed or exported as an XML file. This report mirrors the monthly CS report that providers receive as a notification. The data for this report comes from the ORDER DEA ARCHIVE DATA (101.52), *not* the ORDER (100) file. The printed report is pre-paginated, and an example of the printed report is shown in Figure 5-21. A portion of the XML version as imported into Excel is shown in Figure 5-22.

```
Select EPCS Export Reports <TEST ACCOUNT> Option: AD  EPCS Ad hoc Provider
Order Export

Controlled Substance Ad Hoc Report
The printed report can be printed or sent to an HFS file.
The data export will be created in XML format.

*** Provider Selection ***
Select Prescriber:      EPCS,PROVIDER EDSCII-V      PE

*** Date Range Selection ***
Begin with DATE: DEC 04, 2018//-180  (JUN 08, 2018)
End with DATE: DEC 04, 2018//T  (DEC 05, 2018)

Select one of the following:
```

```

1          Printed Report
2          Data Export

Output Mode: 1//   Printed Report
DEVICE: HOME//   TELNET

Provider Controlled Substances Ad Hoc Report. Run:12/05/2018 10:38
Report Criteria:
  Inclusive Dates: 06/08/2018 to 12/05/2018
  Provider: EPCS, PROVIDER EDSCII-V
  Sorted by: Patient
  Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)
Report contains 2 pages

                                Page 1 of 2
Press Return to continue or '^' to Halt:
                                SENSITIVE INFORMATION
PATIENT NAME                    DRUG NAME                        QTY    SCH  ISSUE DATE  ORD

Provider: EPCS, PROVIDER EDSCII-V
DEMO, PATIENT FOUR              ACETAMINOPHEN/COD #3           20     3    08/01/2018
DEMO, PATIENT FOUR              AMPHETAMINE/DEXTROAM           30     2    07/31/2018
DEMO, PATIENT FOUR              LISDEXAMFETAMINE 10M           60     2    07/31/2018
DEMO, PATIENT FOUR              LISDEXAMFETAMINE 10M           60     2    08/03/2018
DEMO, PATIENT FOUR              METHYLPHENIDATE ER 1            30     2    08/01/2018
DEMO, PATIENT FOUR              OXYCODONE/APAP 5MG/3            2     2    07/30/2018
DEMO, PATIENT ONE-SIX          ACETAMINOPHEN/COD #3           10     3    07/09/2018  B

                                2 of 2
    
```

Figure 5-21: EPCS Ad hoc Provider Order Export

InclusiveDates	Prescriber	TypeData	Patient	Drug	Quantity	DEASchedule	IssueDate	NotDigSig
06/08/2018 to 12/05/2018	Provider: EPCS, PROVIDER EDSCII-V	Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)	DEMO, PATIENT FOUR	ACETAMINOPHEN/COD #3 T	20	3	08/01/2018	
06/08/2018 to 12/05/2018	Provider: EPCS, PROVIDER EDSCII-V	Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)	DEMO, PATIENT FOUR	AMPHETAMINE/DEXTROAMPH	30	2	07/31/2018	
06/08/2018 to 12/05/2018	Provider: EPCS, PROVIDER EDSCII-V	Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)	DEMO, PATIENT FOUR	LISDEXAMFETAMINE 10MG	60	2	07/31/2018	
06/08/2018 to 12/05/2018	Provider: EPCS, PROVIDER EDSCII-V	Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)	DEMO, PATIENT FOUR	LISDEXAMFETAMINE 10MG	60	2	08/03/2018	
06/08/2018 to 12/05/2018	Provider: EPCS, PROVIDER EDSCII-V	Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)	DEMO, PATIENT FOUR	METHYLPHENIDATE ER 18M	30	2	08/01/2018	
06/08/2018 to 12/05/2018	Provider: EPCS, PROVIDER EDSCII-V	Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)	DEMO, PATIENT FOUR	OXYCODONE/APAP 5MG/325	2	2	07/30/2018	
06/08/2018 to 12/05/2018	Provider: EPCS, PROVIDER EDSCII-V	Type of Data: SENSITIVE (CUI:PRVCY), (CUI:HLTH)	DEMO, PATIENT ONE-SIX	ACETAMINOPHEN/COD #3 T	10	3	07/09/2018	B

