

ADDITION OF A UNIQUE IDENTIFIER TO THE FACILITY DEA NUMBER IN RPMS

Background: Contract providers with out of state licenses, as well as permanent providers who have not yet received their DEA number, may use the facility DEA number as outlined in Indian Health Manual Chapter 7.

Chapter 7 (<https://www.ihs.gov/ihm/pc/part-3/p3c7/>)

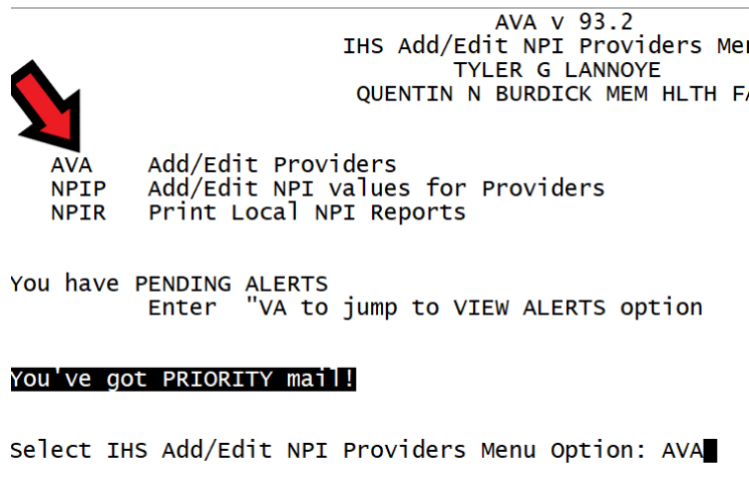
A. Contract Prescribers Not Licensed in the State Where Delivering Services.

In accordance with DEA approved protocols, a facility DEA number may be assigned followed by a hyphen and a unique identifier for the prescriber, including locum tenens practitioners. This provider-specific identifier will be maintained in an area designated by the facility and will be readily retrievable. This provider-specific identifier can only be used within the confines of the SU and is not permitted for prescribing of controlled substances outside of the SU.

To comply with IHS Chapter 7 and DEA approved protocols, follow these instructions to enter the unique identifier into RPMS under the provider profile as shown in the following screen shots. These instructions are for entry through the Add/Edit Providers menu in RPMS. The first set of instructions is for systems who have not yet installed RPMS Electronic Prescribing of Controlled Substances (EPCS) and/or enabled specific providers for EPCS. The second set is for those who are using EPCS.

If EPCS is not yet installed *and* enabled for a provider at your location:

1. Navigate to the AVA Add/Edit Providers Menu



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AVA v 93.2
IHS Add/Edit NPI Providers Men
TYLER G LANNOYE
QUENTIN N BURDICK MEM HLTH F/

AVA Add/Edit Providers
NPIP Add/Edit NPI values for Providers
NPIR Print Local NPI Reports

You have PENDING ALERTS
Enter "VA to jump to VIEW ALERTS option

You've got PRIORITY mail!!

select IHS Add/Edit NPI Providers Menu option: AVA
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2. Select the provider you wish to edit

ADD/EDIT PROVIDERS

Use this option to add new providers to your system OR to edit those already in the system. You do NOT need to enter the provider as a person first. Just use this option.

Enter NEW PERSON's name (Family, Given Middle Suffix): PAIN, STEWARDSHIP

3. Enter in all required fields and when you get to the DEA field, leave blank. This will be auto populated in the prescription file with the facility DEA number and the unique identifier. In the VA# field, add a unique identifier of your choice. Choose a system that works for your facility and can be tracked to ensure that it is unique and is readily retrievable. Note character limits in PDMP transmission of the unique identifier (see below).

DEA#:
DEA EXPIRATION DATE:
DEA X:
VA#: MME

If your location is using RPMS EPCS, and the particular provider is enabled for EPCS, the steps to add the VA number are different.

- VA numbers still retain full functionality after the EPCS patch
- VA Numbers can still be entered/edited thru RPMS for NON-EPCS enabled providers

Once the provider has been enabled to use EPCS, then the VA Numbers can only be entered/edited using the EPCS system's graphical user interface for editing provider data. This includes split role functionality where User1 will make a change and User2 will verify the change. Detailed information on setting up providers for EPCS is included in those specific trainings and documentation and is outside of the scope of this quick reference document.

