Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\*

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Alabama	Pharmacy	Pharmacy law permits e-prescribing for noncontrolled drugs. E-prescribing is not defined, but appears to encompass computer-to- computer transmissions. Ala. Admin. Code r. 680-X-232 (2008).	Pharmacy law does not permit e-prescribing for controlled substances until DEA issues regulations. Ala. Admin. Code r. 680-X-232(1)(d) (2008).	Some of the pharmacy record-keeping requirements, particularly those that appear to require hard-copy printouts or bound log books, could be burdensome in an e-prescribing environment.  See, e.g., Ala. Admin. Code r. 680-X-215(c)(1), (h) (2008).
Alabama	Medical Doctors		Regulations governing medical doctors impede e-prescribing of controlled substances. They require prescriptions for Schedule II controlled substances to be written with ink or indelible pencil or typewriter and to be manually signed by the physician issuing the prescription. "Manually signed" means a nonelectronic, handwritten signature. Ala. Admin. Code r. 540-X-405(1)(a), (2), (6) (2008).	
Alabama	Medicaid	Regulations for prescribing noncontrolled outpatient drugs to Medicaid recipients facilitate e-prescribing. Distinguish between "written" prescriptions, which must be on tamperresistant prescription pads, and e-prescriptions, which are expressly exempt from provision. Ala. Admin. Code r. 560-X-1601(7)(a) (2008).	Regulations require signatures on prescriptions for Schedule II controlled substances. Stamped or typewritten signatures are not acceptable. Ala. Admin. Code r. 560-X-1601 (2008).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Alabama	Food & Drug	_	Schedule II controlled substances require a written prescription unless very limited exceptions apply (e.g., emergency or for resident of long-term care facility). Ala. Code § 20-2-58 (2008).	_
Alaska	Pharmacy	Pharmacy regulations permit prescriptions for both legend drugs and controlled substances to be transmitted electronically, where permitted under state and federal law. Alaska Admin. Code tit. 12, § 52.490 (2009).	Pharmacy regulations permit prescriptions for both legend drugs and controlled substances to be transmitted electronically, where permitted under state and federal law. Alaska Admin. Code tit. 12, § 52.490 (2009).	Pharmacy record-keeping requirements are somewhat ambiguous. Require pharmacy to maintain "plain paper version" of electronically transmitted prescription drug orders, but also permit pharmacy to maintain a prescription drug order "put into writing either manually or electronically by the pharmacist." Alaska Admin. Code tit. 12, § 52.450 (2009).
Alaska	Medicaid	The AK Medicaid regulation permits electronic transmissions that are in accordance with the pharmacy regulation (Alaska Admin. Code tit. 12, § 52.490), which permits electronic transmission of prescriptions for legend and controlled substances in accordance with federal law. Alaska Admin. Code tit. 7, § 43.591(r) (2009).	The AK Medicaid regulation permits electronic transmissions that are in accordance with the pharmacy regulation (Alaska Admin. Code tit. 12, § 52.490), which permits electronic transmission of prescriptions for legend and controlled substances in accordance with federal law. Alaska Admin. Code tit. 7, § 43.591(r) (2009).	(continued)

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Arizona	Pharmacy	Pharmacy statute and regulations permit e-prescribing. Ariz. Rev. Stat. Ann. § 32-1968(A) (2008); Ariz. Admin. Code § R4-23-407(A)(1)(j) and (F) (2008).	Pharmacy regulations require compliance with federal law for electronic transmission of Schedule II, III, IV, or V controlled substance prescription orders.  Ariz. Admin. Code § R4-23-407(A)(h), (F)(2) (2008).	Pharmacy statute and regulations facilitate e-prescribing. Regulations provide that a pharmacist does not have to create a hard-copy prescription if the pharmacy's computer system fields are automatically populated by an electronically transmitted prescription order and the computer system is capable of maintaining, printing, and providing all the prescription information required by statute within 72 hours of a request by authorized entities and persons. Ariz. Rev. Stat. Ann. § 32-1964(B) (2008); Ariz. Admin. Code § R4-23-408(C)(4), (H)(2) (2008).
Arizona	Medical Doctors	Statute regarding homeopathic physicians appears to address only written prescriptions.  Ariz. Rev. Stat. Ann. § 32-2951(C) (2008).	Statute regarding homeopathic physicians appears to address only written prescriptions.  Ariz. Rev. Stat. Ann. § 32-2951(C) (2008).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Arizona	Public Health and Safety—Uniform Controlled Substances Act		The AZ Uniform Controlled Substances Act specifically requires a written, manually signed prescription for Schedule II controlled substances in most circumstances. Authorizes only written or oral prescriptions for other controlled substances. Appears that "written" does not include e-prescribing, given that the term is not treated as encompassing e-prescriptions in the regulations.  Ariz. Rev. Stat. Ann. § 36-2525(A), (D), (H), (I) (2008).	
Arkansas	Pharmacy	Pharmacy regulations permit e-prescribing (at least where the pharmacist reduces the e-prescription to different "form"), but this appears to be limited to noncontrolled substances.  070-00-007 Ark. Code R. § 0008(c) (2009); 070-00-007 Ark. Code R. § 0008(a)(2) (2009).	Regulations permit Schedule III, IV, or V controlled substances or legend drugs to be prescribed only pursuant to either a written prescription signed by a prescribing individual practitioner or a facsimile of a written signed prescription transmitted directly by the prescribing practitioner, or orally if reduced to writing by the pharmacist. 070-00-007 Ark. Code R. § 07-00-0001(c)(1) (2009).	_
Arkansas	Medicaid	_	_	The AR Medicaid regulations seem to imply that a written prescription is required for Medicaid-covered pharmacy services.  016-06-035 Ark. Code R. § 221.000(C), (D) (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Arkansas	Food & Drug/ Uniform Narcotic Drug Act	_	AR Food & Drug law/Uniform Narcotic Drug Act requires a written, manually signed prescription for narcotic drugs or controlled substances. Ark. Code Ann. § 20-64-206(1) (2008); 007-07-009 Ark. Code R. § 8(B)(c), 8(G)(a) (2009).	_
Arkansas	Criminal Offenses/ Controlled Substances	_	AR Criminal Offenses/ Controlled Substances law requires a written prescription for Schedule II controlled substances. Ark. Code Ann. § 5-64-308 (2008).	Records of Schedule I and II substances must be maintained separately from all other records. 007-07-009 Ark. Code R. § 6(E) (2009).
California	Pharmacy	CA Pharmacy law permits e-prescribing for noncontrolled substances (controlled substances are addressed by the CA Health and Safety Code). Cal. Bus. & Prof. Code § 4071.1(a) (2008); Cal. Bus. & Prof. Code § 4040(a)(1) (2008).		A pharmacy is permitted to maintain the e-prescription in electronic form provided that it can retrieve the prescription in hard copy for a 3-year period from the date of last dispensing. Cal. Bus. & Prof. Code § 4070(b) (2008).
California	Medicaid	CA Medicaid regulations permit e-prescribing and expressly recognize validity of e-signatures that meet the conditions of the Electronic Signature in Global and National Commerce Act (15 U.S.C. Sec. 7001). Cal. Welf. & Inst. Code § 14170.10(a), (b) (2008).		

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
California	Health and Safety Code/Uniform Controlled Substances Act		CA's Health and Safety Code permits e-prescribing for controlled substances with the approval of the CA State Board of Pharmacy and the Department of Justice if the e-prescribing is authorized by federal law and in accordance with regulations promulgated by the Drug Enforcement Administration.  Cal. Health & Safety Code § 11164 (2008); Cal. Health & Safety Code § 11164.5 (2008).	CA's Health and Safety Code generally requires that a prescription for a Schedule II controlled substance be on a special form, signed by the prescriber in ink. Prescriptions for controlled substances in Schedules III–V may be orally or electronically transmitted, but they must subsequently be produced in a hard-copy form that is signed by the pharmacist filling the prescription. The law specifically makes an exception for the foregoing requirements if the Board of Pharmacy and Justice Dept. approve electronic transmission for such prescriptions and the prescription complies with applicable DEA regulations. Cal. Health & Safety Code § 11164.5 (2008).
Colorado	Pharmacy	CO Pharmacy law permits prescription orders to be "transmitted electronically" (distinct from transmission by fax), but does not define this term or provide instructions for e-prescribing. Colo. Rev. Stat. § 12-22-122(1) (2008); Colo. Rev. Stat. § 12-22-102(22.5)(a) (2008); 3 Colo. Code. Regs. § 719-1(2.00.10)(b) (2009).		Record-keeping requirements may be met with an electronic record-keeping system capable of producing hard copies upon request.  3 Colo. Code Regs. § 719-1(11.04.10), (11.04.30) (2009).

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Colorado	Medicaid	CO Medicaid regulations permit e-prescribing, but appear to require that pharmacists reduce e-prescriptions to hard copy for retention purposes.  10 Colo. Code Regs. § 2505-10 (8.837.1.A, 8.837.2.C, 8.837.3.A) (2009).	_	_
Colorado	Criminal Code/Uniform Controlled Substances Act of 1992	_	CO's Uniform Controlled Substances Act requires written prescriptions for Schedule II controlled substances, but permits "electronically transmitted" prescriptions for Schedule III–V controlled substances. Colo. Rev. Stat. § 18-18-308(3) (2008); Colo. Rev. Stat. § 18- 18-414(1)(c), (2) (2008).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Connecticut	Pharmacy	CT Pharmacy/Pharmacist law may impede e-prescribing. Although the law permits a prescription to be transmitted to a pharmacy in an "electronic manner," and the law contemplates computer-to-computer transmissions, record-keeping requirements may be burdensome. A pharmacist who receives an electronically transmitted prescription must promptly record it on either a prescription form or a computerized printed record, assign it a serial number, and file it in numerical order. [Note: Connecticut SHB 6301, which was voted out of committee on 2/19/09, would change record-keeping requirements of pharmacies to allow for electronic files.] Conn. Gen. Stat. § 20-614 (2008); Conn. Gen. Stat. § 20-615 (2008).		An "electronic data intermediary (i.e., an entity that provides the infrastructure that electronically connects practitioner and pharmacy systems or devices to facilitate secure e-prescribing) must obtain approval of CT Commissioner of Consumer Protection before operating in state.  Conn. Gen. Stat. § 20-614 (2008).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Connecticut	Consumer Protection		Consumer Protection law may impede e-prescribing. Although it permits electronically transmitted prescriptions for Schedule III and IV controlled substances to the extent allowed by federal law, it requires that a pharmacist reduce the e-prescription orders to writing or print them out and then file them in consecutive order, with Schedule II prescriptions in a separate file.  Conn. Gen. Stat. § 21a-249(c)-(f), (h), (k) (2008).	
Connecticut	Public Health and Well-Being	CT Public Health law provides general authorization for e-prescribing. In addition, by Nov. 30, 2007, the Department of Public Health, within available appropriations, was to have contracted for a health information technology plan intended to facilitate the development of a statewide electronic health information system encompassing e-prescribing.  Conn. Gen. Stat. § 19a-25b (2008); Conn. Gen. Stat. § 19a-25d(a)(1), (b) (2008).		-