Figure 5-22: EPCS Ad hoc Provider Order report example

5.13.2 Export Orders for Provider

This option creates an export of the selected provider’s digitally signed orders. The data in this report comes from the ORDER DEA ARCHIVE FILE (101.52), **not** the ORDER (100) file. It must be exported and cannot be printed. The user selects the provider and date range, and whether to include test patients. An example of creating the export is shown in Figure 5-23, and a portion of the resulting export (as imported into Excel) is shown in Figure 5-24.

```

Select EPCS Export Reports <TEST ACCOUNT> Option: ORD  Export Orders for
Provider

Digitally Signed Controlled Substance Order Export
This report is designed for Export ONLY.
The data will be created in XML format for uploading into EXCEL or
    
```

```

uploaded into some other database.

*** Provider Selection ***
Select Prescriber:      EPCS,PROVIDER EDSCII-V      PE

*** Date Range Selection ***
Begin with DATE: DEC 04, 2018//-180 (JUN 08, 2018)
End with DATE: DEC 04, 2018//T (DEC 05, 2018)
Include TEST Patients? No// Y YES
DEVICE: HOME// hfs  HOST FILE SERVER
HOST FILE NAME: F:\TMP\TMP.HFS//F:\EHR-TEST\TMP\ORD.XML
ADDRESS/PARAMETERS: "WNS"//

Won't you queue this ? Y// N NO

```

Figure 5-23: Export Orders for Provider

Patient	Pt Address	Pt C	Pt State	Pt ZIP	Provider	Provider DEA	Prov Address	Prov City	Prov State	Prov	Drug
DEMO,PATIENT ONE-SIX		ALB	NEW MEXICO	87119	EPCS,PROVIDER EDSCII-V	PE	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110	ACETAMINOPHEN/COD #
DEMO,PATIENT FOUR		ALB	NEW MEXICO	87119	EPCS,PROVIDER EDSCII-V	PE	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110	OXYCODONE/APAP 5MG/
DEMO,PATIENT FOUR		ALB	NEW MEXICO	87119	EPCS,PROVIDER EDSCII-V	PE	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110	LISDEXAMFETAMINE 10M
DEMO,PATIENT FOUR		ALB	NEW MEXICO	87119	EPCS,PROVIDER EDSCII-V	PE	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110	AMPHETAMINE/DEXTROA
DEMO,PATIENT FOUR		ALB	NEW MEXICO	87119	EPCS,PROVIDER EDSCII-V	PE	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110	METHYLPHENIDATE ER 18
DEMO,PATIENT FOUR		ALB	NEW MEXICO	87119	EPCS,PROVIDER EDSCII-V	PE	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110	ACETAMINOPHEN/COD #
DEMO,PATIENT FOUR		ALB	NEW MEXICO	87119	EPCS,PROVIDER EDSCII-V	PE	2017 DEMO CLINIC 5300 Homestead RD NE	ALBUQUERQUE	NEW MEXICO	87110	LISDEXAMFETAMINE 10M

Figure 5-24: Export Orders for Provider example

5.13.3 Digitally Signed Rxs Export

This option is the same as the Pharmacy Dig Sig Rx Export (RXE) described previously in Section 5.5.

5.14 Controlled Substance Management

The **Controlled Substance Management (CSM)** report (Figure 5-25) has a new option for EPCS Provider. Within this category, users may choose one or all providers and can include only EPCS (digitally signed) or all CS orders. This report is not fully compliant with regulatory requirements, so it is only here to provide information to pharmacy users. Other reports listed contain all required information for EPCS reporting and should be used preferentially.

```

Controlled Substance Management Report

*** Date Range Selection ***
Begin with DATE: DEC 03, 2018//-30 (NOV 04, 2018)
End with DATE: DEC 03, 2018//t (DEC 04, 2018)
Would you like all pharmacy divisions? Yes// YES

Select one of the following:

1          C-II
2          C-II through C-V
3          C-III through C-V

Drug Class Types: 2// C-II through C-V

```

Select one of the following:

- 1 Summary
- 2 Detail
- 3 EPCS Provider

Report Type: 2// 3 EPCS Provider
 Would you like all prescribers? Yes// YES
 EPCS orders only? Yes// YES

