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## ILPMP Prescription Reporting Update: Transition to ASAP 5.0 Testing Window Opened July 1st

The **ILPMP** is announcing an important upcoming change regarding the reporting of controlled substances and current drugs of interest. By Illinois law, retail pharmacies and dispensing practitioners are required to electronically transmit a daily dispensing report no later than the end of the business day on which a controlled substance II-V or drug of interest is dispensed to the patient.

Effective July 1, 2025, the ILPMP will begin transitioning to the American Society for Automation in Pharmacy (ASAP) Version 5.0 format with a transition deadline of December 16, 2025. Pharmacies and software vendors should work proactively to update their systems and ensure compatibility with the new reporting format by the mandatory deadline.

This change is part of our ongoing commitment to improve data accuracy, enhance reporting capabilities, and align with national standards for prescription drug monitoring programs (PDMPs).

### **Key Dates:**

- **July 1, 2025 - ASAP testing window opens**
- **December 16, 2025 - ASAP format becomes mandatory for all data submitters**

### **Drugs of Interest List revised to include drug classes**

As part of this update, the ILPMP is also transitioning to a more generalized approach by categorizing drugs by class. This change allows for the automatic inclusion of new drugs approved by the Food and Drug Administration (FDA) within those classes. Pharmacies and dispensing physicians will be responsible for maintaining an up-to-date list of drugs within the specified classes to ensure accurate reporting.

### **What This Means for You**

- Current submissions in the ASAP 4.2A format will continue to be accepted during the transition period.
- Please contact LogiCoy via e-mail at [ilpmp@logicoy.com](mailto:ilpmp@logicoy.com) to setup a test

submission of the new ASAP 5.0 format. No files should be submitted in new format until this is complete.

- [ASAP Version 5.0 is located on ILPMP.org / About Us / Pharmacy Reporting / Illinois Data Submitter Guide](#)

## ILPMP TRANSITIONS TO DIVISION OF BEHAVIORAL HEALTH AND RECOVERY EFFECTIVE, JULY 1ST

Effective July 1, 2025, Illinois Department of Human Services Divisions of Substance Use Prevention and Recovery and of Mental Health, were integrated into the single Division of Behavioral Health & Recovery. The primary goal is to improve access to and streamline behavioral health care for Illinois residents, particularly those with co-occurring mental health and substance use disorders.



[Learn More About  
DBHR](#)

## ILPMP Peer Review Committee Release FY25 Annual Report

The ILPMP Peer Review Committee identifies providers who may be prescribing or dispensing outside the currently accepted standard and practice for their profession. Per statute 720 ILCS 570/320, a referral to the IDFPD may be made for failure to respond to a request for information, if the response to the request is considered unsatisfactory by the committee, or if the prescriber does not sufficiently rectify the practices identified by the committee as the potential for concern.

In FY25, the Peer Review Committee met in closed session semi-annually; December 10, 2024, and June 10, 2025. The committee had access to review data for 30,294 prescribers. To gain more clarification, 58 of the prescribers were sent Requests for Information (RFI) letters and 7 of these prescribers were referred to IDFPD due to no response after three

ILPMP Peer Review Committee FY25 Annual  
Report

## Educational Resources

### Nonopioid Therapies for Pain A Clinical Reference

The 2022 CDC Clinical Practice Guideline for Prescribing Opioids for Pain recommends maximizing the use of nonopioid therapies as appropriate for the specific condition and patient. Initiating opioid therapy should only be considered if expected benefits for pain and function are anticipated to outweigh risks to the patient.

#### Types of Pain and Recommended Treatment

##### Acute Pain

Usually starts suddenly and has a known cause, like an injury or surgery. It normally gets better as your body heals.

Nonpharmacologic and nonopioid therapies are at least as effective as opioids for many common types of acute pain.

- Low back pain
- Neck pain
- Dental pain
- Kidney stone pain
- Pain related to musculoskeletal injuries (such as sprains, strains, tendonitis, and bursitis)
- Pain related to minor surgeries typically associated with minimal tissue injury and mild postoperative pain (e.g., simple dental extraction)
- Headaches, including episodic migraine

##### Subacute Pain

Pain that lasts at least one month and up to three months.

This pain can be the result of an underlying medical disease or condition, injury, medical treatment, inflammation, or unknown cause.

Nonpharmacologic and nonopioid pharmacologic therapies are preferred for subacute and chronic pain.

- Back pain
- Fibromyalgia
- Tension headache
- Hip or knee osteoarthritis

##### Chronic Pain

Pain that lasts three months or more.



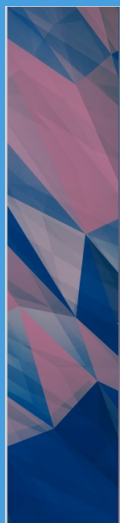
Centers for Disease  
Control and Prevention  
National Center for Injury  
Prevention and Control

[www.cdc.gov/opioids](https://www.cdc.gov/opioids)

both pharmacologic therapies (medication) and nonpharmacologic therapies. These methods include, but are not limited to, nonopioid medications, cognitive behavioral therapy, physical therapy, acupuncture, meditation, exercise, or interventional therapies like injections.