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Delaware	Pharmacy	DE Pharmacy law permits e- prescribing for noncontrolled substances, but not for controlled substances. Del. Code Ann. tit. 24, § 2523(7) (2009); 24-2500 Del. Code. Regs. § 5.10 (.16) (2009).	Prescription orders for controlled substances must be hand-signed by the practitioner. 24-2500 Del. Code Regs. §§ 5.10.6, 5.10.7.5 (2009).	Pharmacy regulation permits electronic maintenance of prescriptions. Requires a daily hard-copy printout of electronic prescriptions or a log book which must be manually signed by the dispenser. 24-2500 Del. Code Regs. § 5.2.3 (2009).
Delaware	Medical Doctors	Statute requires basic information on prescription (e.g., name and strength of drug prescribed) to be clearly written, clearly hand printed, electronically printed, or typed. Del. Code Ann. tit. 24, § 1764A (2009).	_	_
Delaware	Medicaid	Medicaid regulations recognize electronic prescribing. 40-850-001 Del. Code Regs. § 1.6.1 (2009); accord 40-850- 027 Del. Code Regs. § 1.11.1.5	_	The Medicaid regulation requiring that prescribers note ICD-9 codes in their own handwriting on prescriptions for STD drugs is inconsistent with e-prescribing.
		(2009); 40-850-026 Del. Code Regs. § 2.1.2 (2009).		40-850-001 Del. Code Regs. § 1.22.2.2.3 (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Delaware	Food & Drug/ Controlled Substances Act		DE Food and Drug law/ Controlled Substance Act and the accompanying regulations do not appear to contemplate e-prescribing, although faxed prescriptions are permitted in certain circumstances. A practitioner is required to manually sign a prescription for a controlled substance in the same manner as he or she would sign a check or legal document. When an oral order is not permitted, prescriptions must be written with ink or indelible pencil or typewriter and be manually signed by the practitioner.  Del. Code Ann. tit. 16, § 4739 (2009); 16-4000-4426 Del. Code Regs. §§ 4.2.3, 4.4 D (2009).	The record-keeping requirements for dispensed controlled substances (e.g., a log book at least 8 by 11 inches in dimension) are inconsistent with e-prescribing.  16-4000-4426 Del. Code Regs. § 3.1 (2009).
District of Columbia	Pharmacy	The DC Health Occupations Boards statutory provisions do not appear to address e-prescriptions. D.C. Code Ann. § 3- 1201.02(11)(B)(ii) (2009).	_	<del>-</del>
District of Columbia	Medicaid	DC Medicaid regulation exempts e-prescription orders from the tamper-resistant prescription pad requirements applicable to written prescriptions for Medicaid recipients.  D.C. Mun. Regs. tit. 22, § 1333.4 (2009).	_	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
District of Columbia	Food & Drug	DC Food & Drug law requires a written prescription for Schedule II substances and a written or oral prescription for Schedule III or IV substances. "Written prescription" is not defined. D.C. Code Ann. § 48-903.08 (2009).	_	_
District of Columbia	Public Health and Medicine	Public Health and Medicine regulations contain detailed standards for e-prescribing in DC. They permit e-prescribing for noncontrolled substances and specify content; nonetheless, they appear to impede e-prescribing by requiring that the electronic transmission be "immediately reduced to hard copy and filed."  D.C. Mun. Regs. tit. 22, § 1300.2 (2009); D.C Mun. Regs. tit. 22, § 1304 (2009).	DC Public Health and Medicine regulations generally require  • a manually signed, written prescription for Schedule II controlled substances; and  • a written, faxed, or oral prescription (immediately reduced to writing by the pharmacist) for Schedule III—V substances.  However, regulations make an exception where "otherwise permitted by federal law," effectively allowing e-prescribing to extent permitted by federal law.  D.C. Mun. Regs. tit. 22, §§ 1306.1, 1306.4, 1306.5 (2009); D.C. Mun. Regs. tit. 22, § 1309 (2009); D.C. Mun. Regs. tit. 22, § 1301.2 (2009); accord D.C. Mun. Regs. tit. 22, § 1303.7(c) (2009).	Permits electronic record keeping for controlled substance prescriptions so long as original documents are retrievable by prescriber's name, patient's name, drug dispensed, and date filled.  D.C. Mun. Regs. tit. 22, § 1313 (2009) D.C. Mun. Regs. tit. 22, § 1913.9 (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Florida	Pharmacy	FL Pharmacy law permits e-prescribing, but does not define the term. Fla. Stat. Ann. § 456.42 (2009).		Regulation requires approval of the patient (or patient's agent) for any direct transmission of prescriptions, including electronic data transmission. Fla. Admin. Code Ann. r. 64B16: 27.1003 (2009).  Statute prohibits electronic prescribing software from using any means including advertising instant messaging, and pop-up ads, to influence or attempt to influence, through economic incentives or otherwise, the prescribing decision of a prescribing practitioner at the point of care. Fla. Stat. Ann. § 456.43(2) (2009).
Florida	Medicaid	FL Medicaid regulations define "prescription" as encompassing orders for drugs "transmitted by any means of communication." This broad definition appears to cover e-prescriptions. Fla. Admin. Code Ann. r. 59G-1.010(223) (2009).		_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Florida	Public Health –		_	The FL legislature has sought to promote the implementation of e-prescribing by establishing a clearinghouse to make information on e-prescribing available. The state Agency for Health Care Administration is to provide yearly reports on the progress of implementing e-prescribing. Fla. Stat. Ann. § 408.0611 (2009).
Florida	Crimes –	_	FL "Crimes" law permits oral prescriptions for Schedule III and IV substances if the pharmacist reduces the prescription to writing or records it electronically (federal law permitting) before filling it. Law addresses written and oral prescriptions, and pharmacist electronically recording prescription, but does not address prescriber electronically transmitting prescription for controlled substances. Fla. Stat. Ann. § 893.04 (2009).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Georgia	Pharmacy	GA Pharmacy regulations permit e-prescribing for noncontrolled substances. Establishes basic content requirements (e.g., name, address, and phone number of prescriber; date and time of transmission) and provides that e-prescriptions which meet state requirements are official prescriptions. Regulations have separate standards for prescriptions sent by e-mail, which must be encrypted, accompanied by a digital ID, and reduced to hard copy and maintained by the pharmacist. Pharmacist has obligation to ensure accuracy and authenticity of e-prescriptions, but in the absence of unusual circumstances may presume those sent from an intervening electronic formatter are accurate and authentic.  GA. Comp. R. & Regs. 480-2702 (2009); GA. Comp. R. & Regs. 480-2701 (2009).	Electronically transmitted prescriptions may not be for controlled substances except as may be allowed by federal law. GA. Comp. R. & Regs. 480-2702(2) (2009).  GA regulations require manually signed, written prescriptions for Schedule II controlled substances. Moreover, a pharmacist must manually sign his or her name to a written prescription for a Schedule II controlled substance when he or she dispenses the drug. Although the regulations appear to permit electronically transmitted prescriptions for Schedule III–V controlled substances, the pharmacist is required to reduce the e-prescription to a hard copy. GA. Comp. R. & Regs. 480-2203(1) (2009); GA. Comp. R. & Regs. 480-2207 (2009).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)	
Georgia	Food & Drug	GA Food & Drug law generally permits e-prescribing, but defers to the state Board of Pharmacy and the federal DEA to decide the acceptable means for transmitting a prescription for a Schedule II controlled substance. Ga. Code Ann. § 26-4-80 (2008).	GA Food & Drug law requires that Schedule II controlled substance prescriptions in written form be signed in indelible ink by the practitioner. However, other forms of Schedule II controlled substance prescription drug orders may be accepted and dispensed in accordance with regulations promulgated by the board and in accordance with DEA regulations found in 21 C.F.R. 1306.  Ga. Code Ann. § 26-4-80 (2008).	<del>-</del>	
Georgia	Crimes and Offenses/ Controlled Substances	_	In nonemergency situations, GA Controlled Substances law requires a written prescription for a Schedule II controlled substance unless state regulations or federal DEA regulations permit a prescription that is transmitted via fax or "other electronic means." Prescriptions for Schedule III–V controlled substances require a written or oral prescription.  Ga. Code Ann. § 16-13-41 (2008).	_	
Guam	Pharmacy	Guam Pharmacy regulations do not appear to contemplate e-prescribing. They describe the prescriptions a pharmacist receives as "oral or written." 25 Guam Admin. R. & Regs. § 13108(a)(1)(i) (1997).	_	_	

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Guam	Food & Drug	_	Guam Food, Drug, and Cosmetic Act does not expressly recognize e-prescribing, only written and oral prescriptions. Guam Code Ann. tit. 10, § 40116(a) (2008).	_
Guam	Crimes and Corrections/Guam Uniform Controlled Substances Act	_	The Guam Uniform Controlled Substances Act requires written prescriptions for Schedule II controlled substances and written or oral prescriptions for other controlled substances. Guam Code Ann. tit. 9, § 67.308.1(c)-(e) (2008).	_
Hawaii	Pharmacy	HI Pharmacy regulations do not address e-prescribing. Prescriptions may be written, faxed, or telephoned, but telephoned prescriptions must be reduced to writing by the pharmacist. Haw. Code R. § 16-95-2 (2009); Haw. Code R. § 16-95-82 (2009).	_	_

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	C	Controlled Drugs Prescriptions	Other (e.g., record- requireme	keeping
Hawaii Fo	Food & Drug	HI Food & Drug law permits "electronic prescriptions," defined to include both fax and other e-prescriptions.	_		_	
		Out-of-state e-prescriptions are expressly permitted.				
		E-prescriptions must be irrefutably traceable to the prescribing practitioner by a recognizable and unique practitioner identifier, including electronic and digital signatures.				
		Pharmacist must maintain records that identify the format (oral, written, or electronic) in which the prescription was received.				
		Haw. Rev. Stat. Ann. §§ 328- 16(c)(1), 328-17.6(a) 328- 17.7(a)(9), 328-17.8 (2008).				

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Hawaii	Health/Uniform – Controlled Substances Act	_	HI's Uniform Controlled - Substances Act does not appear to contemplate e-prescriptions:	_
			<ul> <li>Prescriptions for all controlled substances must originate within the state.</li> </ul>	
			<ul> <li>Schedule II controlled substances must be written and manually signed (except in emergency situations).</li> </ul>	
			<ul> <li>Prescriptions for controlled substances in Schedule III, IV, or V may be written, a facsimile of a written prescription, or oral (if the oral prescription is reduced to writing by the pharmacist).</li> </ul>	
			Haw. Rev. Stat. Ann. § 329-8(a), (e), (g), (j) (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Hawaii	Department of – Public Safety/Law Enforcement/ Regulation of Controlled	_	The HI Department of Public – Safety regulations for controlled substances do not encompass e-prescribing:  • Schedule II controlled	-
	Substances		substance prescriptions must be in writing (except in an emergency situation) on forms of a specified size and submitted in duplicate.	
		<ul> <li>The pharmacist must manually endorse the prescription. Emergency dispensing of controlled substances must be in accordance with section 1306- 11(d), Title 21 Code of Federal Regulations.</li> </ul>		
			<ul> <li>Oral prescriptions for Schedule III–V controlled substances must be reduced to a written memorandum by the pharmacist which he or she then manually endorses.</li> </ul>	
			<ul> <li>Pharmacies which maintain electronic records of controlled prescriptions must provide a daily printout of those prescriptions.</li> </ul>	
			Haw. Code R. § 23-200-15(a), (c)-(e), (h) (2009); Haw. Code R. § 23-200-16(a), (b) (2009); Haw. Code R. § 23-200-18 (2009).	

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Idaho	Pharmacy	ID Pharmacy law permits prescription drug orders to be sent electronically pursuant to ID's Uniform Electronic Transactions Act, which provides that a law that requires a record to be in writing is satisfied by an electronic record and that a law that requires a signature is satisfied by an electronic signature.  Idaho Code Ann. § 54-1733(c) (2008); Idaho Code Ann. § 28-50-107(c), (d) (2008).	ID Pharmacy regulations require that prescriptions for controlled substances be in writing, although prescriptions for Schedule III or IV controlled substances may be oral if the prescription is promptly reduced to writing by the pharmacist. Idaho Admin. Code r. 27.01.01.442 (.01) (2007); Idaho Admin. Code r. 27.01.01.446 (.01) (2007).	
Idaho	Food & Drug		Schedule II controlled substances require a manually signed written prescription (except in an emergency situation). Schedule III and IV prescriptions require a written or oral prescription. Idaho Code Ann. § 37-2722 (2008); Idaho Code Ann. § 37-2723 (2008); Idaho Code Ann. § 37-2725(1), (6) (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Illinois	Pharmacy	electronically transmitted prescriptions, distinct from facsimile prescriptions, but provides no instructions for e-prescriptions. Pharmacy Practice Act also permits maintaining prescriptions electronically as original records so long as computer system can capture an unalterable electronic visual image and is capable of printing and providing required prescription information to the department within 72 hours of request.  225 III. Comp. Stat. Ann.  85/3(e), (z) (2009); 225 III.  Comp. Stat. Ann. 85/25.20 (2009).		
Illinois	Medicaid			IL Medicaid regulations suggest that manually signed, written prescriptions may be required in the Medicaid program. They specifically require the physician's "legible signature in ink."  III. Admin. Code tit. 89, § 140.414(a) (2009); accord III. Admin. Code tit. 89, § 140.443(a) (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Illinois	Food & Drug –			IL Food, Drug and Cosmetic Act defines "prescription" to include only written, faxed, or verbal orders. It is unclear whether "written" includes an electronically transmitted prescription. 410 III. Comp. Stat. Ann. 620/2.36 (2009).
Illinois	Criminal Offenses/ Illinois Controlled Substances Act		IL's Criminal Offenses law does not address e-prescribing. It requires a written prescription for a Schedule II controlled substance (except in an emergency situation) and a written, faxed, or oral prescription (reduced to writing by the pharmacist) for Schedule III–V controlled substances. The pharmacist must sign his or her own name to the face of a written prescription or on the memorandum he or she generates for an oral prescription. 720 III. Comp. Stat. Ann. 570/309 (2009); 720 III. Comp. Stat. Ann. 570/312 (2009).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Illinois	Public Health/ Department of Alcoholism and Substance Abuse/ Controlled Substances Activities	The IL Public Health regulations include definitions of "electronic device" and "prescribed" that suggest that e-prescribing is permitted, yet e-prescribing does not appear to be substantively addressed elsewhere in that regulatory part.  III. Admin. Code tit. 77, § 2080.20 (2009).	Regulations of the IL Department of Alcoholism and Substance Abuse permit written, faxed, or verbal prescriptions for Schedule II drugs. Presumably, the verbal prescriptions are permitted only in emergency situations.  E-prescribing is not addressed.  III. Admin. Code tit. 77, § 2080.70 (2009).	
Illinois	Public Health/ Department of Professional Regulation/Illinois Controlled Substances Act		The regulations of IL's Department of Professional Regulation are not compatible with e-prescribing. They prohibit a pharmacist from filling a prescription for a Schedule II controlled substance that is not on a triplicate prescription blank (out-of-state and PHS prescribers may use a conventional prescription form), except in an emergency situation. Moreover, prescribers must manually sign a prescription for a controlled substance. III. Admin. Code tit. 77, § 3100.390(a) (2009); III. Admin. Code tit. 77, § 3100.400(a), (d) (2009).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Indiana	Pharmacy	IN Pharmacy law permits e-prescribing provided that the prescription information is transmitted by an electronic data intermediary approved by the IN Board of Pharmacy. Electronic prescriptions transmitted through e-mail without the use of an electronic data intermediary are prohibited. Ind. Code Ann. § 25-26-13-25(b) (2008); Ind. Code Ann. § 25-26-13-25.5 (2008); 856 Ind. Admin. Code 1-40-10 (2008).	IN Pharmacy regulations require a written, manually signed prescription for a Schedule II controlled substance except in an emergency situation. Schedule III or IV controlled substances may be written, faxed, or prescribed orally if the pharmacist promptly reduces the prescription to writing. 856 Ind. Admin. Code 2-6-4(a) (2008); 856 Ind. Admin. Code 2-6-7(a) (2008); 856 Ind. Admin. Code 2-6-12(a) (2008); 856 Ind. Admin. Code 1-31-2(4), (8) (2008).	
Indiana	Medical Doctors	The IN Medical Licensing Board regulations address the appropriate use of the Internet in medical practice. They state that patients must provide signed, informed consent to electronic transmissions, including e-prescriptions, and that physicians must maintain written policies for electronic transmissions. E-prescriptions must be secure within existing technology. 844 Ind. Admin. Code 5-3-4 (2008); 844 Ind. Admin. Code 5-3-5 (2008).		_

