

ILPMP QUARTERLY REPORT

The ILPMP first quarter report is now available. It contains prescription data, website and PMPnow statistics.

Quarterly Report

Removal of the DATA Waiver (X-Waiver) Requirement

Section 1262 of the Consolidated Appropriations Act, 2023 (also known as Omnibus bill), removes the federal requirement for practitioners to submit a Notice of Intent (have a waiver) to prescribe buprenorphine or buprenorphine/naloxone for the treatment of opioid use disorder (OUD). All practitioners who have a current Drug Enforcement Administration (DEA) registration that includes Schedule III authority, may now prescribe buprenorphine or buprenorphine/naloxone for OUD. Substance Abuse and Mental Health Service Administration (SAMHSA) and the DEA are actively working on the implementation of a separate provision related to training requirements for DEA registration that will become available in June 2023. Substance Use Prevention and Recovery will share DEA registration updates as they become available. There are no longer any annual limits on the number of patients that can be cared for by a practitioner, whereas the previous maximum was 275. Of note, there are three Federal Drug Administration approved medications for OUD: methadone, buprenorphine, and long-acting naltrexone - and it is standard of care for all patients with OUD to be offered medication assisted recovery.

Please visit the **SAMHSA website** for further updates and guidance.

EHR INTEGRATION WITH PMPnow

PMPnow is currently integrated with over 1,470 unique health care entities. All Illinois healthcare organizations and pharmacies can complete this integration with assistance from their software vendor. To request a connection to PMPnow, healthcare organizations



should **email a request**. Software vendors should complete a **PMPnow Vendor Connection Request**.

PMPnow Connected Vendor List

EDUCATIONAL RESOURCES

New educational resource links have been added to the **Educational Resources** page on **ilpmp.org**.

VIRTUAL LUNCH AND LEARN SERIES



Webinar: Continuing Medical Education

Interoperability for Combating the Opioid Epidemic

- Recognize methods to optimize the end-user experience when implementing ILPMP interoperability
- List strategies to orient end-users to an integrated ILPMP interface



and to overcome obstacles to meaningful use

• 1.0 contact hours CME

LEGISLATIVE UPDATES

Public Act 102-0490

Effective January 1, 2024, **Public Act 102-0490**, prescriptions for substance classified in Schedule II-V must be sent electronically, and the electronic format must be accepted by the dispenser. Any prescriber who certifies to the IDFPR that they will not issue more than 25 prescriptions (including in both oral and written form) during a 12-month period shall not be required to issue prescriptions electronically. See **Public Act 102-1109 Section 55** for updated effective date.

Public Act 102-1040

Effective January 1, 2023, **Public Act 102-1040**, pharmacists shall dispense an opioid antagonist such as naloxone and inform patients of potential opioid addiction. Prescribers who issue a prescription for an opioid shall inform the patient that opioids are addictive and that an opioid antagonist such as naloxone are available by prescription or from a pharmacy.

CONTACT INFORMATION

If you have questions about information that appears in this newsletter, or suggestions for future content, please email **dhs.pmp@illinois.gov**. Visit **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 controlled substances in schedules II-V and selected drugs of interest, as well as other types of health information. The ILPMP serves as an essential tool to ensure the safe use of controlled substances and other drugs. Utilizing the ILPMP supports clinical decisions and improves patient outcomes. The ILPMP is overseen by the Illinois Department of Human Services and was authorized by the Illinois Controlled Substances Act (720 ILCS 570/316) and strictly adheres to HIPAA and all access, disclosure, and confidentiality provisions of Illinois Law.

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