

North Dakota Prescription Monitoring Program End User License Agreement

Updated: 4/27/2018

Authority:

The North Dakota Board of Pharmacy (NDBOP) was given authority under North Dakota Century Code (NDCC) Chapter 19-03.5 to establish and maintain a program for the monitoring of prescribing and dispensing of all controlled substances and drugs of concern. Each dispenser shall submit daily by electronic means information regarding each prescription dispensed for a controlled substance, unless a waiver is granted.

Access to prescription information:

Information is confidential and may not be disclosed except as provided by the laws and rules in section 19-03.5-03 of the ND Century Code. Access is individual specific only. North Dakota Prescription Drug Monitoring Program (ND PDMP) will not grant umbrella access to clinics, hospitals, pharmacies or any other healthcare facility. The board maintains a record of each person who requests information and may use the records to document and report statistics and outcomes. These records of requests can be supplied to a regulatory agency, or local, state, and federal law enforcement.

Access is available to a provider for the purpose of providing medical care to a patient or inquiring about the prescriber's prescribing activity.

Access is available to a dispenser for the purpose of filling a prescription, providing pharmaceutical care for a patient, or dispensing activity.

Access is granted to a 'delegate' (state licensed assistive personnel) to access information from the ND PDMP, under the supervision, control, and responsibility of a licensed provider.

Each professional licensing board that is responsible for the licensing of individuals authorized to prescribe or dispense controlled substances for human consumption shall adopt rules under chapter 28-32 to require licensed individuals under that board's jurisdiction who prescribe or dispense controlled substances to humans to utilize the ND PDMP.

Information Errors:

The information accessed from the ND PDMP database may contain errors and omissions and should not be used as a sole resource in determining treatment options. The records are based on information submitted by pharmacies. System account holders should discuss information from the system with their patients or confirm information with the dispenser.

Login and Password:

Login information is prohibited from being shared. Access is specific to one individual and should never be shared with anyone including medical assistants, staff, co-workers, healthcare providers and pharmacists; even if they have their own access. Do not save your password on public computers and take measures to safe-guard your login from getting into someone else's possession. The information is HIPAA protected and should be treated so.

Unlawful Disclosure:

Any person who intentionally makes an unauthorized disclosure of information contained in or obtained from the ND PDMP database will be subject to disciplinary action by their respective board and appropriate civil and criminal penalties. The data from the ND PDMP is protected health information and any information accessed must be treated as confidential. Knowingly disclosing the data in violation of state or federal laws related to the privacy of healthcare data is grounds for disciplinary action by the appropriate health-related licensing board and/or employer and may be subject to civil and criminal penalties. System users must implement appropriate administrative, physical, and technical safeguards to reasonably ensure the privacy and security of the controlled substance prescription information pertaining to their patients.

Contact Information:

PMP Software Support

[Submit a Request](#) or 1-855-563-4767

ND PMP Support

pdmp@nd.gov or 1-701-328-9537

Account Agreement:

I understand that my access to data from the North Dakota Prescription Drug Monitoring Program online system is granted only with the authority and rights allowed under NDCC 19-03.5.

I understand that I am responsible for all use of my login and password and that I am prohibited from sharing my access information with any other individual or entity including medical assistants, staff, co-workers, healthcare providers and pharmacists.

I understand that I, and my delegate(s) if applicable, may only request information from the system to evaluate the need for or provide medical or pharmaceutical treatment for a patient requesting treatment or an established patient.

I understand that patients are allowed by law to obtain a free copy of their own information from the ND PDMP and that this information is not be copied and provided directly by me or by a member of my staff.

I understand that the PDMP may conduct auditing activities to monitor for unusual or potentially unauthorized use of the system.

I agree to treat any information accessed as confidential and will reasonable ensure the privacy and security of the controlled substance prescription information pertaining to patients to protect against improper disclosure.

I understand that I am required to report to the ND PDMP any suspected breach of the system or unauthorized access within 24 hours.

I understand that inappropriate access and disclosure of information received from the ND PDMP is a violation of NDCC 19-03 and may result in criminal, civil, or administrative sanctions, including disciplinary action by the appropriate licensing board and/or my employer as well as undisputable revocation of database access privileges.

I understand that the information I access from the ND PDMP may contain errors and omissions and is simply a resource to inform patient clinical interviews and assessments. Additionally, I understand that information in system reports should be verified with patients before any clinical decisions are made or actions are taken.

I understand that I may be asked additional information related to my account in order to gain or retain access to the ND PDMP and will notify the ND PDMP of any changes to my account contact information within 10 business days.

I understand that I must notify the ND PDMP when: my license or DEA registration has been limited, revoked, or voluntarily retired; I change employment or my employment has been terminated; or I no longer need access to the ND PDMP.

I understand that I must have an active account in order to delegate access to a member of my staff. I further understand that I am responsible for the use or misuse of the information accessed by my delegates.

I understand that when a delegate for any reason is no longer authorized to access the system on my behalf; I must revoke the delegation or notify the ND PDMP.

I affirm that all information on this registration form is true and that all requests made pursuant to approval of this registration will be used for legitimate purposes. All data obtained from the ND PDMP will be treated as protected health information and handled in accordance with federal and state laws. I agree to abide by all the Terms & Conditions above.