Select one of the following:

- 1 Standard Report
- 2 Data Export

Output Mode: 1// Standard Report
 Would you like dosing information included? Yes// YES
 Do you want CMOP fills included? Yes// YES
 Include TEST Patients? No// y YES
 DEVICE: HOME// 0;80;9999 TELNET

Controlled Substance Management Report (Detail) 12/04/2018 16:12 Page: 1

Report Criteria:

Inclusive Dates: 11/04/2018 to 12/04/2018
 Pharmacy Division: All
 Drug Class: C-II through C-V
 Sorted by: Provider, Signed Date, Drug Name, Patient
 CMOP meds: Included
 Test Pts: Included

```

-----
Date Signed. Drug Patient HRN
Rx Number
Drug Schedule
Nature Qty Days Supply Refills left CMOP/Mail Pharmacy
Dosage Ordered
    
```

Pharmacy Division: 2017 DEMO PHARMACY

Provider: EPCS, PROVIDER A DEA: AE098XXXX

```

11/30/2018 12:18 CLONAZEPAM 1MG TAB DEMO,PATIENT ACL
XXXX72
514032
C-IV
ELEC 60 30 0 Internal
Dosing:TAKE ONE (1) TABLET BY MOUTH TWICE A DAY
    
```

```

11/29/2018 18:59 LORAZEPAM 0.5MG TAB DEMO,PATIENT ACF
XXXX62
514031
C-IV
ELEC 20 10 0 Internal
Dosing:TAKE ONE (1) TABLET BY MOUTH TWICE A DAY IF NEEDED FOR ANXIETY
    
```

```
12/04/2018 13:44    AMPHETAMINE/DEXTROAMPHET XR 10MG CAPDEMO,PATIENT THR
XXXX42
514033
          C-II
ELEC      7          7          0          Internal
Dosing:TAKE ONE (1) CAPSULE BY MOUTH DAILY FOR ADHD

Report Totals

Drug Name                                # of fills
AMPHETAMINE/DEXTROAMPHET XR 10MG CAP    1
CLONAZEPAM 1MG TAB                       1
LORAZEPAM 0.5MG TAB                      1
Total fills (new, refill, and partial): 3
```

Figure 5-25: Controlled Substance Management

Appendix A: Pharmacy Responsibilities

The EPCS regulations specify the Pharmacy responsibilities in sections 1311.200 and 1311.215. The relevant text of each of these sections follows:

§1311.200 Pharmacy responsibilities

(a) Before initially using a pharmacy application to process controlled substance prescriptions, the pharmacy must determine that the third-party auditor or certification organization has found that the pharmacy application does the following accurately and consistently:

(1) Import, store, and display the information required for prescriptions under Section 1306.05(a) of this chapter.

(2) Import, store, and display the indication of signing as required by Section 1311.120(b)(17).

(3) Import, store, and display the number of refills as required by Section 1306.22 of this chapter.

(4) Import, store, and verify the practitioner's digital signature, as provided in Section 1311.210(c), where applicable.

(b) If the third-party auditor or certification organization has found that a pharmacy application does not accurately and consistently import, store, and display other information required for prescriptions under this chapter, the pharmacy must not process electronic prescriptions for controlled substances that are subject to the additional information requirements.

(c) If a pharmacy application provider notifies a pharmacy that a third-party audit or certification report indicates that the application or the application provider no longer meets the requirements of this part or notifies it that the application provider has identified an issue that makes the application non-compliant, the pharmacy must immediately cease to process controlled substance prescriptions using the application.

(d) A pharmacy that receives a notification that the pharmacy application is not in compliance with the requirements of this part must not use the application to process controlled substance prescriptions until it is notified that the application is again compliant and all relevant updates to the application have been installed.

(e) The pharmacy must determine which employees are authorized to enter information regarding the dispensing of controlled substance prescriptions and annotate or alter records of these prescriptions (to the extent such alterations are permitted under this chapter). The pharmacy must ensure that logical access controls in the pharmacy application are set so that only such employees are granted access to perform these functions.

