

K-TRACS General FAQs

Q. What is the purpose of the Prescription Monitoring Program?

A. Education and Information. PMPs provide useful feedback to prescribers on their own prescribing trends as well as their patients' controlled substance histories. PMPs also provide useful information to prescribers when they suspect that a patient may be non-compliant in their controlled substance use.

Public Health Initiatives. The public health community can use information from the PMP to monitor trends and address controlled substance prescribing or utilization problems.

Drug Abuse and Diversion Prevention. Prescribers, dispensers, and consumers will be deterred from participating in illegal drug diversion schemes if they know a prescription monitoring program is in place.

Early Intervention. Identify patients for early assessment and treatment of potential controlled substance utilization problems.

Reporting/Frequency of Reporting

Q. Which controlled substance prescriptions must be reported to the PMP?

A. Pharmacies dispensing in and into the state of Kansas must report to K-TRACS all schedule II, III and IV controlled substance prescriptions and drugs of concern that they dispense. However, when a Kansas resident actually goes to another state and physically picks up the prescription(s) in that state, that prescription technically is not dispensed in Kansas and is not to be reported to K-TRACS

Q. What are the “drugs of concern” that are reportable to K-TRACS?

A. (1) Any product containing all three of these drugs: butalbital, acetaminophen, and caffeine;

(2) Tramadol; and

(3) Any compound, mixture, or preparation that contains any detectable quantity of ephedrine or pseudoephedrine, its salts or optical isomers, or salts of optical isomers, and is exempt from being reported to NPLeX.

The stakeholders of the Kansas Prescription Monitoring Program shall be notified by the Board if a drug is to be considered by the Board for classification as a drug of concern. Any individual who wants to have a drug added to the program for monitoring may submit a written request to the board.

Q. Are there any types of patients for whom reporting of controlled substance prescriptions is *not* required?

A. Yes. The law states that a dispenser is not required to submit data if they fall into one of these categories:

(1) A licensed hospital pharmacy that distributes such substances for the purpose of inpatient hospital care;

(2) A medical care facility as defined in K.S.A. 65-425 and amendments thereto, practitioner or other authorized person who administers such a substance;

(3) A registered wholesale distributor of such substances;

(4) A veterinarian licensed by the Kansas board of veterinary examiners who dispenses or prescribes a scheduled substance or drug of concern; or

(5) A Dispenser that is a medical facility that dispenses an interim quantity of a substance on an outpatient emergency basis, the quantity may not exceed a 48 hour supply.

Pharmacies that *only* dispense controlled substances for these types of patients can notify the Board and ask to be entirely exempted from the reporting requirement. Pharmacies that serve these types of patients but that also dispense controlled substance prescriptions to “regular” outpatients must report to the PMP, but may exclude the prescriptions dispensed to patients that are in one of the above-mentioned categories.

Q. Am I required to see a driver’s license or social security card to use for the patient identifier field for reporting purposes?

A. We prefer that you collect driver’s license or state issued ID numbers on all patients that you can. If the patient doesn’t have either of these, you can use their social security number, you can create an ID by using the patient’s first, middle, last initials, 8-digit DOB, and gender, i.e. ADG01191978F (if you can’t add the gender to the end, just use initials and DOB), or use their insurance number.

Q. Since NDC Number is a required field, what do I use for compounded drugs that don’t have an NDC number?

A. You should use all 9’s in the NDC field for compounded drugs and then use the fields in the CDI segment. This will allow you to put the NDC numbers that you used to make the compound in the CDI segment. In the NDC field for the DSP segment you will just need 9999999999.

Q. Does a practitioner who administers a drug to a patient in a clinic, emergency room or other outpatient facility have to report the administration of a drug to the PMP?

A. No. The administration of a drug does not have to be reported to K-TRACS. Only those drugs dispensed to the patient (i.e. given to the patient to take home for later use) must be reported to the PMP.

Q. How frequently must data be submitted to the program?

A. Within 24 hours of being dispensed. Zero reports may still be filed every 7 days.

Q. Where can I get waiver from electronic reporting and exemption from reporting altogether forms?

A. These forms are available on the Pharmacy website at: www.pharmacy.ks.gov/k-tracs

Q. I have a pharmacy or am a dispensing practitioner but I never dispense controlled substances or do so only rarely. Do I still need to report?