[Click Here to Read More on Nonopioid Therapies](#)

## American Society of Addiction Medicine Release Joint Clinical Practice Guidelines on Benzodiazepine Tapering



The JOINT  
CLINICAL PRACTICE GUIDELINE ON  
**Benzodiazepine  
Tapering:**  
Considerations when Benzodiazepine  
Risks Outweigh Benefits

American Society of Addiction Medicine (ISAM) has developed guidelines to assist clinicians in helping patients safely taper from their benzodiazepine medication, while minimizing withdrawal symptoms.

[Click Here to Download Guidelines](#)

## VIRTUAL ASK THE EXPERT SERIES

### TREATMENT OF OPIOID USE DISORDER:

BARRIERS AND OPPORTUNITIES  
AUGUST 14TH, 2025 12:00PM CST

PRESENTED BY:

**CAMILLE DUNKLEY, MD**

ASSOCIATE PROFESSOR AND DIRECTOR, DIVISION OF ADDICTION MEDICINE  
SIU SCHOOL OF MEDICINE

SPONSORED BY



MODERATED BY:

**CHRIS HERNDON, PHARM D**  
PROFESSOR, SIUE

REGISTER

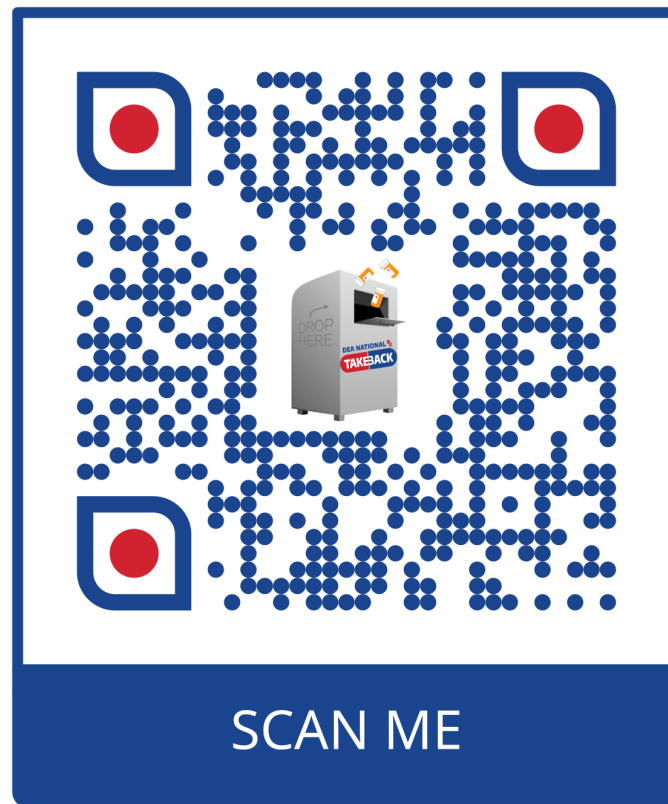


NOTE THIS SESSION IS NOT APPROVED FOR CONTINUING EDUCATION

[https://siue.zoom.us/join/8m8pYSJXRv2rYVOWIFb\\_mQ](https://siue.zoom.us/join/8m8pYSJXRv2rYVOWIFb_mQ)

Working together, we can make Every Day Take Back Day. Scan

the QR code or click image below to view Year-Round Drop Off locations for prescription drugs.



## Newly Released, FREE, Continuing Education Available for Pharmacists and Pharmacy Technicians on the Importance of PMP Data Integrity

Take advantage of this free ACPE accredited educational opportunity providing 1 hour of continuing education for pharmacists and pharmacy technicians. This program, developed in partnership with NASCSA and 12 prescription monitoring program (PMP) administrators, analyzes the importance and value of complete, accurate data reported by dispensers to PMPs and assesses the impact of intentional or non-intentional data entry errors and data omissions on patient safety. It also discusses the downstream impacts of pharmacy-reported PMP data on clinical decision-making processes and helps pharmacy staff identify and implement changes that can be made in their practice setting to improve

PMP data integrity.

