Midlevel Providers' Role in the Ever-Changing Landscape of Prescribing

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The way in which medications are prescribed, dispensed and administered in the United States is ever-changing. Electronic prescribing is now the most prevalent means of prescribing non-controlled medications. All 50 states and the District of Columbia have also legalized the electronic prescribing of controlled substances. To improve health care delivery and access to medications, while simultaneously preventing prescription drug abuse, some states have implemented legislation that requires all controlled substances prescribed electronically to be transmitted via an e-prescribing or electronic health record tool – a system allowing all patients, prescribers and prescriptions to be monitored and tracked.

Midlevel providers should understand their role and responsibility in the context of prescribing to patients, as outlined below in the practical infographic by Regis College.

In addition, they should be aware of the differences between scheduled medications and how they differ from non-scheduled medications. Scheduled medications are classified into five distinct categories (schedules) depending on their acceptable medical use, and abuse or dependency potential. Schedule I drugs have the highest potential for abuse and severe psychological and/or physical dependence and have not been approved for medical treatment in the United States. As the drug schedule changes, so does the abuse potential, with Schedule V drugs representing the least potential for abuse. Non-scheduled (or non-controlled) drugs are associated with less risk and are therefore subject to fewer restrictions and limitations, however, some do require prescriptions and could potentially harm users.

Midlevel providers need to navigate the regulatory schemes surrounding the prescribing of controlled substances, particularly those used for pain management. While the Controlled Substances Act (CSA) establishes federal U.S. drug policy under which the manufacture, importation, possession, use and distribution of

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certain drugs are regulated, it is essential for midlevel providers to have a thorough understanding of the drug scheduling and how it applies to their authorization to prescribe according to state-specific laws. One of the most important aspects of prescribing for midlevel providers is to ensure that they have properly documented what is prescribed to a patient. Prescription documentation requirements include the patient's full name and address, but also the practitioners' full name, address and DEA registration number. The prescription must include the drug name, strength, dosage form, quantity prescribed, directions for use, and numbers of refills authorized, if any. The practitioner is responsible for ensuring that the prescription conforms to all requirements of both federal and state laws and regulations.

Please do not hesitate to reach out to the Frost Brown Todd Health Care Industry Team with any questions or concerns related to health care provider compliance, regulations, investigations, or discipline in your state. Alex Fisher can be contacted directly at afisher@fbtlaw.com or (615) 251-5594.

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