A. A pharmacy or dispensing practitioner that never dispenses controlled substances are not required to report to K-TRACS and can notify the Board in writing that they will not be reporting. They can also use the form provided by the Board at: www.pharmacy.ks.gov/k-tracs

Those that dispense controlled substances only occasionally do need to report. However, they can submit “zero-claim” reports for periods during which they have not dispensed any controlled substance prescriptions.

Q. What options are available for the reporting of data?

A. Secure FTP over SSH, PGP encrypted files sent via simple FTP, upload via SSL Web site, and physical media (tape, diskette, CD, DVD), online UCF (universal claims form). All of these methods must adhere to the American Society for Automation in Pharmacy (ASAP) 2007 version 4.1 standard. If an automated recordkeeping system capable of producing an electronic report in the ASAP format is not available, dispensers may submit prescription information via paper submission using a specially provided form.

Q. Our facility is a small, critical-access hospital. Most outpatient controlled substance dispensing is for patients seen in our emergency room. The controlled substances are supplied as "pre-packs" or "starter packs" that are given to patients by the prescriber. Does such dispensing have to be reported?

A. Not necessarily. Kansas regulations provide an exemption option for reporting of controlled substances that are dispensed from emergency rooms that contain less than a 48 hour supply of a controlled substance. The exemption form is available at: www.pharmacy.ks.gov/k-tracs

Q. Does the reporting requirement apply to prescriptions that are dispensed on an outpatient basis? Does this mean Schedule II –IV meds given to inpatients in the hospital are not reported?

A. That is correct - only prescriptions dispensed on an outpatient basis need to be reported. Dispensing for hospital inpatients is specifically exempted from the law's reporting requirement.

Q. Do I have to correct the errors I receive from the submission of my retroactive data (July 1, 2010 to Jan 31, 2011)?

The next question explains what errors would normally have to be corrected, **however**, you are not required to correct **ANY** or the errors on your **submission of retroactive data**. We are waiving **ALL** errors on that submission.

Q. What errors do I need to correct and resubmit beginning with my February 1, 2011 submission?

A. A single record may be rejected if it has a fatal error. **All fatal errors must be corrected and resubmitted. For minor and serious errors, we strongly recommend you change them in your system but don't resubmit them.** That will prevent the same errors from occurring on future data submissions.

In addition, an entire batch may be rejected if ALL records have fatal or serious errors, more than 10% of records have fatal errors, or more than 20% of records have serious errors. In these cases the errors need to be corrected and the entire batch must be resubmitted. Pages 28-29 in the Dispenser's Implementation Guide will show you the edit definitions describing what is considered a fatal, serious, or minor error in the system.

Q. If minor and serious errors don't have to be corrected and resubmitted, why do I need to complete those fields, e.g. patient ID?

A. Any fields that are required by ASAP or K-TRACS must be completed even if they are only minor errors. Pages 32-41 in the Dispenser's Implementation Guide will show you which fields are required. In the case of patient IDs, they are required by state statute, so that information must be submitted.

Q. How do I resubmit information if I am correcting, revising, or voiding a record?

The instructions to do this are listed on the dispensers guide. You can find the guide online at: www.pharmacy.ks.gov/k-tracs

You may also need to contact your pharmacy software vendor to have them assist you through this process. Remember that you aren't required to resubmit individual records unless you receive a fatal error message on them. For minor and serious errors, we recommend you change them in your system but don't resubmit them. That will prevent the same errors from occurring on future data submissions.

Q. I thought that by law I am required to put both the Nurse Practitioner or Physician Assistant and Doctor's names on the label. But when I submit my data I receive errors on the name field. How do I submit this information?

A. Because of a change in the law you are now only required to put the name of the prescriber on the label, but both the Nurse Practitioner/Physician Assistant and Doctors names should be on the hard copy of the prescription. So the first and last name of the person who actually **prescribed** the medication is what you would submit to K-TRACS.

Q. I dispense controlled substances and drugs of concern to animals; what information should I submit to K-TRACS?

A. You should submit the owner's info (name, DOB, address). If you are uncomfortable with putting the owner's first name, you may put the pet's name, but all of the other information needs to reflect that of the owner of the animal that the script is being filled for.