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
ndiana	Food & Drug	IN Food & Drug law permits e-prescriptions for drugs to the extent permitted by federal law. Ind. Code Ann. § 16-42-3-6(b), (i) (2008); Ind. Code Ann. § 16-42-19.7 (2008).	Drugs that have been designated habit forming by the state as well as by regulations issued under 21 USC 352(d) may be dispensed upon an electronically transmitted prescription only to the extent permitted by federal law.  Ind. Code Ann. § 16-42-3-6(b), (i) (2008).	
Indiana	Criminal Law and Procedure	_	IN Criminal law does not address e-prescribing. It requires a written prescription for Schedule II substances unless an exception applies. Schedule III or IV controlled substances require a written, oral, or faxed prescription. Ind. Code Ann. § 35-48-3-9 (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
owa	Pharmacy	IA Pharmacy law is intended to facilitate e-prescribing. It permits e-prescriptions (defined to include both computer-to-computer and fax prescriptions) for noncontrolled substances. The law also requires electronic signatures and requires verification of authenticity of prescriptions. It permits verification through a number of different means, including maintaining a practitioner number reference, electronic signature file, or verifying via telephone.  Iowa Code Ann. § 155A.27 (1), (2) (2008); Iowa Code Ann. § 155A.3 (16), (17), (38) (2008); Iowa Admin. Code r. 657-21.1 (2008); Iowa Admin. Code r. 657-21.3 (2008).	IA Pharmacy/Pharmacist regulations require a manually signed, written prescription for Schedule II controlled substances. An electronically transmitted prescription is allowed in an emergency situation, but the pharmacist must prepare a temporary written record of the prescription (such as a hard copy of the electronic transmission). The prescriber must deliver, in person or via mail, a written prescription within 7 days to the pharmacist. lowa Admin. Code r. 657-10.21 (2008); Iowa Admin. Code r. 657-10.22(2) (2008). For controlled substances other than Schedule II substances, a faxed prescription is permissible. lowa Admin. Code r. 657-21.9 (2008). In contrast to these Pharmacy regulations, IA Public Health law relating to controlled substances permits e-prescriptions for controlled substances (including Schedule II controlled substances) if permitted by federal law (see below).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Iowa	Medical Doctors	IA Public Health law covering "Health-Related Professions" provides that a physician who dispenses prescription drugs must offer to transmit a patient's prescription electronically (complying with pharmacy law prescription requirements) to a pharmacy of the patient's choice. Iowa Code Ann. § 147.107 (2008).		
Iowa	Medicaid	IA Medicaid law adopts the prescription requirements of IA Public Health/Controlled Substances law and applies them to all prescriptions. (The Public Health/Controlled Substances law permits e-prescriptions [even for Schedule II controlled substances] if permitted by federal law [see below]). Iowa Admin. Code r. 441-78.2(2) (2008).	IA Medicaid law adopts the prescription requirements of IA Public Health/Controlled Substances law and applies them to all prescriptions. (The Public Health/Controlled Substances law permits e-prescriptions [even for Schedule II controlled substances] if permitted by federal law [see below]). Iowa Admin. Code r. 441-78.2(2) (2008).	
Iowa	Food & Drug	IA Food & Drug law permits e-prescriptions (which are distinct from facsimile prescriptions), which comply with Iowa Code 155A.27, the pharmacy code provision that sets out the requirements for prescriptions.  Iowa Code Ann. § 126.11(3)(a), (3)(f) (2008).		

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Iowa	Public Health/ Alcoholic Beverages and Controlled Substances		IA Public Health law relating to controlled substances permits e-prescriptions for controlled substances (including Schedule II controlled substances) if permitted by federal law.  Iowa Code Ann. § 124.308 (2008).  This contrasts with IA Pharmacy regulations which require a manually signed, written prescription for Schedule II substances and permit faxed prescriptions (but apparently not computer-to-computer prescriptions) for other controlled substances (see above).	
Kansas	Pharmacy	KS Pharmacy law expressly permits e-prescriptions for noncontrolled substances that are distinct from faxed prescriptions. (The statutory definition of "electronic transmission" includes the transmission of information in "electronic form" as well as the transmission of an "exact visual image of a document" [i.e., a fax]). However, the law requires that the pharmacist maintain the e-prescription in hard-copy form, which appears to impede e-prescribing.  Kan. Stat. Ann. § 65-1637 (2007); Kan. Stat. Ann. § 65-1626(d), (s), (II) (2007); Kan. Admin. Regs. § 68-2-22 (2008).	Prescriptions for Schedule II controlled substances must be written and manually signed except for emergencies and other limited situations. Law permits electronic transmission of Schedule II prescriptions in an emergency, but hard copy must be presented to the pharmacist within 7 days.  E-prescriptions for controlled substances in Schedules III–V are allowable if the pharmacist immediately reduces the drug order to a hard copy.  Kan. Admin. Regs. § 68-20-10a (2008); Kan. Admin. Regs. § 68-20-18 (2008); Kan. Admin. Regs. § 68-20-19(a)(1) (2008); Kan. Admin. Regs. § 68-20-20(a)(1) (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Kansas	Food & Drug —		KS Food, Drug and Cosmetics Code appears to impede e-prescribing. Does not expressly recognize e-prescribing (unlike Pharmacy Code) and requires "written prescription" or "oral prescription" which is reduced to writing by pharmacist. Kan. Stat. Ann. § 65-669(q) (2007).	_
Kansas	Public Health/ — Controlled Substances		KS Controlled Substance law requires a written prescription for Schedule II substances, although an oral prescription is permissible in an emergency. Schedule III and IV substances require a written or oral prescription. The statute does not address e-prescribing. Kan. Stat. Ann. § 65-4123 (2007).	_
Kentucky	Pharmacy –	-	_	KY Pharmacy law does not address e-prescribing. However, the regulation regarding computerized record keeping includes a requirement that would be incompatible with a paper-free system: a daily hard-copy printout or log book of prescription data which must be signed by the filling pharmacist. 201 KY. Admin. Regs. 2:170 § 1 (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Kentucky	Public Health/ Controlled Substances		KY Public Health/Controlled Substances law generally requires a manually signed, written prescription for Schedule II controlled substances. Regulations permit transmittal of Schedule II prescriptions in limited circumstances (e.g., direct administration to a patient) via facsimile only. Prescriptions for Schedule III–V substances may be prescribed in writing (using a security prescription blank), electronically, or orally. E-prescriptions must be reduced to writing by the pharmacist. Regulations expressly state that a prescription contained in a computer or other electronic format is not to be considered "writing." KY. Rev. Stat. Ann. § 218A.180 (1), (2), (4), (5), (6) (2009); 902 KY Admin. Regs. 55:095 § 2 (2009).	
Louisiana	Pharmacy	The impact of LA Pharmacy law on e-prescribing is unclear. Pharmacy law permits e-prescriptions, but it appears the term may be limited to electronic transmission of the exact visual image (refers to "prescription form" and requires prescriber to indicate in a "check box" for DAW). LA. Admin. Code tit. 46, § LIII.2511(A), (D) (2008).	LA Pharmacy law permits e-prescriptions for Schedule III–V controlled substances, but a handwritten signature is required on prescriptions for Schedule II controlled substances. Permits facsimile to serve as original written prescription for Schedule II controlled substances in limited circumstances (e.g., prescription for long-term care resident). LA. Admin. Code tit. 46, § LIII.2543(A)-(C) (2008).	- (continu

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Louisiana	Medical Doctors	LA Medical Doctor regulations permit physicians and physician assistants to transmit prescriptions electronically. LA. Admin. Code tit. 46, § XLV:7403(A) (2008); LA. Admin. Code tit. 46, § XLV.4505(D) (2008); accord LA. Admin. Code tit. 46, § XLV.4506(A.1)(b) (2008). (But impact of physician/physician assistant laws unclear. Require prescriber to check a box labeled "Dispense as Written" or "DAW" to prevent generic substitution. LA. Admin. Code tit. 46, XLV § 4506 (2008)).		
Louisiana	Food & Drug	_	LA Food & Drug law requires a written prescription for Schedule II substances except in an emergency situation. The law does not address electronic prescriptions.  LA. Rev. Stat. Ann. § 40:978(A), (B) (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Maine	Pharmacy	ME Pharmacy law permits noncontrolled drugs to be prescribed via e-mail or the World Wide Web if regulatory requirements, including e-signatures and secure transmission, are met.  Me. Rev. Stat. Ann. tit. 32, § 13702-A(31) (2008); 02-392-019 Me. Code R. § 3 (2009).	ME Pharmacy law requires written prescriptions for controlled substances, particularly Schedule II controlled substances, for which requirements are spelled out in a ME Department of Public Safety regulation that is incorporated by reference into the Pharmacy regulations. Note also that the regulation authorizing e-prescriptions "Via Email or the World Wide Web" is limited to "Noncontrolled Drugs."  However, the ME Department of Public Safety regulation provides for a waiver process whereby a provider or pharmacy may apply for a waiver from the requirements for security prescription blanks. The applicant must demonstrate that an alternative system would equally protect against forgery or alteration of an original prescription. Waiver process potentially could be used to gain approval for the use of e-prescriptions for controlled substances.  02-392-019 ME. Code R. § 2 (2009); 16-230-001 ME Code R. § 2, 4, 5 (2009).	