(f) When a pharmacist fills a prescription in a manner that would require, under part 1306 of this chapter, the pharmacist to make a notation on the prescription if the prescription were a paper prescription, the pharmacist must make the same notation electronically when filling an electronic prescription and retain the annotation electronically in the prescription record or in linked files. When a prescription is received electronically, the prescription and all required annotations must be retained electronically.

(g) When a pharmacist receives a paper or oral prescription that indicates that it was originally transmitted electronically to the pharmacy, the pharmacist must check its records to ensure that the electronic version was not received and the prescription dispensed. If both prescriptions were received, the pharmacist must mark one as void.

(h) When a pharmacist receives a paper or oral prescription that indicates that it was originally transmitted electronically to another pharmacy, the pharmacist must check with that pharmacy to determine whether the prescription was received and dispensed. If the pharmacy that received the original electronic prescription had not dispensed the prescription, that pharmacy must mark the electronic version as void or canceled. If the pharmacy that received the original electronic prescription dispensed the prescription, the pharmacy with the paper version must not dispense the paper prescription and must mark the prescription as void.

(i) Nothing in this part relieves a pharmacy and pharmacist of the responsibility to dispense controlled substances only pursuant to a prescription issued for a legitimate medical purpose by a practitioner acting in the usual course of professional practice.

§1311.215(c) Internal Audit Trail

(c) The pharmacy must determine whether any identified auditable event represents a security incident that compromised or could have compromised the integrity of the prescription records. Any such incidents must be reported to the pharmacy application service provider, if applicable, and the Administration within one business day.

Appendix B: Rules of Behavior

The Resource and Patient Management (RPMS) system is a United States Department of Health and Human Services (HHS), Indian Health Service (IHS) information system that is **FOR OFFICIAL USE ONLY**. The RPMS system is subject to monitoring; therefore, no expectation of privacy shall be assumed. Individuals found performing unauthorized activities are subject to disciplinary action including criminal prosecution.

All users (Contractors and IHS Employees) of RPMS will be provided a copy of the Rules of Behavior (ROB) and must acknowledge that they have received and read them prior to being granted access to a RPMS system, in accordance IHS policy.

- For a listing of general ROB for all users, see the most recent edition of *IHS General User Security Handbook* (SOP 06-11a).
- For a listing of system administrators/managers rules, see the most recent edition of the *IHS Technical and Managerial Handbook* (SOP 06-11b).

Both documents are available at this IHS Web site: <http://security.ihs.gov/>.

The ROB listed in the following sections are specific to RPMS.

B.1 All RPMS Users

In addition to these rules, each application may include additional ROB that may be defined within the documentation of that application (e.g., Dental, Pharmacy).

B.1.1 Access

RPMS users shall

- Only use data for which you have been granted authorization.
- Only give information to personnel who have access authority and have a need to know.
- Always verify a caller's identification and job purpose with your supervisor or the entity provided as employer before providing any type of information system access, sensitive information, or nonpublic agency information.
- Be aware that personal use of information resources is authorized on a limited basis within the provisions *Indian Health Manual* Part 8, "Information Resources Management," Chapter 6, "Limited Personal Use of Information Technology Resources."

RPMS users shall not

- Retrieve information for someone who does not have authority to access the information.

- Access, research, or change any user account, file, directory, table, or record not required to perform their *official* duties.
- Store sensitive files on a PC hard drive, or portable devices or media, if access to the PC or files cannot be physically or technically limited.
- Exceed their authorized access limits in RPMS by changing information or searching databases beyond the responsibilities of their jobs or by divulging information to anyone not authorized to know that information.

B.1.2 Information Accessibility

RPMS shall restrict access to information based on the type and identity of the user. However, regardless of the type of user, access shall be restricted to the minimum level necessary to perform the job.

RPMS users shall

- Access only those documents they created and those other documents to which they have a valid need-to-know and to which they have specifically granted access through an RPMS application based on their menus (job roles), keys, and FileMan access codes. Some users may be afforded additional privileges based on the functions they perform, such as system administrator or application administrator.
- Acquire a written preauthorization in accordance with IHS policies and procedures prior to interconnection to or transferring data from RPMS.

