

# Changes to CII Prescribing – Frequently Asked Questions

February 2005

## **Can I still post-date schedule II prescriptions if the Utah Controlled Substance Act Rules still allow this practice?**

No. The recent Federal Register ruling supersedes any state regulations that allow postdating. Federal regulations allow states to be more restrictive in their controlled substance policies. However, if the federal regulations are stricter than the individual state's, the state must comply with the federal standards and may not have less restrictive regulations. Since the Federal Register has revoked the practice of postdating, State Boards of Pharmacy may not override this ruling.

## **Can the pharmacy department change their policy and still accept post-dated schedule II prescriptions?**

No. It is no longer legal for pharmacies to accept "post-dated" prescriptions for schedule II controlled substances. This is a federal regulation, not a departmental policy.

## **How are the Utah regulatory agencies responding to the federal action?**

The Utah State Board of Pharmacy and the Division of Occupational and Professional Licensing (DOPL) have not formally responded to the federal action. Currently, DOPL is advising prescribers and pharmacies to use their best professional judgment in caring for their patients, and to act within the limits of the law.

## **Who can I contact to formally express my concerns about these changes in schedule II prescribing regulations?**

- National: The Drug Enforcement Agency (DEA) national liaison may be reached at 202-307-7296.
- Prescribers and pharmacists from the University of Utah Health System may contact Dr. Mark Munger at 801-581-6165. Dr. Munger is a pharmacist who currently serves on the Utah State Board of Pharmacy
- Prescribers and pharmacists licensed in the state of Utah may email Diana Baker of DOPL at [dbaker@utah.gov](mailto:dbaker@utah.gov) or contact DOPL by phone at 801-530-6628. When contacting DOPL, explain your concerns as clearly as possible but avoid using any profanity.

## **What are the quantity limits for prescribing schedule II controlled substances in Utah?**

The Utah Controlled Substances Act Rules specify a 30-day supply as the maximum quantity that may be prescribed for schedule II controlled substances at any one time.

## **How long do patients have to fill prescriptions for schedule II controlled substances once the prescription is written?**

Federal regulations do not specify how much time may elapse between writing and dispensing the prescription. In Utah, prescriptions for Schedule II substances must be presented to the pharmacy within 30 days of when the prescription is written. Because requirements may differ in other states, prescribers and pharmacists should consult the Controlled Substance Act of the individual state.

**Can prescribers still specify a "future fill" date on schedule II prescriptions if the prescription is properly dated?**

This situation might arise when a prescriber writes the actual date of prescribing on the prescription, but then specifies in the sig (or instructions to the patient and pharmacy) a date within the next 30 days when the prescription may be filled. Because this "future-fill" date is within 30 days of prescribing and the prescription is not post-dated, this practice is still allowed, assuming the prescription meets all other legal requirements.

**Can mail order pharmacies in other states fill prescriptions for greater quantities of schedule II controlled substances (compared with pharmacies located in Utah)?**

No. The Utah Pharmacy Practice Act Rules and the Utah Controlled Substances Act Rules require that mail order pharmacies be licensed with the state of Utah, in order to fill prescriptions for patients living in Utah. As such, mail order pharmacies must comply with Utah's regulations for filling prescriptions, including prescriptions for controlled substances. This means that out-of-state mail order pharmacies must abide by the same quantity limits and fill limits as pharmacies located within Utah.

**What is the best way for specialty prescribers to manage patients on stable, long-term therapy with schedule II controlled substances (such as long-term therapy for ADHD)? What if the patient lives hundreds of miles away and is only seen in the specialty clinic twice a year?**

In these cases, it may be desirable for the specialty prescriber to coordinate with the patient's local prescriber. The local prescriber could prescribe the schedule II controlled substances in between visits to the specialty clinic, as directed by the specialty prescriber.

**Can I write controlled substance prescriptions ahead of time for my long-term patients if I lock the prescriptions in my office safe, and mail to the patient after the date written on the prescription?**

No. This practice would not be advised, as it circumvents the intent of the DEA ruling. This practice also increases the risk of possible diversion of the prescriptions by office staff while the prescriptions are in the safe, or by other parties once the prescriptions are mailed. If prescriptions for controlled substances are sent to patients through the mail, it is advisable to send them via Federal Express or certified mail. This way, the prescriber has made every attempt possible to ensure that the prescription gets to the correct person and is not intercepted or diverted.

**How should we handle hospital discharge prescriptions for indigent patients? If the patient can only afford a small quantity (i.e. 3-day supply) prior to arranging funding, can I write two prescriptions for the same schedule II controlled substance on the day of discharge, if the total quantity prescribed is only a 30-day supply?**

These situations can be handled in two ways, based on which works best for the specific patient:

1. The discharging prescriber may prescribe a small supply (i.e., 3-day supply) to be filled at discharge and then coordinate with the patient's local prescriber to get the patient the remaining supply. The local prescriber could prescribe the remainder of the 30-day supply once the patient reaches home and arranges funding, as directed by the specialty prescriber.
2. The discharging prescriber may write two prescriptions for the same schedule II controlled substance, so long as the total quantity prescribed is no more than a 30-day supply. The first prescription would be written for a small quantity (i.e., 3-day supply) and would be filled at the time of discharge. The second prescription would be written for the remainder (i.e., 27-day supply). The patient would get the second prescription filled upon arriving home and arranging funding, but within 30 days of the prescribing date.