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Maryland	Pharmacy	MD Pharmacy law permits "electronically transmitted" prescriptions and requires that they be accurately and securely transmitted. Standards do not appear to impede e-prescribing. MD Code Ann., Health Occ. §12-313(b)(15) (2008); MD. Code Regs. 10.34.20.02 (2009).	_	
Maryland	Medicaid	Medicaid pharmacy services regulations define "prescription" as including both fax and "electronic" orders. Does not appear to impede e-prescribing. MD. Code Regs. 10.09.03.01(26) (2009).	_	_
Maryland	Food & Drug	_	State Food, Drug and Cosmetics Act provides that a prescription for a controlled dangerous substance must be oral or written and if written, must be on a separate prescription form. May impede e-prescribing of controlled substances. MD. Code Ann., Health-Gen. § 21-220(a), (b) (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Maryland	Criminal Law/ -	_	MD Criminal Law relating to -	_
3	Controlled		controlled substances (and the	
	Dangerous		corresponding regulations of the	
	Substances		state Department of Health and	
			Mental Hygiene) generally	
			require a manually signed,	
			written prescription for a	
			Schedule II controlled substance.	
			Prescriptions for Schedule III-V	
			controlled substances may be	
			written, faxed, or oral (provided	
			that any oral prescription is	
			reduced to writing by the	
			pharmacist). The state	
			regulations adopt and reiterate	
			the text of DEA regulations	
			relating to controlled substances	
			including those that address the	
			manner of issuance and	
			requirements for prescriptions.	
			MD. Code Ann., Crim. Law § 5-	
			501(a) (2008); MD. Code Ann.,	
			Crim. Law § 5-504(a) (2008);	
			MD. Code Regs. 10.19.03.07(D)	
			(2009) (incorporating 21 CFR §	
			1306.05—manner of issuance of	
			prescriptions); 10.19.03.08(A)	
			(2009) (incorporating 21 CFR §	
			1306.11 requirement of	
			prescription—Schedule II);	
			10.19.03.09(A) (2009)	
			(incorporating 21 CFR §	
			1306.21—requirement of	
			prescriptions listed in Schedules	
			III, IV, and V).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Massachusetts	Pharmacy	MA Pharmacy law permits e-prescriptions. However, e-prescriptions for Schedule II substances are permitted only in emergency situations and must be immediately reduced to writing by the dispensing pharmacist.  247 Mass. Code Regs. 5.02(1) (2008); 247 Mass. Code Regs. 5.03(2) (2008).	E-prescriptions for Schedule II substances are permitted only in emergency situations and must be immediately reduced to writing by the dispensing pharmacist. 247 Mass. Code Regs. 5.03(2), (3) (2008).	
Massachusetts	Medical Doctors	_		MA Medical Doctor law encourages e-prescribing. Requires that applicants for physician licensure show competency in e-prescribing. In addition, such competency is an eligibility requirement for a state program offering repayment assistance for medical school loans.  Mass. Gen. Laws Ann. ch. 112, § 2 (2009); Mass. Gen. Laws Ann. ch. 111, § 25N(a) (2009).
Massachusetts	Medicaid	MA Medicaid law appears to allow e-prescriptions provided that they are permissible under state and federal law. 130 Mass. Code Regs. 406.411(A) (2008); accord 130 Mass. Code Regs. 410.461(A), 433.441(A) (2008).	_	

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Massachusetts	Food & Drug	MA Food & Drug law defines "written prescription" as including prescriptions that have been issued electronically and bear the electronic signature of the prescriber and other standard content requirements for prescriptions.  Mass. Gen. Laws. Ann. ch. 94, § 187 (2009).		
Massachusetts	Department of Public Health/ Standards for Prescription Format and Security	MA Dept. of Public Health regulations expressly permit e-prescriptions and establish security standards. 105 Mass. Code Regs. 721.020(A)(3) (2008).	MA Public Health regulations permit e-prescriptions for controlled substances to the extent permitted by state law and DEA and other federal regulations.  105 Mass. Code Regs. 721.030 (2008).	
Massachusetts	Regulation of Trade/Controlled Substances Act	_	The MA Controlled Substances Act permits an e-prescription for a controlled substance unless otherwise prohibited by law. Mass. Gen. Laws Ann. ch. 94C, § 23(g) (2009).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Michigan	Pharmacy	MI Pharmacy law has detailed provisions addressing e-prescriptions, including content and security standards. The law permits pharmacists to dispense  • e-prescriptions for noncontrolled substances transmitted by both in-state and out-of-state prescribers;  • e-prescriptions for Schedule III–V substances transmitted by in-state prescribers; and  • e-prescriptions for Schedule III–V substances transmitted by out-of-state prescribers in IL, MN, or who reside adjacent to the land border between MI and an adjoining state. Otherwise, pharmacists may not dispense prescriptions for controlled substances transmitted by out-of-state prescribers.  Mich. Comp. Laws § 333.17708 (2009); Mich. Comp. Laws Ann. § 333.17754 (2009); Mich. Comp. Laws Ann. § 333.17751(1), (2) (2009); Mich. Comp. Laws § 333.17763(e) (2009); Mich. Admin. Code r. 338.479b(8)-(13) (2009); Mich. Admin. Code r. 338.3162a (2009).	For Schedule II controlled substances, MI Pharmacy law defers to MI Controlled Substances law, which requires a written prescription for a Schedule II controlled substance. Mich. Comp. Laws Ann. § 333.17754 (2009).	Pharmacy law requires the transaction service vendor to retain a secured copy of the prescription for a minimum of year.  Mich. Admin. Code r.  338.479b(8)-(13) (2009).  Automated data processing system for recording prescriptions is permitted and must be able to print out an audit trail for any specified strength and dosage form of a controlled substance by either brand or generic name or an audit trail of controlled substance prescriptions writter for a particular patient or by a particular practitioner upon request. Does not require daily hard-copy printouts.

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Michigan	Public Health Code/ — Controlled Substances		MI Public Health Code/ – Controlled Substances law authorizes e-prescriptions for:	-
			<ul> <li>Schedule III–V controlled substances transmitted by in- state prescribers and</li> </ul>	
			<ul> <li>Schedule III-V controlled substances by out-of-state prescribers who are IL or MN physicians or physicians who reside adjacent to the land border between MI and an adjoining state.</li> <li>Mich. Comp. Laws Ann. § 333.7333(7) (2009); Mich. Comp. Laws Ann. § 333.7405(1)(e) (2009); Mich. Admin. Code r. 338.3162(4) (2009).</li> </ul>	
			Prescriptions for Schedule II controlled substances must be written on a prescription form. In an emergency situation, a pharmacist may dispense a Schedule II controlled substance	
			on an oral prescription which is followed within 7 days by a written prescription form that is delivered by hand or mailed to the dispensing pharmacy.  Mich. Comp. Laws Ann. § 333.7333(1)-(4), (7) (2009).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Minnesota	Pharmacy	MN Pharmacy law permits e-prescriptions. Generally, requires e-prescription transmitted from the prescriber to the pharmacy to comply with rules of the federal Drug Enforcement Administration. Minn. R. 6800.3000(3) (2008).	Schedule II substances require a written drug order, except where a fax or oral order reduced to writing is permissible (in an emergency).  Minn. R. 6800.6200(3) (2008).	Regulations on pharmacy's electronic data processing equipment specifically require daily printout of controlled substance prescriptions. Also require that the "original prescription" be retained on file (to be available in the event of a computer breakdown) and that the pharmacist compare the "original prescription" to the information entered into the computer, implying that an electronic prescription may not be an "original prescription." Minn. R. 6800.3950(1a)-(4) (2008).
Minnesota	Health/Drugs, Controlled Substances	_	Except in emergency situations, a prescription for a Schedule II controlled substance must be written in ink. Prescriptions for Schedule III or IV controlled substances may be written or oral.  Minn. Stat. Ann. § 152.11(1), (2) (2008).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Minnesota	Insurance/Health Care Cost Containment	MN Insurance law requires that an e-prescription drug program be established by January 1, 2011. Minn. Stat. Ann. § 62J.497(2)(a), (2)(b) (2008).	_	_
		The statute contains detailed technical standards for electronic prescriptions.  See Minn. Stat. Ann. § 62J.497(2), (3) (2008).		
Mississippi	Pharmacy	Pharmacy law does not define "electronically transmitted." Allows pharmacist to accept electronically transmitted prescriptions (except Schedule II). 50-018-001 Miss. Code R. art. XII (2008).	Pharmacy law permits prescriptions for Schedule II only in writing or via fax. 50-018-001 Miss. Code R. art. XIX (2008).	Pharmacy law requires pharmacists to file and maintain paper copy of electronically transmitted prescription. 50-018-001 Miss. Code R. art XIII (2008).
Mississippi	Medical Doctors	Define e-prescribing as including computer-to-computer transmission. Permit e-prescribing with exceptions for certain specified drugs not "controlled substances" under federal law, e.g., Nalbuphine Hcl. 50-013-25 Miss. Code R. § 10 (2008)	Permit only paper or computer- to-fax or fax-to-fax transmission of controlled substance prescription information. 50-013-25 Miss. Code R. § 9(6) (2008). Require compliance with Title 21 CFR, Part 1306.50-013-25 Miss. Code R. § 9 (2008).	
Mississippi	Medicaid	Medicaid laws generally recognize electronic transmission and e-prescribed orders (i.e., use the terms) but do not define and do not specify requirements. 13-000-011 Miss. Code R. § 31.27 (2008).	_	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Missouri	Pharmacy	MO Pharmacy law permits e-prescriptions, defined to encompass both fax and other electronic transmissions.  MO. Code Regs. Ann. tit. 20, § 2220-2.085(2) (2008);  MO. Code Regs. Ann. tit. 20, § 2220-2.085(1) (2008).	A prescription for a controlled substance must comply with all requirements of federal and state controlled substance laws.  MO. Code Regs. Ann. tit. 20, § 2220-2.018(1)(K) (2008).	Pharmacy regulation specifies that the patient has the option of having an electronically produced prescription sent electronically to a pharmacy or provided as a hard copy generated from the prescriber's electronic prescribing system.  MO. Code Regs. Ann. tit. 20, § 2220-2.085(2) (2008).
Missouri	Public Health and Welfare/Drug Regulations/ Narcotic Drug Act		Controlled substance laws impede e-prescribing. Prescriptions for Schedule III–V substances may be transmitted by electronic transmission, but must be reduced to writing by the pharmacist. (In limited circumstances, Schedule II prescriptions may also be transmitted electronically.) MO. Code Regs. Ann. tit. 19, § 30-1.062 (2008). Pharmacist who dispenses controlled substances under a prescription transmitted by electronic computer transmission must verify with the practitioner within 30 days of the filling of the prescription that it was authorized by the practitioner either via telephone or by sending the practitioner a copy of a computer printout, which the practitioner must verify, sign, and return to the pharmacy. MO. Code Regs. Ann. tit. 19, § 30-1.048(7)-(10) (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Missouri	Public Health and Welfare/Old Age Assistance, Aid to Dependent Children/Health Care Technology Fund			MO's General Assembly has established a "Health Care Technology Fund" that is to be used to improve health care technology, including e-prescribing. The MO HealthNet Oversight Committee was to have reported recommendations to the governor and general assembly regarding expenditures from the fund by January 1, 2008. Mo. Rev. Stat. Ann. § 208.975(1), (2) (2009); Mo. Rev. Stat. Ann. § 208.978(1), (3) (2009).
Montana	Pharmacy	MT Pharmacy law permits prescriptions by "electronic transmission" for noncontrolled substances, but does not define that term. However, the regulations appear to encompass both computer-to-computer and fax transmissions.  Mont. Code Ann. § 37-7-101(31) (2007); Mont. Admin. R. 24.174.523(1)-(4) (2009).	Prescriptions for Schedule II controlled substances may be transmitted electronically only in limited cases. It is unclear whether prescriptions for Schedule III–V controlled substances may be electronically transmitted other than by fax. See Mont. Admin. R. 24.174.523(3)(2009) (pharmacist may dispense Schedule III–V drug "pursuant to either a written prescription signed by a practitioner or a copy of a written, signed prescription transmitted by the practitioner to the pharmacy by electronic means").	On their face, the pharmacy regulations appear to require that electronically transmitted prescriptions be transcribed by the pharmacist, rather than retained in electronic format. If this is correct, this requirement would impede e-prescribing. See Mont. Admin. R. 24.174.523(4)(e) (2009) ("A printed, nonfading copy of an electronically transcribed prescription will be maintained in the pharmacy for a period of 2 years").

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Montana	Food & Drug —		MT Food & Drug law permits only written or oral prescriptions (that are reduced to writing by the pharmacist) for habit-forming drugs or drugs requiring professional supervision for safe use.  Mont. Code Ann. § 50-31-307(1), (2) (2007).	_
Montana	Health and Safety/ — Controlled Substances		mt Controlled Substances law requires a written prescription for Schedule II dangerous drugs (i.e., controlled substances) except in emergency situations. Schedule III or IV drugs may be dispensed based on either a written or oral prescription. Although the Controlled Substances law defines "prescription" to include an electronically transmitted prescription, it does not appear to otherwise authorize e-prescriptions. Mont. Code Ann. § 50-32-208(1)-(3) (2007). Mt follows federal law regarding the scheduling of drugs unless the state Board of Pharmacy disagrees with the federal decision. Mont. Code Ann. § 50-32-203 (2007).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Nebraska	Pharmacy	NE Pharmacy law permits electronic transmission (defined to include computer-to-computer transmission) of prescriptions for noncontrolled drugs. Has specific requirements for digital signatures including the following:  • it is unique to the person using it;  • it is capable of verification;  • it is under the sole control of the person using it;  • it is linked to data in such a manner that if the data are changed, the digital signature is invalidated; and  • it conforms to rules and regulations adopted and promulgated by the [NE] Secretary of State.  Neb. Rev. Stat. Ann. § 38-2870(3)-(5) (2009); Neb. Rev. Stat. Ann. § 38-2821 (2009); Neb. Rev. Stat. Ann. § 86-611(2) (2009).		Pharmacists (or pharmacisi interns) must sign and date "the face" of Schedule II controlled substance prescriptions when they are dispensed and keep on file an original hard copy of Schedule II controlled substance prescriptions except when otherwise allowed by the Uniform Controlled Substances Act. 175 Neb. Admin. Code § 8-005.03 (2009).

