Practice & Prescriptive Guidelines/Prescriptive Authority

With the exception of Clinical Nurse Specialists (CNS), Advanced Practice Registered Nurses (APRN) who have current Board authorization may register with the Department of Public Health Drug Control Program (DCP) for prescriptive authority.

PLEASE NOTE: It is not legal to prescribe or write orders for any prescription drug or controlled substance until the appropriate state and federal registration numbers are issued.

How do I apply for prescriptive authority?

Prescriptive authority is granted by the Department of Public Health - Drug Control Program (DCP) and the Drug Enforcement Administration (DEA) after you receive the Board's authorization to practice as an APRN. You can obtain the DCP application for a Massachusetts Controlled Substances Registration (MCSR) online: Massachusetts Controlled Substances Registration (MCSR) or by calling (617) 983-6700. Please Note: The DCP definition of "controlled substances" includes all drugs, substances, or immediate precursors in any schedule.

What are Prescriptive Guidelines; where do I get them?

Guidelines are written instructions and procedures describing the methods that an APRN with prescriptive practice is to follow when managing medications for a health care situation which specifies those instances in which referral to or consultation with a physician is required for appropriate medication management. When appropriate, as determined by the APRN and supervising physician, guidelines shall also address procedures for the ordering of tests and therapeutics.

CNP, CRNA, and PCNS are required to have guidelines for prescriptive practice. CNM prescriptive practice does not require guidelines. CNS are not authorized by statute to register for prescriptive practice.

Guideline development is an opportunity for an APRN to collaborate with a physician regarding the parameters of their prescriptive practice. Guideline development and maintenance are a joint responsibility of the APRN and physician with whom the guidelines are established. The Board regulations at 244 CMR 4.07 address specific requirements that must be included in the prescriptive guideline document. The Board offers an audit tool to assist with guideline content compliance. There is no requirement for third party review, however, the Board may request a copy of the document at any time to assess compliance. Guidelines are public documents, and an APRN that is mandated to have prescriptive guidelines must make a copy of the guidelines available to any person upon request.

I am employed in more than one practice setting. Do I need to develop prescriptive guidelines for each setting?

When a CNP, CRNA, and a PCNS registers with the Department of Public Health - Drug Control Program (DCP) for prescriptive practice they are required to provide the name and credentials of the physician with whom they have established and signed prescriptive guidelines. If you are employed in additional settings in which the physician with whom the established and signed prescriptive guidelines is not, you may be required to amend your Massachusetts Controlled Substances Registration (MCSR) to reflect the establishment of additional guidelines with an additional physician. Please refer to the DCP requirements at 105 CMR 700.000 and 105 CMR 721.000. Contact the DCP for additional information regarding MCSR requirements.

The physician with whom I developed and signed prescriptive guidelines is changing. Am I required to inform the Board?

No. Guidelines remain current for the two (2) year period from which they were originally signed and dated. When the physician with whom you developed and signed prescriptive guidelines changes prior to the end of the two (2) year period, the new physician with whom guidelines are established must review sign, and date the existing guidelines. Alternatively, the APRN and physician can agree to create a new document.

However, changes in physician supervision must be reported to the Massachusetts Department of Public Health – Drug Control Program (DCP) by submitting a request to amend your Massachusetts Controlled Substances Registration (MCSR). The amendment form can be found on the DCP web site.

My practice site is changing. Am I required to notify the Board?

No. When your practice site changes, contact the Drug Enforcement Administration (DEA), New England Field Division online or at: 1-888-272-5174 to amend the Federal registration for changes that include name, address, Schedule, and/or drug code changes. If your MCSR (MA Controlled Registration) is associated with your address, you will be required to amend the MCSR through the Drug Control Program.

Mandatory Educational requirement as of 1-1-11
As of January 1, 2011, with subsequent amendments from chapter 52 of the Acts of 2016, pursuant to MGL 94C, Section 18(e), all prescribers, upon initial application for MA Controlled Substance Registration (MCSR) and subsequently during each APRN license renewal period, must complete education relative to:

1. effective pain management,
2. the risks of abuse and addiction associated with opioid medication;
3. identification of patients at risk for substance use disorders;
4. counseling patients about the side effects, addictive nature and proper storage and disposal of prescription medications;
5. appropriate prescription quantities for prescription medications that have an increased risk of abuse; and
6. opioid antagonists, overdose prevention treatments and instances in which a patient may be advised on both the use of and ways to access opioid antagonists and overdose prevention treatments.

Boston University (BU) School of Medicine, with the cooperation with the Massachusetts Board of Registration in Medicine, the Massachusetts Department of Public Health, the New England Division of the US Drug Enforcement Agency, the Massachusetts Medical Society, and the Massachusetts Hospital Association, developed presentations entitled Safe and Effective Opioid Prescribing for Chronic Pain that meet the educational objectives of the statute.

The educational program is a web-based activity supported by funding from the Massachusetts Board of Registration in Medicine, and by an unrestricted educational grant from the Center for Substance Abuse Treatment of the Substance Abuse and Mental Health Services Administration and is offered at no charge to prescribers. At the completion of the program, a certificate for 3 AMA PRA Category 1 Credit(s)™ can be downloaded and printed. This continuing education offering is consistent with the Board of Registration in Nursing (Board) requirements at 244 CMR 5.00: Continuing Education for the equivalent of 3.6 Contact Hours.

The BU educational program is one of many available that will satisfy the requirement. Prescribers may choose any program that meets the required content and is consistent with 244 CMR 5.00: Continuing Education.

Please note that MGL 94C, Section 18(e) does not specify a minimum number of contact hours to comply with this education requirement. Also, the Board Advisory Ruling 0901: Management of Pain has undergone revisions to keep pace with amendments.

Through your signature on the Massachusetts Controlled Substance Registration (MCSR) form and on your nursing license renewal form, you attest under penalties of perjury compliance with state tax and child support laws, mandatory reporting laws, and regulations, including continuing education requirements.

**Prescription Monitoring Program (PMP)**

Established in 1992, pursuant to joint regulations of Massachusetts Department of Public Health – Drug Control Program (DCP) (see 105 CMR 700.012) and the Board of Registration in Pharmacy (see 247 CMR 5.04), the PMP uses a computer-based, Electronic Data Transfer (EDT) system to collect prescription data from Massachusetts community, hospital outpatient and clinic pharmacies as well as from out-of-state mail order pharmacies that deliver to patients in Massachusetts. PMP is a tool that supports safe prescribing and dispensing and assists in addressing prescription drug misuse and abuse.

The Massachusetts Prescription Awareness Tool (MassPAT) will go live August 22, 2016. Online registration for MassPAT is now open. Users will not be able to conduct patient searches in MassPAT until August 22, 2016. For more information, including accessing MassPAT, please follow this link to the Prescription Monitoring Program (PMP) website: [www.mass.gov/dph/dcp/pmp](http://www.mass.gov/dph/dcp/pmp).

Prescribers must enroll on line for MassPAT. This process is not automatic and enrollment in the previous PMP system will not carry over to MassPAT.

This information is provided by the Division of Health Professions Licensure within the Department of Public Health.

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