B.1.3 Accountability

RPMS users shall

- Behave in an ethical, technically proficient, informed, and trustworthy manner.
- Log out of the system whenever they leave the vicinity of their personal computers (PCs).
- Be alert to threats and vulnerabilities in the security of the system.
- Report all security incidents to their local Information System Security Officer (ISSO)
- Differentiate tasks and functions to ensure that no one person has sole access to or control over important resources.
- Protect all sensitive data entrusted to them as part of their government employment.
- Abide by all Department and Agency policies and procedures and guidelines related to ethics, conduct, behavior, and information technology (IT) information processes.

B.1.4 Confidentiality

RPMS users shall

- Be aware of the sensitivity of electronic and hard copy information, and protect it accordingly.
- Store hard copy reports/storage media containing confidential information in a locked room or cabinet.
- Erase sensitive data on storage media prior to reusing or disposing of the media.
- Protect all RPMS terminals from public viewing at all times.
- Abide by all Health Insurance Portability and Accountability Act (HIPAA) regulations to ensure patient confidentiality.

RPMS users shall not

- Allow confidential information to remain on the PC screen when someone who is not authorized to that data is in the vicinity.
- Store sensitive files on a portable device or media without encrypting.

B.1.5 Integrity

RPMS users shall

- Protect their systems against viruses and similar malicious programs.
- Observe all software license agreements.
- Follow industry standard procedures for maintaining and managing RPMS hardware, operating system software, application software, and/or database software and database tables.
- Comply with all copyright regulations and license agreements associated with RPMS software.

RPMS users shall not

- Violate federal copyright laws.
- Install or use unauthorized software within the system libraries or folders.
- Use freeware, shareware, or public domain software on/with the system without their manager's written permission and without scanning it for viruses first.

B.1.6 System Logon

RPMS users shall

- Have a unique User Identification/Account name and password.

- Be granted access based on authenticating the account name and password entered.
- Be locked out of an account after five successive failed login attempts within a specified time period (e.g., one hour).

B.1.7 Passwords

RPMS users shall

- Change passwords a minimum of every 90 days.
- Create passwords with a minimum of eight characters.
- If the system allows, use a combination of alpha-numeric characters for passwords, with at least one uppercase letter, one lower case letter, and one number. It is recommended, if possible, that a special character also be used in the password.
- Change vendor-supplied passwords immediately.
- Protect passwords by committing them to memory or store them in a safe place (do not store passwords in login scripts or batch files).
- Change passwords immediately if password has been seen, guessed, or otherwise compromised, and report the compromise or suspected compromise to their ISSO.
- Keep user identifications (IDs) and passwords confidential.

RPMS users shall not

- Use common words found in any dictionary as a password.
- Use obvious readable passwords or passwords that incorporate personal data elements (e.g., user's name, date of birth, address, telephone number, or social security number; names of children or spouses; favorite band, sports team, or automobile; or other personal attributes).
- Share passwords/IDs with anyone or accept the use of another's password/ID, even if offered.
- Reuse passwords. A new password must contain no more than five characters per eight characters from the previous password.
- Post passwords.
- Keep a password list in an obvious place, such as under keyboards, in desk drawers, or in any other location where it might be disclosed.
- Give a password out over the phone.

B.1.8 Backups

RPMS users shall

- Plan for contingencies such as physical disasters, loss of processing, and disclosure of information by preparing alternate work strategies and system recovery mechanisms.
- Make backups of systems and files on a regular, defined basis.
- If possible, store backups away from the system in a secure environment.

B.1.9 Reporting

RPMS users shall

- Contact and inform their ISSO that they have identified an IT security incident and begin the reporting process by providing an IT Incident Reporting Form regarding this incident.
- Report security incidents as detailed in the *IHS Incident Handling Guide* (SOP 05-03).

RPMS users shall not

- Assume that someone else has already reported an incident. The risk of an incident going unreported far outweighs the possibility that an incident gets reported more than once.

B.1.10 Session Timeouts

RPMS system implements system-based timeouts that back users out of a prompt after no more than 5 minutes of inactivity.

RPMS users shall

- Utilize a screen saver with password protection set to suspend operations at no greater than 10 minutes of inactivity. This will prevent inappropriate access and viewing of any material displayed on the screen after some period of inactivity.