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Nebraska	Medicaid	NE Medicaid regulations indirectly authorize e-prescribing. The regulations refer to e-prescribing as an exception to the requirement that a written prescription be executed on a tamper-resistant pad. 471 Neb. Admin. Code §§ 1-002.02N, 1-002.02N1 (2009).	_	_
Nebraska	Crimes and Punishments/Drugs and Narcotics/ Noncode Provisions	NE Crimes and Punishments law permits e-prescriptions for noncontrolled drugs.  Neb. Rev. Stat. Ann. § 28-1437(2), (3) (2009).	NE Crimes and Punishments law permits legend drugs to be transmitted electronically. A Schedule II controlled substance drug may not be dispensed without a written, signed prescription except in emergencies or other limited situations. Schedule III–V drugs may be dispensed based on a written prescription, or an oral order. There is no provision that expressly permits e-prescribing Schedule III–V drugs.  Neb. Rev. Stat. Ann. § 28-414(1)(a), (1)(b), (1)(c), (2)(a) (2009).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Nevada	Pharmacy	NV Pharmacy law permits e-prescriptions (including computer-to-computer transmissions) for noncontrolled drugs. Nev. Rev. Stat. Ann. § 639.2353 (2009); Nev. Admin. Code § 639.7105 (2008).	E-prescriptions for Schedule II controlled substances are not permitted. The pharmacy regulations permit e-prescriptions for "dangerous drugs" or controlled substances listed in Schedules III–V. A prescription for a controlled substance may not be given by electronic transmission unless authorized by federal law. Nev. Rev. Stat. Ann. § 639.2353(5) (2009); Nev. Admin. Code § 639.7102(8) (2008); Nev. Admin. Code § 639.7105(1) (2008).	The state has detailed requirements for e-prescribing, some of which appear likely to impede e-prescribing. One regulatory provision that may impede e-prescribing is the requirement that a practitioner obtain a patient's consent to send a prescription electronically. Another regulator provision appears to require that a pharmacist print a copy of a prescription transmitted electronically and retain the copy for 2 years.  Nev. Admin. Code § 639.7105 (2008).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

Nevada  Public Health and — Safety/Controlled Substances  NV Controlled Substance statute — provides that the state board of pharmacy may not adopt regulations governing the electronic transmission of controlled substances that are more stringent than federal law governing the electronic transmission of such substances.  Under current NV Controlled Substance statute and regulations, except in limited situations or in an emergency, a prescription for a Schedule II controlled substance must be in writing. A prescription for a Schedule III, IV, or V controlled substance may be faxed to a pharmacy. Note: unlike the pharmacy regulations, the controlled substance regulations do not expressly permit electronic transmission of prescriptions for Schedule III–V controlled substances.  Nev. Rev. Stat. Ann. § 453.385(3) (2009); Nev. Rev. Stat. Ann. § 453.256(1)-(3) (2009); Nev. Admin. Code §	State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
(2009); Nev. Admin. Code §		Public Health and – Safety/Controlled		NV Controlled Substance statute provides that the state board of pharmacy may not adopt regulations governing the electronic transmission of controlled substances that are more stringent than federal law governing the electronic transmission of such substances. Under current NV Controlled Substance statute and regulations, except in limited situations or in an emergency, a prescription for a Schedule II controlled substance must be in writing. A prescription for a Schedule III, IV, or V controlled substance may be faxed to a pharmacy. Note: unlike the pharmacy regulations, the controlled substance regulations do not expressly permit electronic transmission of prescriptions for Schedule III–V controlled substances.  Nev. Rev. Stat. Ann. § 453.385(3) (2009); Nev. Rev. Stat. Ann. § 453.256(1)-(3)	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Nevada	Public Health and Safety/Poisons; Dangerous Drugs and Hypodermics	NV Public Health and Safety law, which generally governs drugs that may be sold only by prescription, defines "prescription" as including electronic transmission of an order from the practitioner to the pharmacist. However, the statute and the implementing regulations do not substantively address e-prescribing, and require that prescriptions be written on a prescription blank or as an order on a patient's chart.  Nev. Rev. Stat. Ann. 454.00961 (2009); Nev. Rev. Stat. Ann. § 454.223 (2009).		
New Hampshire	Pharmacy	NH Pharmacy law permits e-prescriptions for noncontrolled substances, which include both facsimile prescriptions and other electronic prescriptions. N.H. Rev. Stat. Ann. § 318:47-c (2009); N.H. Rev. Stat. Ann. § 318:1(III), (XVI), (XXIV) (2009); N.H. Code Admin. R. Ann. Ph 704.03 (a)-(c) (2009).	NH Pharmacy law permits facsimile transmission for prescriptions for Schedule III–V controlled substances, but does not address other types of electronic transmission for controlled substances. Prescriptions for Schedule II controlled substances may be transmitted by facsimile only in limited circumstances.  N.H. Code Admin. R. Ann. Ph 704.03(b)(3), (d)-(f) (2009).	Record-keeping requirements may impede e-prescribing. Pharmacies using automated data processing systems apparently must maintain a "hard copy of all prescriptions." Further, refills entered into a pharmacy's automated data processing system must be documented by a hard-copy printout of each day's controlled substance order refill data signed by the dispensing pharmacists or a bound log book or file signed daily by the dispensing pharmacists, attesting to the correctness of the refill information entered into the computer.  N.H. Code Admin. R. Ann. Ph 703.05(j), (k), (o) (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
New Hampshire	Medical Doctors	NH Board of Medicine regulations — define "prescription" to include an electronically transmitted prescription. N.H. Code Admin. R. Ann. Med 601.07 (2009).		_
New Hampshire	Medicaid	Regulations for the NH medical assistance program adopt the definition of "prescription" included in the NH pharmacy statutes. This definition encompasses both facsimile and other electronically transmitted drug orders.  N.H. Code Admin. R. Ann. He-W 570.01(z) (2009); N.H. Rev. Stat. Ann. § 318:1(XVI) (2009).		
New Hampshire	Food & Drug	NH Food & Drug law requires that drugs needing professional supervision for safe use be dispensed only upon a written prescription or an oral prescription reduced to writing by the pharmacist. E-prescriptions are not addressed. Compare to provisions in occupations code, pharmacies, which specifically state that a "written order" includes an electronic transmission prescription (see N.H. Rev. Stat. 318:1 (2009)). N.H. Rev. Stat. Ann. § 146:6(XI) (2009).		

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
New Hampshire	Occupations and Professions/ Controlled Drug Act	_	The NH Controlled Drug Act permits e-prescriptions properly executed, dated, manually or electronically signed "in pursuance of regulations promulgated by the Dept. of Justice of the United States, under the provisions of the Comprehensive Drug Abuse Prevention Act of 1970, as amended."  N.H. Rev. Stat. Ann. § 318-B:9(I), (III) (2009).	_
New Jersey	Pharmacy	NJ Pharmacy law permits electronic prescriptions (defined to include computer-to-computer transmissions) for noncontrolled substances and expressly makes an exception for state requirements for handwritten signatures and tamper-proof blanks with respect to e-prescribing.  N.J. Stat. Ann. § 45:14-41 (2009); N.J. Admin. Code § 13:39-7.11(a)-(j) (2009).	If federal law were to permit e-prescriptions for controlled substances, NJ law would also permit such e-prescriptions. Otherwise, NJ law requires a signed written prescription prior to the dispensing of a Schedule II controlled substance. For Schedule III–V controlled substances, a written, oral, or facsimile prescription must be provided prior to dispensing. N.J. Stat. Ann. § 45:14-58(b) (2009); N.J. Admin. Code § 13:39-7.11(h), (i) (2009).	NJ Pharmacy regulations offer a good model for any states wishing to modify (for e-prescriptions) a common state record-keeping requirement that a pharmacist who fills a prescription must place his or her initials on the face of the original prescription. The NJ regulations allow pharmacists to place their initials or other personal identifier into the pharmacy's electronic data processing system.  N.J. Admin. Code § 13:39-7.6(a), (c) (2009).  It is unclear whether record-keeping requirements that mandate separate files for controlled substance prescriptions are fulfilled by maintaining controlled substance prescriptions in electronic form in a manner in which they may be segregated from other prescriptions.  N.J. Admin. Code § 13:39-7.9 (2009).

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
New Jersey	Medical Doctors	Regulations of the NJ Board of Medical Examiners permit e-prescriptions (defined to include computer-to-computer transmissions) for noncontrolled substances. Require electronic signature or other method of validation. Require system used to transmit prescription to at least have encryption.  N.J. Admin. Code § 13:35-7.4A (2009).	_	
New Jersey	Food & Drug		NJ Food & Drug law requires a written prescription for a Schedule II controlled substance and a written or oral prescription for a Schedule III or IV controlled substance. The law does not address e-prescriptions.  N.J. Stat. Ann. § 24:21-15(a), (b) (2009).	

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
New Jersey	Health and Senior Services/Controlled Dangerous Substances		NJ regulations governing controlled dangerous substances require a written prescription for Schedule II controlled substances (except in limited cases) and a written or oral prescription (that is reduced to writing by a pharmacist) for Schedule III–V controlled substances. The regulations do not address electronic prescriptions.  N.J. Admin. Code § 8:65-7.8(a), (d) (2009); N.J. Admin. Code § 8:65-7.13(a), (b) (2009); N.J. Admin. Code § 8:65-7.5(a) (2009).	
New Jersey	Law and Public Safety/Division of Consumer Affairs/NJ Prescription Blank Program	NJ Consumer Affairs regulations exempt prescribers from the requirement of using the NJ Prescription Blank to prescribe drugs if they are lawfully prescribing drugs verbally, electronically, or by facsimile. N.J. Admin. Code § 13:45A-27.3(e), (f) (2009).	Prescribers are exempt from using NJ tamperproof prescription blanks for Schedule II controlled substances if the prescription is transmitted or prepared in "compliance with DEA regulations as set forth in 21 C.F.R. 1306.11(d), (e), (f) (g)." N.J. Admin. Code § 13:45A-27.3(f) (2009).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
New Mexico	Pharmacy	NM Pharmacy law permits electronic transmission (by any electronic device) of prescriptions for noncontrolled substances between "contracted" parties.  N.M. Stat. Ann. § 61-11-2 (B), (M), (CC) (2008); N.M. Code R. § 16.19.6.23(A), (F) (2009).	NM Pharmacy regulations permit electronically transmitted prescriptions for controlled substances "to the extent permitted by federal law." However, the regulations also specifically require Schedule II controlled substance prescriptions to be written and manually signed by the practitioner, except in limited circumstances. Prescriptions for Schedule III or IV controlled substances must be: written and signed; a fax of a written and signed prescription; or an oral prescription reduced promptly to written form by the pharmacist. N.M. Code R. § 16.19.6.7(C) (2009); N.M. Code R. § 16.19.20.42(A), (B), (F) (2009).	An electronically transmitted prescription may serve as the hard-copy record of the prescription provided that it can be stored in its original format and is readily retrievable.  N.M. Code R. § 16.19.6.23(A), (F) (2009)
New Mexico	Medical Doctors	The NM Physician Assistant Act and related regulations define "prescription" in a way that may or may not cover electronic prescribing. A "prescription" includes an order that goes "directly" from the prescriber to the pharmacist and an order that goes "indirectly" by means of a "written order signed by the prescriber."  N.M. Stat. Ann. § 61-6.7.1(D) (2008); accord N.M. Code R. § 16.10.16.7(A) (2009).		

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
New Mexico	Food & Drug	The NM Drug, Device and Cosmetic Act defines "prescription" to include a prescription sent to a pharmacist by "electronic transmission," but this latter term is not defined. N.M. Stat. Ann. § 26-1-2(I) (2008).	_	_
New Mexico	Criminal Offenses/ Controlled Substances		The NM Controlled Substances Act defines "prescription" to include a prescription sent to a pharmacist by "electronic transmission," but this latter term is not defined and may refer only to fax transmission (particularly since the related controlled substance provisions do not authorize electronic prescriptions other than by fax— see below). N.M. Stat. Ann. § 30-31-2(S) (2008). NM Controlled Substances law requires a written prescription for Schedule II controlled substances (except in emergency situations) and a written or oral prescription for controlled substances in Schedules III or IV. N.M. Stat. Ann. § 30-31-18(A), (C), (G) (2008).	