Partial screenshot:

PROVIDER.TEST THREE

Provider Info

Authorized to Write Med Orders

EPCS Status Active Inactive

DEA Number

VA Number

DEA Expiration Date

DEA X

Schedules

Schedule II Narcotic

Schedule II Non Narcotic

Schedule III Narcotic

Schedule III Non Narcotic

Schedule IV

Schedule V

Regardless of method of entry, the facility DEA number will be transmitted to PDMPs with the VA# attached **only if** you have enabled the DEA NUMBER SUFFIX field in the BPDN parameters to transmit to the PDMP. Please ensure this field #76 is set to transmit (see below)

Use this menu option to access this list: USRE Update State Required Data Elements

65)	DSP17	DATE SOLD	NOT REQUIRED
66)	DSP18	RXNORM QUALIFIER FIELD	NOT REQUIRED
67)	DSP19	RXNORM CODE	NOT REQUIRED
68)	DSP20	ELECTRONIC RX REF NUMBER	NOT REQUIRED
69)	DSP21	ELECTRONIC RX ORDER NUMBE	NOT REQUIRED
70)	DSP22	QUANTITY PRESCRIBED	NOT REQUIRED
71)	DSP23	RX SIG	NOT
72)	DSP24	TREATMENT TYPE	NOT
73)	DSP25	DIAGNOSIS CODE	NOT
74)	PRE01	PROVIDER NPI	NOT REQUIRED
75)	PRE02	PROVIDER DEA NUMBER	REQUIRED BY ASAP
76)	PRE03	DEA NUMBER SUFFIX	NOT REQUIRED
77)	PRE04	PRESCRIBER STATE LICENSE	NOT REQUIRED
78)	PRE05	PROVIDER LAST NAME	NOT REQUIRED
79)	PRE06	PROVIDER FIRST NAME	NOT REQUIRED
80)	PRE07	PROVIDER MIDDLE NAME	NOT REQUIRED