B.1.11 Hardware

RPMS users shall

- Avoid placing system equipment near obvious environmental hazards (e.g., water pipes).
- Keep an inventory of all system equipment.
- Keep records of maintenance/repairs performed on system equipment.

RPMS users shall not

- Eat or drink near system equipment.

B.1.12 Awareness

RPMS users shall

- Participate in organization-wide security training as required.
- Read and adhere to security information pertaining to system hardware and software.
- Take the annual information security awareness.
- Read all applicable RPMS manuals for the applications used in their jobs.

B.1.13 Remote Access

Each subscriber organization establishes its own policies for determining which employees may work at home or in other remote workplace locations. Any remote work arrangement should include policies that

- Are in writing.
- Provide authentication of the remote user through the use of ID and password or other acceptable technical means.
- Outline the work requirements and the security safeguards and procedures the employee is expected to follow.
- Ensure adequate storage of files, removal, and nonrecovery of temporary files created in processing sensitive data, virus protection, and intrusion detection, and provide physical security for government equipment and sensitive data.
- Establish mechanisms to back up data created and/or stored at alternate work locations.

Remote RPMS users shall

- Remotely access RPMS through a virtual private network (VPN) whenever possible. Use of direct dial in access must be justified and approved in writing and its use secured in accordance with industry best practices or government procedures.

Remote RPMS users shall not

- Disable any encryption established for network, internet, and Web browser communications.

B.2 RPMS Developers

RPMS developers shall

- Always be mindful of protecting the confidentiality, availability, and integrity of RPMS when writing or revising code.
- Always follow the IHS RPMS Programming Standards and Conventions (SAC) when developing for RPMS.
- Only access information or code within the namespaces for which they have been assigned as part of their duties.
- Remember that all RPMS code is the property of the U.S. Government, not the developer.
- Not access live production systems without obtaining appropriate written access, and shall only retain that access for the shortest period possible to accomplish the task that requires the access.
- Observe separation of duties policies and procedures to the fullest extent possible.
- Document or comment all changes to any RPMS software at the time the change or update is made. Documentation shall include the programmer's initials, date of change, and reason for the change.
- Use checksums or other integrity mechanism when releasing their certified applications to assure the integrity of the routines within their RPMS applications.
- Follow industry best standards for systems they are assigned to develop or maintain, and abide by all Department and Agency policies and procedures.
- Document and implement security processes whenever available.

RPMS developers shall not

- Write any code that adversely impacts RPMS, such as backdoor access, "Easter eggs," time bombs, or any other malicious code or make inappropriate comments within the code, manuals, or help frames.
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

B.3 Privileged Users

Personnel who have significant access to processes and data in RPMS, such as, system security administrators, systems administrators, and database administrators, have added responsibilities to ensure the secure operation of RPMS.

Privileged RPMS users shall

- Verify that any user requesting access to any RPMS system has completed the appropriate access request forms.
- Ensure that government personnel and contractor personnel understand and comply with license requirements. End users, supervisors, and functional managers are ultimately responsible for this compliance.
- Advise the system owner on matters concerning information technology security.
- Assist the system owner in developing security plans, risk assessments, and supporting documentation for the certification and accreditation process.
- Ensure that any changes to RPMS that affect contingency and disaster recovery plans are conveyed to the person responsible for maintaining continuity of operations plans.
- Ensure that adequate physical and administrative safeguards are operational within their areas of responsibility and that access to information and data is restricted to authorized personnel on a need-to-know basis.
- Verify that users have received appropriate security training before allowing access to RPMS.
- Implement applicable security access procedures and mechanisms, incorporate appropriate levels of system auditing, and review audit logs.
- Document and investigate known or suspected security incidents or violations and report them to the ISSO, Chief Information Security Officer (CISO), and systems owner.
- Protect the supervisor, superuser, or system administrator passwords.
- Avoid instances where the same individual has responsibility for several functions (i.e., transaction entry and transaction approval).
- Watch for unscheduled, unusual, and unauthorized programs.
- Help train system users on the appropriate use and security of the system.
- Establish protective controls to ensure the accountability, integrity, confidentiality, and availability of the system.
- Replace passwords when a compromise is suspected. Delete user accounts as quickly as possible from the time that the user is no longer authorized system. Passwords forgotten by their owner should be replaced, not reissued.
- Terminate user accounts when a user transfers or has been terminated. If the user has authority to grant authorizations to others, review these other authorizations. Retrieve any devices used to gain access to the system or equipment. Cancel logon IDs and passwords, and delete or reassign related active and backup files.