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
New York	Pharmacy	NY Pharmacy regulations permit e-prescriptions (which include, but are not limited to, facsimile prescriptions) for noncontrolled substances. Require electronic signature and use of encryption in transmission.  N.Y. Comp. Codes R. & Rags. tit. 8, § 63.6(a)(7) (2009).	"[E]lectronically transmitted prescription" excludes any such prescription for a controlled substance under Article 33 of the Public Health Law.  N.Y. Comp. Codes R. & Regs. tit.  8, § 63.6(a)(7)(i) (2009).	A Pharmacy regulatory requirement that may impede e-prescribing is the requirement that a pharmacy produce and retain a "permanent hard copy" of an e-prescription for 5 years. N.Y. Comp. Codes R. & Rags. tit 8, § 63.6(a)(7) (2009).
New York	Medicaid	NY Medicaid law permits e-prescriptions unless they are prohibited by other law. Pharmacist must make a good faith effort to verify the practitioner's identity and validity of the prescription if the practitioner is unknown to the pharmacist. N.Y. Comp. Codes R. & Regs. tit. 18, § 505.3(b)(6) (2009).	_	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
lew York	Public Health/ -		NY Public Health/Controlled	_
	Controlled		Substances laws (statute and	
	Substances		regulations) currently require a	
			written, manually signed prescription	
			on an official NY prescription form for	
			controlled substances except in	
			emergencies or other limited	
			situations. Even in situations where a	
			fax prescription is permitted, the	
			practitioner must deliver to the	
			pharmacist an official NY prescription	
			form within 72 hours.	
			N.Y. Pub. Health Law § 3332(1), (2)	
			(2009); N.Y. Pub. Health Law §	
			3333(1) (2009); N.Y. Comp. Codes	
			R. & Regs. tit. 10, § 80.67(a), (b),	
			(e), (f) (2009); N.Y. Comp. Codes R.	
			& Regs. tit. 10, § 80.69(a), (e), (f)	
			(2009).	
			However, NY Public Health/	
			Controlled Substances law also	
			expressly permits the use and	
			transmission of e-prescriptions	
			"pursuant to regulations" and	
			expressly authorizes the	
			promulgation of regulations with	
			respect to the prescribing,	
			dispensing, use, and transmission of	
			e-prescriptions in lieu of the official	
			NY prescription form. Such	
			regulations do not appear to have	
			been promulgated.	
			N.Y. Pub. Health Law § 3338(2), (3)	
			(2009); N.Y. Pub. Health Law §	
			3308(5) (2009).	

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
North Carolina	Pharmacy	NC Pharmacy regulations expressly permit electronic transmissions (distinct from fax transmissions) and have basic content requirements. The Pharmacy Board's regulations thus implicitly interpret "written order for prescription drug" (statutory definition of prescription) as including electronically transmitted prescriptions.  N.C. Gen. Stat. § 90-85.3 (2008); 21 N.C. Admin. Code 46.1813 (2008).		NC Pharmacy regulations require each pharmacist who enters prescription information into an automated data processing system to document the correctness of his or her entries by manually signing a daily printout, log book, or separate file.  21 N.C. Admin. Code 46.2303 (2008); 21 N.C. Admin. Code 46.2304(3) (2008).
North Carolina	Food & Drug	NC Food & Drug law requires a written prescription signed by the prescriber or an oral prescription reduced to writing.  N.C. Gen. Stat. Ann. § 106-134.1(a) (2009).		

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
North Carolina	Medicine and Allied Occupations/NC Controlled Substances Act		Under regulations governing controlled substances, compliance with the prescription requirements of the federal law, including the requirements presented in Part 1306 of Title 21 of the Code of Federal Regulations, is deemed compliant with NC Controlled Substances Act. 10A N.C. Admin. Code 26E.0301 (2008).  Otherwise NC regulations require a written prescription for a Schedule II controlled substance (except in an emergency) and an oral or written prescription for Schedule III—IV controlled substances.  N.C. Gen. Stat. § 90-106(a)-(c) (2009).	
North Dakota	Pharmacy	ND Pharmacy regulations permit e-prescriptions (in addition to fax transmissions) except for prescriptions for Schedule II controlled substances. N.D. Admin. Code 61-04-05-02 (2008).	Schedule III–V controlled substance prescriptions may be prescribed electronically, but not Schedule II controlled substances.  N.D. Admin. Code 61-04-05-03(1), (2) (2008).	A record-keeping requirement in ND Pharmacy regulations appears to be inconsistent with a paper-free e-prescribing system. Pharmacies using electronic data processing equipment for prescriptions must produce a daily hard-copy summary of controlled substance transactions.  N.D. Admin. Code 61-02-06-02(3) (2008).

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
North Dakota	Food & Drug -		ND Food & Drug law requires a written prescription for a Schedule II controlled substance, except in emergency situations or other limited circumstances. Schedule III–V controlled substances require a written prescription or an oral prescription that is promptly reduced to writing. In limited circumstances, a faxed prescription is permitted for these substances.  N.D. Cent. Code § 19-03.1-22 (2009).	
Northern Mariana Islands	Food & Drug [Regulations Governing the Importation, Storage, Sales and Distribution of Drugs and Pharmaceutical Products]		CNMI Food & Drug regulations require a handwritten prescription for a Schedule II controlled substance. Otherwise, prescriptions for a controlled substance must comply with federal regulation and with the CNMI definition of "prescription" which permits a written, facsimile, or telephone order. 140 NMIAC 50.2-001(g) (2007); 140 NMIAC 50.2-001(aa) (2007).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Ohio	Pharmacy	OH Pharmacy statute requires that a prescription received electronically be recorded in writing. Prescriptions transmitted electronically by a board-approved electronic prescription transmission system fulfill this requirement and are treated as the original prescription under the Ohio Pharmacy regulations. Prescriptions transmitted electronically by other means (e.g., nonapproved systems) must be recorded in writing by the pharmacist and the hard copy recorded by the receiving pharmacist is treated as the original prescription. Ohio Rev. Code Ann. § 4729.37 (2009); Ohio Admin. Code 4729-5-01(H), (N) (2009).  Nonetheless, it appears that even prescriptions received by approved systems must be "printed to document the dispensing." Ohio Admin. Code 4729-5-21(F) (2009).	OH Pharmacy law/regulations expressly permit the use of an approved e-prescription transmission system to fax a controlled substance prescription to a pharmacy. The regulations do not expressly permit computer- to-computer transmission of prescriptions for controlled substances. Ohio Admin. Code 4729-5- 13(B), (E) (2009).	Pharmacy regulations require an e-prescription transmission system to use specified means of identifying users and prohibit relying solely on the use of a password. System must also include  • a manual signature on a hard-copy record;  • a magnetic card reader;  • a bar code reader;  • a thumbprint reader or other biometric method;  • a proximity badge reader;  • a board-approved system of randomly generated personal questions;  • a printout of every transaction that is verified and manually signed within a reasonable period of time by the individual who prescribed, administered, or dispensed the dangerous drug;  • other effective methods for identifying individuals that have been approved by the [state] board [of pharmacy]; and  • a method relying on a magnetic card reader, a bar code reader, a proximity badge reader, or randomly generated questions for identification must also include a private personal identifier, such as a password, for entry into a secure mechanical or electronic system.  Ohio Admin. Code 4729-5-01(H), (N) (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Ohio	Medicaid	OH Medicaid regulations list e-prescriptions as an acceptable alternative to written prescriptions on tamper-resistant forms. Ohio Admin. Code 5101:3-9-06 (2009).		OH Medicaid law authorizes the Medicaid program to establish an e-prescribing system which would require a provider to prescribe electronically if the provider was one of the top 10 Medicaid prescribers for Medicaid recipients receiving hospital services in the previous year. In addition, the Ohio legislature requires a quarterly report from the Medicaid program that includes an update of the progress made on the development of "infrastructure policies for electronic health records and e-prescribing." Ohio Rev. Code Ann. § 5111.083 (2009); Ohio Rev. Code Ann. § 5111.091 (2009).
Ohio	Food & Drug	OH Food & Drug law permits e-prescriptions for drugs. Ohio Rev. Code Ann. § 3715.64(A)(12) (2009).	_	_
Ohio	Health-Safety- Morals/Controlled Substances	_	OH Controlled Substances law does not address e-prescriptions. It requires a written prescription for a Schedule II controlled substance, except in an emergency situation when an oral prescription is permitted. Ohio Rev. Code Ann. § 3719.05 (2009).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Oklahoma	Pharmacy	OK Pharmacy law permits – prescriptions to be "transmitted" by means other than verbal if	-	OK Pharmacy law includes some provisions that may burden e-prescribing:
		certain requirements are met, including, among other things, that no intervening person alter the prescription order and that equipment for receipt of prescription orders be maintained so as to ensure against unauthorized access.  Okla. Admin. Code § 535:15-3-15.1 (2007).		<ul> <li>A statute requiring that         prescriptions received other than         by "written communication" mus         be recorded in writing by the         pharmacist. It is not clear         whether this would apply to an         e-prescription since "written         communication" is not defined.         See Okla. Stat. Ann. tit. 59, §         353.13A(A) (2009).</li> </ul>
				<ul> <li>A pharmacy regulation requiring (citing federal regulation) that a pharmacy using an automated data processing system to maintain prescription files must either:</li> </ul>
			(1) generate nightly reports for prescriptions for Schedule II and other controlled substances that are verified and signed by the pharmacis or	
			(2) maintain a bound log book of separate file for controlled substance prescriptions in which dispensing pharmacists sign a daily statement verifying that the information entered into the computer system is correct.	
				See Okla. Admin. Code § 535:15-3 21(d) (2007).

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Oklahoma	Medicaid	OK Medicaid regulations require the retention of original written prescriptions. It is not clear whether e-prescriptions are considered "original written prescriptions." Okla. Admin. Code § 317:30-5- 70.2 (2007).		As part of the OK Medicaid Reform Act of 2006, the OK Health Care Authority was required to design and implement an e-prescribing pilor program. A report of the pilot program was to be submitted to the Governor and the Legislatur within 18 months of the start of the program.  Okla. Stat. Ann. tit. 56, § 1011.4(B), (C) (2009).
Oklahoma	Food & Drug	The OK Drug, Medical Devices, and Cosmetics law expressly addresses written and oral prescriptions but not e-prescriptions. Okla. Stat. Ann. tit. 63, § 1-1409(k) (2009).	_	<del>_</del>

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Oklahoma	Public Health and Safety/Uniform Controlled Dangerous Substances Act		OK Controlled Dangerous Substances law requires a written, signed prescription for a Schedule II controlled substance except in emergency situations when an oral prescription reduced to writing by the pharmacist is permitted. In addition, Schedule II prescriptions to a home infusion pharmacy or for long-term care or hospice patients may be faxed.  Prescriptions for Schedule III–V drugs may be written, faxed, or oral (if reduced to writing by the pharmacist). E-prescribing is not addressed. Okla. Stat. Ann. tit. 63, § 2-309(A), (B), (F) (2009); Okla. Admin. Code § 475:30-1-4(a), (d), (f) (2007); Okla. Admin. Code § 475:30-1- 10(a) (2007).	OK Controlled Substances law appears to provide for the transmission of a prescription to a pharmacy by "electronic transmission" (in addition to facsimile transmission), but the statutory and regulatory details relate to facsimile transmission. Moreover, an e-prescription with a computer-generated signature is to be treated as a "call-in prescription" and, accordingly, must be reduced to writing by the pharmacist. Okla. Stat. Ann. tit. 63, § 2-309(A)(2) (2009); Okla. Admin. Code § 475:30-1-4(a) (2007).
Oregon	Pharmacy	OR Pharmacy law permits electronically transmitted prescriptions for noncontrolled substances by practitioners licensed within the state.  OR. Rev. Stat. Ann. § 689.005(31) (2007); OR. Admin. R. 855-006-0015(1) (2009); OR. Admin. R. 855-019-0210(6) (2009).	Electronically transmitted prescriptions for controlled substances are not allowed, unless they are permitted by federal regulations. OR Pharmacy law generally adopts federal regulations with respect to requirements for controlled substance prescriptions. In addition, OR uses the federal schedules of controlled substances. OR. Admin. R. 855-080-0085 (2009); OR. Admin. R. 855-080-0020 (2009).	Prescriptions received electronically may be retained electronically. OR. Rev. Stat. Ann. § 689.508 (2007); see also OR. Admin. R. 855-041-0060(1)(a) (2009).