Enter ?? for more actions

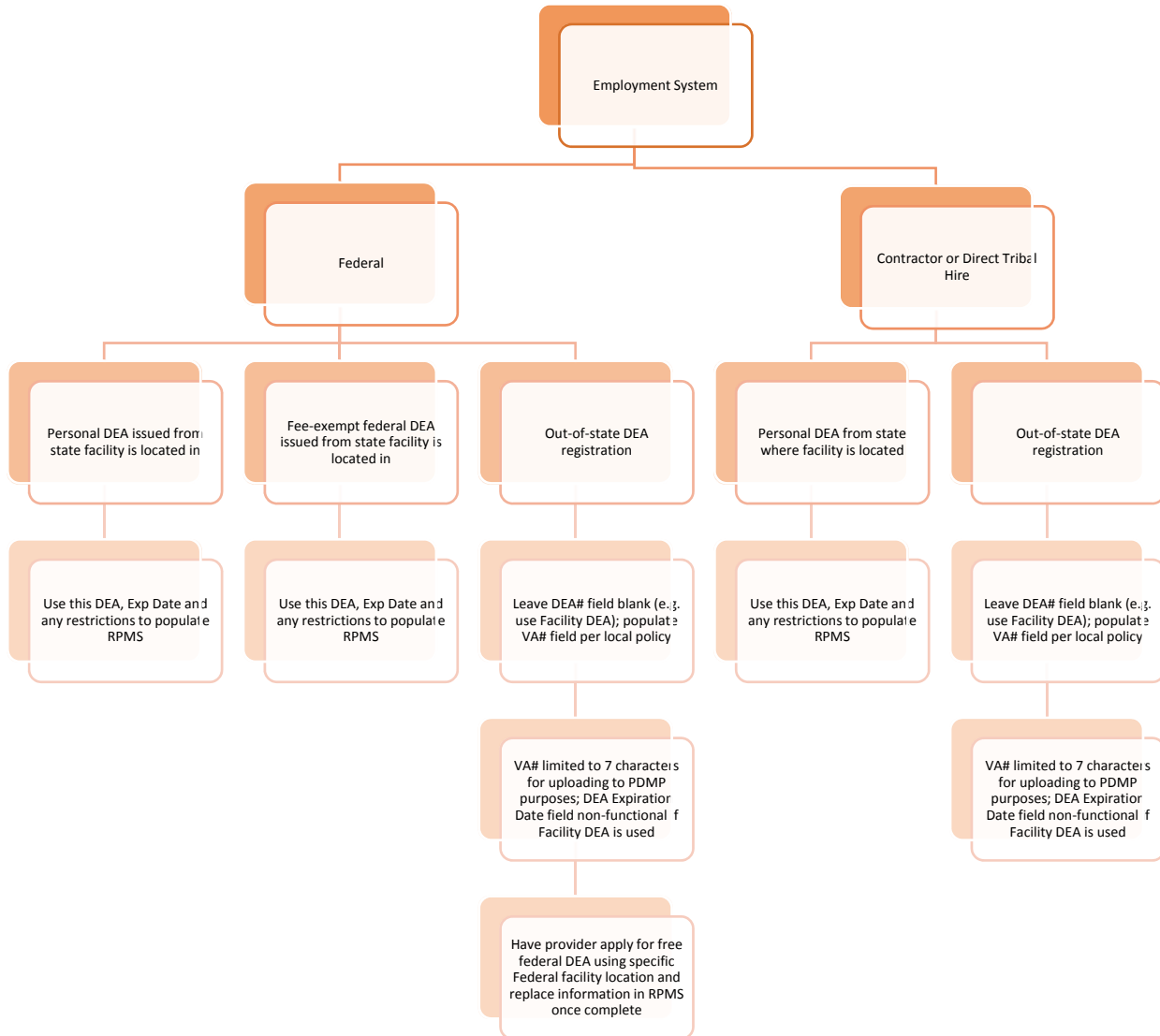
Make Required

If this is not set to required, only the facility DEA# will be transmitted.

NOTE: This field 76) PRE03 is limited to 7 characters for transmission

Decision Tree:

In all cases, if a provider also is registered for the X DEA Number, populate in RPMS under the “DEA X” field IN ADDITION to the regular DEA information.



NOTES

For Federal employees with an out-of-state DEA registration:

For clarification, regardless of the type of DEA license the provider has (“regular” vs Federal FEDDOC fee exempt license) if a provider changes their official business address, they must update their address with the DEA.

These FAQs apply to “regular” DEA licenses:

<https://www.deadiversion.usdoj.gov/drugreg/faq.htm#4>

Question: Are separate registrations required for separate locations?

Answer: A separate registration is required for each principal place of business or professional practice where controlled substances are stored, administered, or dispensed by a person. If a practitioner will only be prescribing from another location(s) situated within the same state, then an additional registration is not necessary.

Question: What happens if a practitioner/physician relocates his/her business?

Answer: A practitioner who moves to a new physical location must request a modification of registration. A modification is handled in the same manner as a new application and must be approved by DEA. A modification of registration can be requested online at www.DEAdiversion.usdoj.gov or by writing to the local DEA Registration Program Specialist responsible for the area in which the new office is located. If the change of address involves a change in the state, the proper state issued license and, if applicable, state controlled substances registration must be obtained prior to the request to DEA for an address change. If the modification is approved, DEA will issue a new certificate of registration. The registrant should maintain the new certificate with the old certificate until expiration.

Therefore, when a provider moves to a new state to work as a direct employee of a federal government agency, they will still need to update their address on their “regular” DEA license. They may do this if they wish. However, this will require them to get a new DEA registration in the new state. As an alternative, in order to avoid paying for a new state DEA registration, the FEDDOC program allows them to apply for a fee exempt DEA license that can be updated with new addresses as needed in the future with no fees associated.

A DEA memo dated 7/23/2010, titled “Revised Policy Regarding the Federal Government Doctor (FEDDOC) Program (DFN: 601-04)” is provided and can be found here:

https://www.ihs.gov/sites/opioids/themes/responsive2017/display_objects/documents/DEA_FEDDOC_Policy.pdf

Special Circumstances:

If you are participating in the FEDDOC program and if you are going to be prescribing or dispensing controlled substances at sites in different states or cities simultaneously, you would need to have 2 separate DEA numbers. If you are practicing at 2 different sites in the same city, you would need to contact the state office of the DEA, let them know that you are going to be adding a practice location, and ask how that should be handled. There is significant state-to-state variation in what is required.