- Use a suspend program to prevent an unauthorized user from logging on with the current user's ID if the system is left on and unattended.
- Verify the identity of the user when resetting passwords. This can be done either in person or having the user answer a question that can be compared to one in the administrator's database.
- Shall follow industry best standards for systems they are assigned to, and abide by all Department and Agency policies and procedures.

Privileged RPMS users shall not

- Access any files, records, systems, etc., that are not explicitly needed to perform their duties
- Grant any user or system administrator access to RPMS unless proper documentation is provided.
- Release any sensitive agency or patient information.

Glossary

APSP

The namespace of the IHS modifications to the Outpatient Pharmacy Suite.

Backdoor Order

A pharmacy order that is not entered using RPMS EHR but is entered by the pharmacist using the RPMS Pharmacy options.

Controlled Substance

This is any medication that has a DEA level of 1-5 assigned to it. A controlled substance requires a user to have a DEA# in order to prescribe it.

C2

Class 2 Controlled Substance – A C2 medication is the strongest and most regulated that can be prescribed. Although C1 medications exist, they may not be prescribed. Rules generally restrict the number of refills to 0 and many states have enacted specific rules on the number of pills and the number of days they may be prescribed. May also be referred to as C-II or CII.

C35

Class 3 through 5 Controlled Substances. These categories have fewer Federal restrictions but may have additional state regulations. May also be referred to as C-III-V.

DEA X

A special DEA authorization to prescribe narcotic addiction treatment to outpatients. Also known as a Narcotics Addiction DEA Number or NADEAN.

Digital Signature

A digital signature is an encoded and hashed version of the data in the prescription that is stored in a file in RPMS. This digital signature can be compared at a later date with the current data in the file to see if anything has been modified by unauthorized entry into the files.

eRx

Electronic prescribing or an electronic prescription.

Hard Copy

A prescription order that has been printed and the provider has written their signature on the paper form.

Multi-Factor Authentication

This term indicates that a user must authenticate using more than one method. The most recognizable example for the average user will be an ATM, where you must have both a card and a PIN to get cash. If only one method is presented, no cash is dispensed. The most common methods of authentication are:

- Something you have, such as a card or token.
- Something you know, such as a password or PIN.
- Something you are, such as a fingerprint or facial scan.

Rx or Rxs

A prescription or prescriptions.

Two-Factor Authentication

A type of multi-factor authentication. With EPCS, providers must digitally sign controlled substance orders with a method of 2FA. These orders then are limited in the actions that can be taken against them.

Acronym List

Acronym	Meaning
2FA	Two-Factor Authentication
CS	Controlled Substance
CISO	Chief Information Security Officer
CPO	Complete Pending Orders
DEA	Drug Enforcement Administration
DOB	Date of Birth
DS	Digitally Signed
EFDT	Earliest Fill Date
EHR	Electronic Health Record
EPCS	Electronic Prescribing of Controlled Substances
eRx	Electronic Prescription
HC	Hard Copy
HHS	Department of Health and Human Services
HIPAA	Health Insurance Portability and Accountability Act
HRN	Health Record Number
IEN	Internal Entry Number
IHS	Indian Health Service
ISSO	Information System Security Officer
IT	Information Technology
LM	List Manager
NIST	National Institute of Standards and Technology
OE/RR	Order Entry/Results Reporting
OIT	Office of Information Technology
ONC	Office of the National Coordinator
PC	Personal Computer
QTY	Quantity
ROB	Rules of Behavior
RPMS	Resource and Patient Management System
SAC	Standards and Conventions
VA	U.S. Department of Veterans Affairs
VPN	Virtual Private Network
XML	eXtensible Markup Language

Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk (IHS).

Phone: (888) 830-7280 (toll free)

Web: <http://www.ihs.gov/helpdesk/>

Email: support@ihs.gov