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Oregon	Medicaid	OR Medicaid law requires the state Department of Human Services to seek a federal waiver to permit e-prescribing in the Medicaid program. The state follows federal law in requiring that written prescriptions for Medicaid recipients either be written on a tamper-resistant pad or transmitted electronically to be eligible for reimbursement. OR. Rev. Stat. Ann. § 414.327 (2007); Or. Admin. R. 410-121-0145(3) (2009).		
Oregon	Alcoholic Liquors; Controlled Substances; Drugs		OR Controlled Substances law permits e-prescriptions (which include computer-to-computer transmissions) except for prescriptions for Schedule II controlled substances (or prescriptions for lethal injections, poisons, "death with dignity" drugs, or juvenile detainee medicine) which must be in writing. In emergency situations, Schedule II drugs may be prescribed orally or electronically if the prescription is reduced to writing and filed by the pharmacy. Electronic prescriptions for other controlled substances may be stored electronically.  OR. Rev. Stat. Ann. § 475.185 (2007); OR. Rev. Stat. Ann. § 475.188 (2007); OR. Rev. Stat. Ann. § 475.005(5), (6), (14), (19) (2007).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Pennsylvania	Pharmacy	PA Pharmacy law permits electronically transmitted prescriptions (including computer-to-computer, computer-to-fax machine, or e-mail transmissions) other than for Schedule II controlled substances. Requires standard information in prescription and encryption or other technology to prevent access, alteration, manipulation, or use by any unauthorized person.  49 PA. Code § 27.201 (2009).	PA Pharmacy law requires that prescriptions for Schedule II controlled substances be manually signed by the prescriber. A fax prescription for a Schedule II controlled substance is permitted if the prescription is for direct administration or for a long-term care or hospice patient.  A pharmacist may dispense a prescription that is electronically transmitted or faxed for a Schedule III–V controlled substance.  49 PA. Code § 27.201(b) (2009); 49 PA. Code § 27.18(b)(2) (2009); 49 PA. Code § 27.20 (2009).	One requirement that may impede e-prescribing relates to refills for nonproprietary drugs. Prescriptions for nonproprietary drugs which are to be refilled more times than permitted for a Schedule III–V controlled substance (i.e., more than five times in the 6-month period from the date of the prescription) must specifically indicate the number of refills "in the original handwriting of the prescriber." 49 PA. Code § 27.18(j) (2009).
Pennsylvania	Medical Doctors	_	PA Medical Doctor regulations accord with the requirement in its Controlled Substances regulations that emergency oral prescriptions for Schedule II controlled substances must be followed by a written prescription within 72 hours. 49 PA. Code § 16.92(a)(5) (2009).	(continued)

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Pennsylvania	Medicaid	PA Medicaid regulations on content of prescriptions address only written or oral prescriptions. 55 PA. Code § 1121.52 (2009).		Parenthetical note regarding PA prescription requirements in public assistance programs: The PA Department of Aging administers a prescription program for low-income senior citizens who are not enrolled in the Department of Public Welfare's Medicaid prescription benefit. Providers in that program must retain original hard copy prescriptions for 4 years. An original hard copy prescription is either the original written prescription from the prescriber or an oral order that has been reduced to writing by the pharmacist and bears the pharmacist's handwritten signature or initials. In addition, the pharmacy must maintain a daily hard copy record of filled and refilled prescriptions bearing the handwritten signature or initials of the pharmacist who filled or refilled the prescription. 6 PA. Code § 22.62(c) (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Pennsylvania	Food & Drug [Health and Safety/Controlled Substance, Drug, Device, and Cosmetic Act]		PA Controlled Substances/ Drugs, Devices, and Cosmetics law requires a written, manually signed prescription for Schedule II controlled substances (except in an emergency situation) and a written or oral prescription for Schedule III–IV substances. E-prescribing is not addressed. 35 PA. Stat. Ann. § 780-111 (2008); 35 PA. Stat. Ann. § 780- 113(a)(15) (2008); 28 PA. Code § 25.41 (2009); 28 PA. Code § 25.53 (2009).	Some regulatory record-keeping requirements may impede e-prescribing. Prescription orders for Schedule I and II controlled substances must be maintained in a separate prescription file. Prescription orders for Schedule III–V controlled substances may be maintained either in a separate prescription file or "in such form that they are readily retrievable from the other pharmacy prescription records" such as by being marked with a red "C." No acceptable means specified for designating e-prescriptions.  28 PA. Code § 25.56 (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Puerto Rico†  † The conclusions for PR are based on an analysis of PR statutes; PR regulations are not readily available in English.	Pharmacy	PR Pharmacy law permits e-prescribing (which includes digital transmission) for noncontrolled substances, but only as a preliminary step to initiate the prescription filling process. The patient or a representative must hand over the "original" prescription to the pharmacist before the medication is actually dispensed. The e-prescription may be transmitted to the pharmacy by the patient as well as by the prescriber. In the case of an emergency, medication may be dispensed based upon an e-prescription transmitted by the prescriber, which is transcribed by the pharmacist upon receipt. The prescriber must deliver a written prescription to the pharmacy within 120 days. P.R. Laws Ann. tit. 20, § 410a(c), (e)-(g), (m) (2006).	PR Pharmacy/Pharmacist law defers to the Puerto Rico Controlled Substances Act and to the Federal Controlled Substances Act with respect to dispensing and record-keeping requirements for controlled substances.  P.R. Laws Ann. tit. 20, § 410c(a) (2006).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Puerto Rico†  † The conclusions for PR are based on an analysis of PR statutes; PR regulations are not readily available in English.	Health and Sanitation/ Controlled Substances		PR Controlled Substances law requires a written prescription for a Schedule II controlled substance except that in an emergency situation, an oral prescription is permitted (which must be backed up by a written prescription within 48 hours). Schedule III or IV substances may be prescribed through a written or oral prescription. E-prescribing is not addressed. With respect to the scheduling of controlled substances, PR defers to federal law:  • by excluding from the schedules of controlled substances any nonnarcotic substance that, under the Federal Food, Drug and Cosmetic Act, may be sold without a prescription.  • by following the Federal Controlled Substance Act with regard to the designation, reclassification, or removal of any substance under that Act, unless the state Secretary of Health objects to the federal determination.  P.R. Laws Ann. tit. 24, § 2308	
			(2006); P.R. Laws Ann. tit. 24, § 2201(e), (f) (2006).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Rhode Island	Pharmacy	RI Pharmacy law permits e-prescriptions for noncontrolled substances and defers to the RI Controlled Substances Act, as well as other applicable state and federal laws, with respect to prescriptions for controlled substances. A patient has the right to choose the manner in which the patient's prescription is transmitted to the pharmacy. 14-130-001 R.I. Code R. §§ 8.4, 8.43 (2009).	RI Pharmacy law cites federal requirements as  • permitting the electronic transmission of a prescription for a controlled substance only when it is a copy of an original prescription signed by the prescriber and  • prohibiting electronic signatures for controlled substance prescriptions.  14-130-001 R.I. Code R. §  8.43(a), (b) (2009).	Pharmacies receiving e-prescriptions need not print hard copies of the prescriptions so long as they have the capacity to retrieve a hard copy from the pharmacy's computer memory. 14-130-001 R.I. Code R. §§ 8.4 (2009).
Rhode Island	Medicaid	RI Medicaid regulations generally require a written, manually signed prescription on a specified form (MA-509) for drugs dispensed to a Medicaid recipient.  15-040-004 R.I. Code R. § VII(E) (2009); 15-040-004 R.I. Code R. § IX (2009).	Prescriptions for Schedule II substances must be on specific forms. 15-040-004 R.I. Code R. § VII(A) (2009);15-040-004 R.I. Code R. § IX(C) (2009);15-040-004 R.I. Code R. § XVII(A) (2009).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Rhode Island	Food & Drug Law [Uniform Controlled Substances Act/RI Foods, Drugs and Cosmetics Act]	The RI Food, Drugs and Cosmetics Act contemplates e-prescriptions (but does not define e-prescriptions). R.I. Gen. Laws § 21-31-15(b)(1)(2009). Habit-forming or other drugs that require professional supervision for safe use require a written prescription or an oral prescription that has been reduced to writing. R.I. Gen. Laws § 21-31-15(a)(11) (2009).	The RI Uniform Controlled Substances Act requires a written, signed, and dated prescription for a Schedule II controlled substance in most circumstances. Controlled substance prescriptions must be on 2-part forms, with the pharmacist retaining the original and delivering the duplicate copy to the Director of Health.  The Director of Health has been granted the authority to promulgate rules and regulations for the purpose of adopting a system for electronic data transmission of prescriptions for controlled substances in Schedule II that would negate this paper-based requirement.  R.I. Gen. Laws § 21-28-3.18 (2009).	The definition of "prescription" within the RI Food, Drugs, and Cosmetics Act provides that a prescription received by "word of mouth, telephone, or other means of communication" shall be "reduced promptly to writing by the pharmacist." It is not clear whether a pharmacist would be required to reduce an e-prescription to writing R.I. Gen. Laws § 21-31-2(22) (2009).  A pharmacy may use an automatic data processing system to meet record-keeping requirements for oral prescriptions, but that system is not free of paper requirements. To validate the accuracy of the prescription information entered into the computer, the pharmacy must either:  • Maintain a bound log book, or separate file, in which each individual pharmacist involved if the dispensing shall sign a statement each day, verifying the correctness of the prescription information entered into the computer that day or provide a printout of each day's prescription information that is verified, dated, and signed by the individual pharmacist.  R.I. Gen. Laws § 21-28-3.18 (2009).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
South Carolina	Pharmacy	SC statutorily permits electronically transmitting prescription drug orders including those transmitted by computer. Content requirements include name and address of practitioner, phone number for verbal confirmation, time and date of transmission, and name of intended receiving pharmacy (as well as other information required by federal or state law). S.C. Code Ann. § 40-43-86(F) (2007).		
South Carolina	Health	SC Prescription Information Privacy Act permits and sets basic standards for e-prescribing for noncontrolled substances. S.C. Code Ann. § 44-117-320 (2007); S.C. Code Ann. § 44- 117-340 (2007).	Department of Health regulations governing controlled substances require prescriptions for controlled substances to be in writing. Pharmacist is required to manually, in cursive handwriting, place a notation on a controlled substance prescription when originally filled that indicates the date filled, the identity or initials of the pharmacist dispensing the prescription, and, if different from the quantity prescribed, the quantity dispensed. Regulations note "The purpose of the manual handwriting is to assist in positively identifying the performer of the dispensing function."  S.C. Code Ann. § 44-53-360 (2007); S.C. Code Ann. Regs. 61-4, Pt. 5 (505, 506.1, 508, 513) (2007).	Note that SC statutorily provides that e-prescriptions are to be treated like oral prescriptions: "All laws and regulations applicable to oral prescription drug orders apply to all computer to computer, computer to facsimile machine, electronic device to computer, email, or the transmission of the exact visual image of a document by way of electronic equipment prescription orders."  S.C. Code Ann. § 44-117-340 (2007).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
South Dakota	Pharmacy	SD Pharmacy law does not currently address e-prescribing. Noncontrolled prescription drugs require a written or faxed prescription or an oral prescription reduced to writing and filed.  S.D. Admin. R. 20:51:05:20 (2008).	Schedule II controlled substances require a manually signed prescription except in an emergency. Prescriptions for Schedule III and IV controlled substances may be faxed to the pharmacy.  S.D. Admin. R. 20:51:05:15 (2008); S.D. Admin. R. 20:51:05:17 (2008); S.D. Admin. R. 20:51:05:19 (2008).	Written and faxed prescriptions for all prescriptions must be maintained in hard copy for 2 years. S.D. Admin. R. 20:51:05:20 (2008); S.D. Admin. R. 20:51:20:03 (2008).
South Dakota	Food & Drug		Prescriptions for controlled substances must be written and manually signed. However, oral prescriptions for Schedule II drugs are permitted in an emergency if the pharmacist promptly reduces the oral prescription to writing and if the practitioner supplies a written prescription within 7 days. Fax prescriptions for Schedule III and IV drugs are permitted. S.D. Admin. R. 44:58:08:05 (2008); S.D. Admin. R. 44:58:08:13 (2008).	
South Dakota	Crimes	_	A prescription for a Schedule II controlled substance or drug must be in writing, except in an emergency. S.D. Codified Laws § 22-42-2.1 (2009); S.D. Codified Laws § 22-42-2.2 (2009).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Tennessee	Pharmacy	TN Pharmacy law permits e-prescribing. Tenn. Code Ann. § 63-10-213(a) (2008); Tenn. Code Ann. § 63-10-204(38) (2008); Tenn. Comp. R. & Regs. 1140-304(2) (2008); Tenn. Comp. R. & Regs. 1140-101(11) (2008).	_	The requirement that a hard copy or exact image of the transmitted order be maintained in the pharmacy may burden e-prescribing. Tenn. Comp. R. & Regs. 1140-304(2)(b) (2008).
Tennessee	Food & Drug		Schedule II controlled substances require a written prescription except in emergencies, when an oral prescription is acceptable if promptly reduced to writing and filed by the pharmacy.  Tenn. Code Ann. § 53-11-308 (2008).	
Texas	Pharmacy	Pharmacy regulations contain detailed provisions for e-prescriptions, including standard content requirements. In addition, provisions require a statement which indicates that the prescription has been electronically transmitted (e.g., faxed to or electronically transmitted to) and the full name of the designated agent if agent was used to transmit the prescription.  22 Tex. Admin. Code § 291.34(b)(4), (b)(6)(B) (2008).	TX Pharmacy law permits e-prescription drug orders except for Schedule II controlled substances. 22 Tex. Admin. Code § 291.34 (b)(4)(C) (2008).	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Texas	Medical Doctors	Medical Doctors are held to same standards in issuing prescriptions electronically as they are in traditional face-to-face settings.  22 Tex. Admin. Code § 174.4(b) (2008).	_	_
Texas	Medicaid			To the extent allowed by federal law, TX law permits the state Health and Human Resources Commission to adopt rules permitting e-prescribing within the state's Medicaid program. At present, however, the TX Administrative Code does not appear to include such rules. Tex. Hum. Res. Code Ann. § 32.102(a) (2007).
Texas	Food & Drug	_	Schedule II prescriptions must be on official state prescription form. Other prescriptions may be "electronically communicated," a term which is undefined.  Tex. Health & Safety Code Ann. § 481.074(b), (g), (h), (k) (2007); Tex. Health & Safety Code Ann. § 481.075 (2007); 37 Tex. Admin. Code § 13.73(a) (2008)	_

