



## Maryland Prescription Drug Monitoring Program (PDMP) Prescriber Self Data Request

### Background

The Maryland Prescription Drug Monitoring Program (PDMP) was created by law (Health-General Article, Section 21-2A) to assist healthcare providers and public health and safety authorities with reducing the misuse, abuse and diversion of prescription drugs. The PDMP collects information on prescription drugs that contain controlled dangerous substances and are dispensed to patients in the State. Dispensers, including pharmacies and healthcare practitioners, are required to electronically report data about the drug, patient, prescriber and dispenser within 3 business days of dispensing. This data is securely stored and made available, by request, only to persons and entities specifically authorized by law to access PDMP data. The PDMP is administered by the Department of Health and Mental Hygiene (DHMH), Behavioral Health Administration (BHA). For more information on the PDMP, visit the DHMH/BHA website: <http://bha.dhmh.maryland.gov/pdmp>

Code of Maryland Regulations (COMAR) 10.47.07.05B(2) allows a prescriber to request of the Program a report containing PDMP records attributed to the prescriber. A prescriber is defined as a licensed health care professional authorized by law to prescribe CDS. In Maryland, this includes physicians, dentists, podiatrists, nurse practitioners, and physician assistants.

To receive such a PDMP data report, BHA requires that a prescriber complete and submit the Maryland PDMP Patient Data Request Form, including all DEA numbers under which you would like the search conducted. Also, please provide a copy of your current Maryland health profession license and CDS permit. An individual prescriber can only request his or her own data report.

### Instructions

If you are a prescriber requesting your own data, complete all applicable fields and sign the attached form. Once complete, you must have the request authenticated and delivered to BHA using one of the following methods:

1. Have the form notarized by a commissioned notary public and mail the form, including copies of your current Maryland health professions license and CDS permit, to:

**Behavioral Health Administration / Voc. Rehab Bldg.  
Prescription Drug Monitoring Program, c/o Tryphena Barnes  
55 Wade Avenue  
Catonsville, Maryland 21228**

2. Appear in person at BHA with a completed form, a valid State or federal government-issued photo identification card and copies of your current Maryland health professions license and CDS permit. **To ensure that PDMP staff are available to process your request, please call 410-402-8686 or email [dhmh.pdmp@maryland.gov](mailto:dhmh.pdmp@maryland.gov) to schedule an appointment.**

***Important Information about PDMP Data Reports:***

- **Drugs Included:** The PDMP only collects information on prescription drugs that contain Schedules II-V controlled dangerous substances as defined in Criminal Law Article, Title 5, Subtitle 4, Annotated Code of Maryland. Prescriptions dispensed from an opioid treatment program (e.g. “methadone clinic”) will not be included. The following are also exempt from reporting to the PDMP and therefore will not be included in the data report: direct administrations, drug samples, prescriptions dispensed from pharmacies exclusively serving hospital inpatients, pharmacies who have attested that they have waiver status from the Board of Pharmacy for serving exclusively assisted living, comprehensive care, and developmental disabilities facilities, prescriptions dispensed in a veterinarian clinic.
- **Dispensing Location:** Only drugs dispensed in or into Maryland are required to be reported to the PDMP. The report will not include drugs dispensed in other states, regardless of the location of the prescriber.
- **Selection of Prescription Records:** Only prescription records that include an exact match on the prescriber’s first name, last name, and DEA number will be included in the data report.
- **Data Accuracy & Comprehensiveness:** Although efforts are made to ensure accuracy, PDMP data may contain errors or omissions. PDMP data are not the official record of dispensing; only the original prescription can serve as the official record. Also, the dispenser reporting requirement went into effect on August 20, 2013. Data may not be available for prescriptions dispensed prior to that date.
- **Data Confidentiality:** Prescription monitoring data are confidential and privileged, and not subject to discovery, subpoena, or other means of legal compulsion in civil litigation, and are not public records.

# Maryland Prescription Drug Monitoring Program (PDMP) Prescriber Self Data Request Form

*(Request is not considered completed unless Maryland License and CDS Permit are attached with this form)*

Last Name		First Name		Suffix
Date of Birth (MM/DD/YYYY)	Sex	Phone Number	Email Address	
DEA Number(s) to search:				

**Practicing Address 1**

Address					
City		State		Zip Code	

**Practicing Address 2 (if applicable – if you have more than 2 practice addresses, please attach a separate sheet)**

Address					
City		State		Zip Code	

Dispense Start Date (MM/DD/YYYY, or 'start of PDMP records')		Dispense End Date (MM/DD/YYYY)	
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\_\_\_\_\_  
**Signature of Requesting Prescriber**

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**Date**

<p><b>STATE OF MARYLAND, COUNTY/CITY OF _____:</b></p> <p>I hereby certify that on this _____ day of _____, year _____, before me, a Notary Public of the State of Maryland and County/City aforesaid, personally appeared _____ and made an oath in due form that the information contained in the foregoing "Maryland PDMP Prescriber Self Data Request Form" is true and correct.</p> <p style="text-align: center;">_____ Notary Public</p> <p>My commission expires: _____</p>	
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