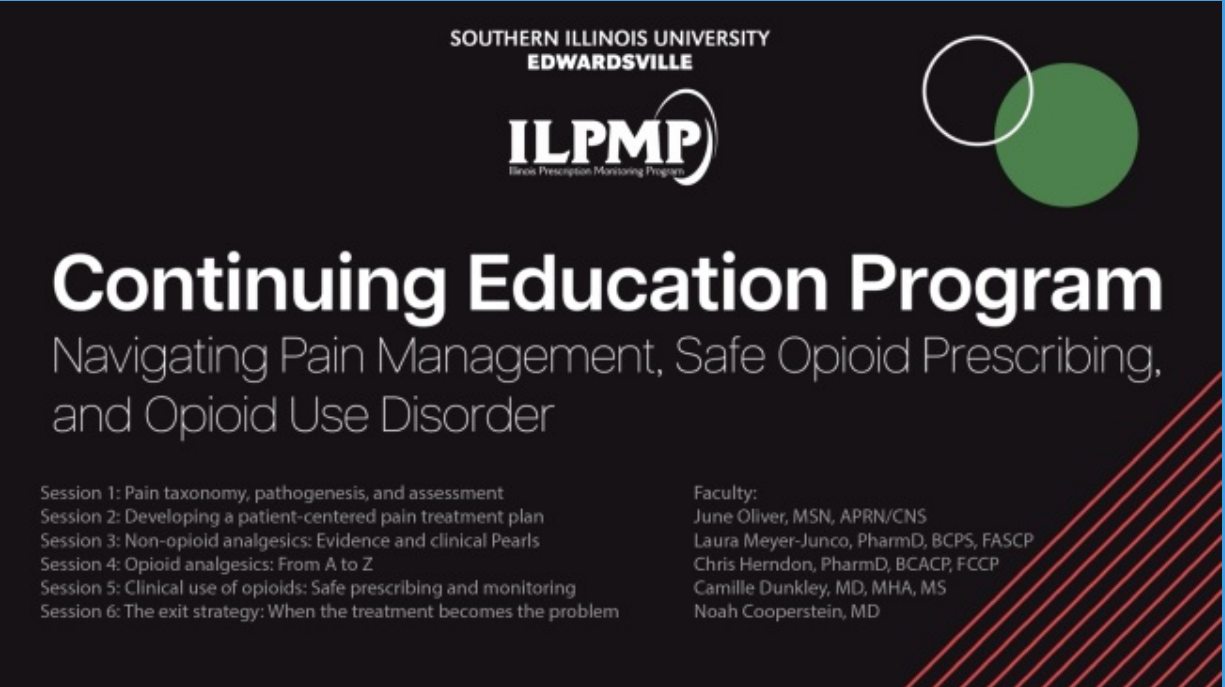
Visit <https://ce.talemhealth.com/a/MWEORC>

If you received credit for this CE prior to 10/22/24, you are still able to retake the CE and receive credit.

Click for more CE  
Information

## Navigating Pain Management, Safe Opioid Prescribing, and Opioid Use Disorder

A three-hour program designed to meet the educational needs for physicians, nurses, and pharmacists. The program is accredited in 6, 30-minute modules.



The banner features the Southern Illinois University Edwardsville logo and the ILPMP (Illinois Prescription Monitoring Program) logo. It includes a list of six sessions and a list of faculty members. The design is dark with white and green text, and a green circle graphic.

SOUTHERN ILLINOIS UNIVERSITY  
EDWARDSVILLE

**ILPMP**  
Illinois Prescription Monitoring Program

# Continuing Education Program

## Navigating Pain Management, Safe Opioid Prescribing, and Opioid Use Disorder

Session 1: Pain taxonomy, pathogenesis, and assessment  
Session 2: Developing a patient-centered pain treatment plan  
Session 3: Non-opioid analgesics: Evidence and clinical Pearls  
Session 4: Opioid analgesics: From A to Z  
Session 5: Clinical use of opioids: Safe prescribing and monitoring  
Session 6: The exit strategy: When the treatment becomes the problem

Faculty:  
June Oliver, MSN, APRN/CNS  
Laura Meyer-Junco, PharmD, BCPS, FASCP  
Chris Herndon, PharmD, BCACP, FCCP  
Camille Dunkley, MD, MHA, MS  
Noah Cooperstein, MD

Prescriber  
Registration

Pharmacist  
Registration







ILPMP.ORG & IL PMPnow Monthly Data



# WEBSITE DATA

JUNE 2025



					
200	95,544	72,457	259,060	1882	11,384,330
NEW USERS IN JUNE	TOTAL USERS	TOTAL ILPMP PRESCRIBER USERS	TOTAL ILPMP WEBSITE REQUESTS	TOTAL IL PMPNOW CONNECTIONS	TOTAL IL PMPNOW REQUESTS

## Contact Information

If you have questions about the information that appears in this update or suggestions for future content, please email [dhs.pmp@illinois.gov](mailto:dhs.pmp@illinois.gov). Visit [www.ilpmp.org](http://www.ilpmp.org) for more information.



*The Illinois Prescription Monitoring Program (ILPMP) is an electronic database that collects, tracks, and stores reported dispensing data on Schedule II-V controlled substances, selected drugs of interest, and other health information. The Illinois Department of Human Services oversees the ILPMP, authorized by the Illinois Controlled Substances Act (720 ILCS 570/316). The ILPMP adheres to HIPAA and all access, disclosure, and confidentiality provisions of Illinois Law.*

Illinois Prescription Monitoring Program | 401 North Fourth Street | Springfield, IL 62702 US

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