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Utah	Pharmacy	UT Pharmacy Practice Act allows pharmacists to accept electronically transmitted prescriptions for noncontrolled substances subject to certain standards. Recognizes validity of electronic signatures. Requires inclusion of time and date of the transmission, the name of the pharmacy intended to receive the transmission, and identifying information of transmitting agent if one is used.  Utah Code Ann. § 58-17b-602(1) (2008); Utah Code Ann. § 58-17b-102(29), (30) (60) (2008); Utah Admin. Code r.156-17b-613 (2008).	Prescriptions for controlled substances are governed by the UT Controlled Substances Act. Prescription orders for controlled substances (including prescription transfers) must be handled according to the rules of the Federal Drug Enforcement Administration.  Utah Admin. Code r.156-17b-612(1) (2008); Utah Admin.  Code r.156-17b-613(1) (2008).	
Utah	Controlled Substances	_	utr Controlled Substances law appears to allow e-prescribing for controlled substances to the extent permitted under the federal Controlled Substances Act. The law requires a written prescription if a written prescription is required by the federal law. Otherwise, the law allows a prescription for a controlled substance to be "signed with an electronic signature of the prescriber." Utah Code Ann. § 58-37-6(7) (2008).	Prescription records of controlled substances may be maintained electronically so long as the original of each prescription is maintained in a physical file. Utah Admin. Code r.156-37-602(4) (2008).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Vermont	Pharmacy	VT Pharmacy regulations expressly permit e-prescribing of noncontrolled substances and controlled substances (even Schedule II drugs in limited cases). Requirements for e-prescribing include identifying the transmitter's phone number for verbal confirmation, the time and date of transmission, and the identity of the pharmacy intended to receive the transmission; and no intervening access, among others. 04-030-230 VT. Code R. § 19.3 (2009).	VT Pharmacy regulations expressly permit e-prescribing of controlled substances (even Schedule II drugs in limited cases). 04-030-230 VT. Code R. § 19.3 (2009).	VT Pharmacy regulations require that e-prescriptions, like oral prescriptions, must be "reduced to a form by the pharmacist that may be maintained for the time required."  04-030-230 VT. Code R. § 19.3 (2009).  In addition, the pharmacist responsible for dispensing must provide a signed printout of each day's prescription drug order information and maintain it for 3 years.  04-030-230 VT. Code R. § 20.3.1 (2009).
Vermont	Medicaid	Medicaid payment is limited to drugs prescribed by "written prescription" or oral prescription. "Written prescription" is not defined. 13-170-008 VT. Code R. § M800 (2009).	_	_
Vermont	Food & Drug	_	Food & Drug laws on regulated drugs do not expressly address e-prescribing for controlled substances. Only address written and oral prescriptions.  VT. Stat. Ann. tit.18, § 4215 (2007).	Pharmacist filling a Schedule II prescription must write the date of filling and the pharmacist's own signature on the face of the prescription.  VT. Stat. Ann. tit.18, § 4215 (2007).

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Virginia	Pharmacy	VA Pharmacy regulations permit e-prescribing, consistent with federal law and Pharmacy Board regulations, but only from the prescriber directly to the dispensing pharmacy.  Va. Code Ann. § 54.1-3408.02 (2008); 18 Va. Admin. Code § 110-20-285 (2008); 18 Va. Admin. Code § 110-20-10 (2008).	For electronic transmission of Schedule II-V prescriptions, transmissions must comply with any requirements of federal law. 18 Va. Admin. Code § 110-20-285(A) (2008).	If the pharmacy's automated data processing system fields are "automatically populated by an electronic transmission," the automated record may constitute the prescription and no hard copy is required. But for Schedule II–V controlled substances, storing e-prescription images instead of the hard copy is permissible only if authorized by federal law. 18 Va. Admin. Code § 110-20-250(A) (2008).
Virgin Islands	Pharmacy	VI law defines prescription as being a written or oral order. "Written" is not defined. V.I. Code Ann. tit. 27, § 141 (2008).	_	_
Virgin Islands	Food & Drug	<del></del>	Food & Drug laws do not expressly address e-prescribing. Controlled substance provisions require prescriptions for Schedule II drugs to be in writing. Those for Schedule III—IV may be written or oral. V.I. Code Ann. tit. 19, § 603(a), (b) (2008).	<del></del>

Appendix A — Summaries of State Statutes and Regulations That Impact E-Prescribing

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Washington	Food & Drug	Food, Drug and Cosmetic law permits electronic communication of prescriptions. System used for transmitting eprescriptions must be approved by the state board of pharmacy. Wash. Rev. Code Ann. § 69.41.055 (2008); Wash. Rev. Code Ann. § 69.41.010(10) (2008).	Uniform Controlled Substances Act (within Food & Drug code) expressly permits e-prescribing of controlled substances, limited to Schedule III–V controlled substances. Wash. Rev. Code § 69.50.312 (2008); Wash. Rev. Code § 69.50.101(cc) (2008).	
Washington	Department of Health	The Health Department's regulations on "electronic transmission of prescription information" expressly permit e-prescribing for legend drugs and controlled substance drugs, with the exception of Schedule II drugs. Electronic transmission must comply with state and federal law.  Wash. Admin. Code § 246-870-030 (2008); Wash. Admin. Code § 246-870-60 (2008); Wash. Admin. Code § 246-870-60 (2008); Wash. Admin. Code § 246-870-090 (2008); Wash. Admin. Code § 246-870-020(1) (2008).	The Health Department's regulations on "electronic transmission of prescription information" expressly permit e-prescribing for controlled substance drugs, with the exception of Schedule II drugs. Electronic transmission must comply with state and federal law.  Wash. Admin. Code § 246-870-040 (2008).	

(continued)

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Vest Virginia	Pharmacy	Code governing pharmacists expressly permits e-prescribing of noncontrolled substances. All e-prescriptions must be transmitted consistently with requirements of HIPAA, Medicare, Controlled Substances Act, and other federal laws.  W. Va. Code Ann. § 30-5-12c (2008); W. Va. Code Ann. § 30-5-1b(2), (15), (16) (2008); W. Va. Code R. § 15-1-21 (2008).	<ul> <li>WV has two pharmacy regulations relating to prescriptions for controlled substances. One regulation relates to the practice of pharmacy generally (W. Va. Code R. § 15-1-21) and the other regulation implements the Uniform Controlled Substances Act (W. Va. Code R. § 15-2-7). The two regulations accord with each other in many respects, but differ in some others:</li> <li>Section 15-2-7 (7.5.1, 7.6.3) particularly specifies that a manual signature is required on a controlled substance prescription unless an exception applies.</li> <li>With respect to Schedule III–V controlled substances, Section 15-2-7 (7.14.1) permits only written prescriptions signed by a prescribing practitioner or oral prescriptions. It does not expressly permit e-prescriptions, whereas § 15-1-21 (21.1.1 and 21.1.2) permits e-prescriptions for these classes of controlled substances if the pharmacist immediately reduces the prescription to a form that "may be maintained for the time period required by law."</li> </ul>	
			<ul> <li>Section 15-2-7 (7.2.1(f)) incorporates the definition of "controlled substances" found in W. Va. Code § 60A-1-101, which does not explicitly encompass "controlled substances" under the Federal Controlled Substances Act. The definition of "controlled substances" in § 15-1-2 (2.1.7) includes items deemed to be controlled substances under either the Federal Controlled Substances Act or state law.</li> </ul>	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Wisconsin	Pharmacy	Pharmacy law recognizes e-prescribing, but only if the patient approves the transmission and the prescription order is transmitted to a pharmacy designated by the patient.  Wis. Stat. Ann. § 450.11(1m), (7)(i) (2008).  E-prescriptions must identify the individual sender's name and telephone number for oral confirmation; the time and date of transmission; the pharmacy intended to receive the transmission; and be designated as an "electronically transmitted prescription," or similar words or abbreviations to that effect.  Wis. Admin. Code [Phar] § 7.08 (2008).	Regulations generally prohibit e-prescribing of Schedule II controlled substances, except in emergency situations, when the e-prescription must be followed with written prescription. Schedule III–V prescriptions may be renewed electronically. Wis. Admin. Code [Phar] § 7.08(1) (2008); Wis. Admin. Code [Phar] § 8.06(2)(a) (2008); Wis. Admin. Code [Phar] § 8.09 (2008).	Regulations require use of passwords to access the electronic mail system for the receipt of prescription orders. Wis. Admin. Code [Phar] § 7.08 (2008).
Wisconsin	Controlled Substances		Schedule II drugs generally may be dispensed only with a written prescription, except in emergency circumstances, in which case e-prescription must be reduced to writing. Schedule III or IV drugs may be dispensed with written, oral, or e-prescription. Wis. Stat. Ann. § 961.38 (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Wyoming	Pharmacy	Pharmacy regulations expressly allow e-prescribing for noncontrolled drugs. 024-059-002 Wyo. Code R. § 19(c) (2009); 024-059-002 Wyo. Code R. § 29 (2009); 024-059-002 Wyo. Code R. § 4(m) (2009).	Pharmacy regulations permit controlled substance prescriptions to be transmitted electronically only to the extent allowed by federal and Wyoming law. Expressly provide that controlled substance prescriptions may not be communicated by electronic transmission except by fax. 024-059-002 Wyo. Code R. § 19(c) (2008); 024-059-002 Wyo. Code R. § 29(f) (2008); 024-059-002 Wyo. Code R. § 20(c) (2008).	
Wyoming	Medicaid	Medicaid regulations address written, oral, and faxed (but not e-prescriptions). They require that all prescriptions be "reduced to writing" and that certification for "medically necessary" prescriptions be in the prescribing practitioner's own handwriting.  048-130-010 Wyo. Code R. § 6(b)(ii) (2009).	_	
Wyoming	Food & Drug/ Controlled Substances	_	Controlled Substances law expressly requires the "written prescription of a practitioner" for Schedule II drugs except in emergencies. For Schedule III or IV drugs, a written or oral prescription is required. Wyo. Stat. Ann. § 35-7-1030 (2008).	

Table A-1. Summaries of State Statutes and Regulations That Impact E-Prescribing\* (continued)

State	Statutory or Regulatory Code	Noncontrolled Drugs Prescriptions	Controlled Drugs Prescriptions	Other (e.g., record-keeping requirements)
Wyoming	Department of Administration and Information/ Commissioner of Drugs and Substances Control		Provisions of WY regulations appear to conflict regarding controlled substances. According to one provision, controlled substance prescriptions must be manually signed; electronic or digital signatures are prohibited. Schedule III–V controlled substance prescriptions may be faxed.  024-060-006 Wyo. Code R. § 4 (2009).  However, according to another provision of the same regulation, a pharmacist may dispense a controlled substance listed in Schedules III or IV, pursuant to an electronically transmitted prescription, as well as a faxed prescription. In certain limited circumstances, Schedule II prescriptions may be faxed as well.  024-060-006 Wyo. Code R. § 21(a) (2009).  Possibly, § 4 of the regulation sets standards only for hard copy prescriptions, but the provision is unclear.	

<sup>\*</sup> This table does not include summaries of the statutory/regulatory requirements for prescribing a brand name drug (e.g., a handwritten "dispense as written" or "brand necessary" notation on the prescription); those requirements are addressed in other tables included in this report.