



Are Your **PRESCRIBING** **PRACTICES** Secure?

By SDCMS-endorsed The Doctors Company (For more safety articles, practice tips, and interactive guides/site surveys, visit www.thedoctors.com/patientsafety.)

Prescription theft and abuse is a real and growing problem, making it imperative for physicians to protect themselves and their practices. In addition, a recent court ruling spotlights potential obligations to third parties when prescribing medications to patients. Together, these developments signal the need for vigilance and security in your prescribing practices.



The Prescription Regulatory Environment

The Drug Enforcement Administration (DEA) has developed federal and state regulations to safeguard prescribing practices. The Centers for Medicare and Medicaid Services (CMS) also requires that prescription pads have security features to prevent copying, modifying, and counterfeiting. Currently, 49 states have passed legislation to implement operational Prescription Monitoring Programs

(PMPs), which seek to curtail prescription drug abuse and diversion through highly effective tools and strategies developed for use by government officials.

Tips to Avoid Prescription Fraud and Abuse

Physicians can incorporate electronic prescribing, or e-prescriptions, into their practice to protect themselves against diversion. Electronic prescribing promotes efficiency and reduces medical liability

– two objectives of the HITECH Act. It eliminates the time-intensive process involved with tracking paper prescriptions, voids opportunity for alterations, and provides a direct connection to pharmacists to ensure accurate prescriptions.

Physicians who continue to use paper prescriptions should implement protocols with local pharmacies to manage prescription theft, forgery, and alteration. Consider these risk management tips:

- Request notifications from local pharmacies before prescriptions for controlled substances are dispensed.
- Use the control batch number on each script to track the order of prescriptions.
- Require patients to visit the office to obtain prescriptions for controlled medications.
- Note actual amounts prescribed, and give matching numerals to discourage prescription alterations (e.g., thirty/#30).

Physicians may also consider terminating the physician-patient relationship with a patient who is involved in prescription abuse, theft, or diversion.

If prescription fraud occurs, physicians should investigate and notify local law enforcement, the local DEA office, and the necessary state licensing and medical boards. Physicians should also contact their malpractice insurer to discuss other reporting requirements and further safeguards for preventing diversion.

Court Rules Physicians Liable for Patient's Actions

In February, the Utah Supreme Court ruled that third parties may sue doctors for injuries caused by a patient whose actions are associated with alleged medication mismanagement.

The ruling allowed relatives to sue a physician and his staff after a patient killed his wife. According to the American Medical Association, “The court ruled that when potential risks might outweigh potential benefits for a given activity, doctors must consider the potential effects their actions could have on third parties.”

While state laws differ, courts in several other states have issued similar rulings. As a result, health professionals in Utah and other jurisdictions may be found to have a legal responsibility to third parties when prescribing medicine to patients, which will likely impact the way medicine is practiced. **SDP**