



## CURES Frequently Asked Questions

As you know CURES (Controlled Substance Utilization Review and Evaluation System) is a component of the California Prescription Drug Monitoring Program. Already in effect is the requirement that any provider possessing a DEA registration certificate must also register with CURES. To help you stay current with the CURES requirements, below are some frequently asked questions that have been published by the Medical Board of California:

### **Controlled Substance Utilization Review and Evaluation System (CURES) Mandatory Consultation - Frequently Asked Questions**

**1. What does 'mandatory use of' or 'consultation of' CURES mean?**

This requirement means that unless an exemption exists in law, a physician must query the CURES database and run a Patient Activity Report (PAR) on each patient the first time a patient is prescribed, ordered, or administered a Schedule II-IV controlled substance. The PAR must be run within twenty-four hours, or the previous business day, before prescribing, ordering, or administering the controlled substance. In addition, a physician must also query the database at least once every four months if the controlled substance remains a part of the patient's treatment plan.

**2. What does 'first time' mean?**

'First time' is defined as the initial occurrence in which a health care practitioner intends to prescribe, order, administer, or furnish a Schedule II-IV controlled substance to a patient and has not previously prescribed a controlled substance to the patient.

**3. What actions constitute successfully meeting the requirement to "consult CURES?" For example, can a staff member or other proxy consult CURES on behalf of the physician?**

Consulting CURES means the physician prescribing, ordering, administering, or furnishing the Schedule II-IV controlled substance has received a Patient Activity Report (PAR) and has reviewed the information on the document. While a physician can have a registered delegate request the CURES report, the report will go into the physician's dashboard on CURES so the physician can review the PAR prior to prescribing, ordering, administering, or furnishing.

**4. How do I document that I checked CURES prior to prescribing, is a note in the chart sufficient or do I print the CURES report and put it in the patient's file?**

If a physician consults CURES, it is not required to note it in the patient's file; however, the Board recommends the physician do so. It is up to the physician to determine how to document that he or she consulted CURES, e.g., document it in the chart or print the report and place it in the patient's file.

The Medical Board receives information about physician CURES non-compliance. Failing to consult CURES is a violation of the law and could result in the issuance of a citation & fine, or could be a cause of action in an accusation leading to disciplinary action. Disciplinary action could be a public reprimand, suspension, probation, or revocation. Each violation of the law is reviewed on a case-by-case basis.

**5. Can a medical assistant or nurse be a delegate as listed in the CURES Program?**

The law requires the prescribing physician consult the CURES database. Consistent with DOJ procedures pursuant to Business and Professions Code section 209, a physician may authorize a delegate to order reports from CURES.

However, it is important to note that the delegate can only request the Patient Activity Report (PAR). The report will be sent to the physician's dashboard and only the physician can go in and review the PAR. Please remember that a physician may not provide his/her CURES password to anyone.

**6. If I am covering for one of the other physician's in my practice and a patient requests a refill, and I fill it, do I need to consult CURES? What if the other physician consulted CURES recently?**

Yes, you must consult CURES unless one of the exemptions apply. Even if the other physician recently consulted CURES, if this is the first time you prescribed to the patient or is over four months from the last time you consulted CURES for this patient for this controlled substance, you must consult CURES.

**7. If a patient is given a non-refillable 5-day prescription for a Schedule II-IV controlled substance from the surgical unit as part of a surgical procedure, the physician does not have to consult CURES as this is an exception. However, if the patient is seen in follow-up one week later and needs an additional refill of medication for pain control, does the physician have to consult CURES?**

Yes, the physician must consult CURES. The law states that a physician, who previously had an exemption, must consult the CURES database prior to subsequently prescribing a Schedule II-IV controlled substance to the patient and at least once every four months thereafter if the substance remains part of the treatment of the patient. For non-surgical patients at discharge, if you have not previously consulted CURES, you would be required to consult CURES at discharge no matter the number of days supplied.

**8. What actions should be taken if the physician recognizes excessive prescribing or that the patient may be abusing controlled substances?**

The physician needs to follow the standard of care when reviewing the patient's controlled substance history. It is important that the patient receive appropriate care, which could include substance abuse treatment, discussion regarding pain management, titration of controlled substances, etc. In addition, if a physician believes another physician is excessively prescribing controlled substances to a patient, the Board recommends that you report that physician to the Board for appropriate action.

**9. If a physician is titrating up a medication, for example starts with Oxycontin 5mg and then titrates up to 10mg, is this considered a 'new prescription' and is CURES consultation required with each titration?**

No, this is not a new 'controlled substance' as it is still the same drug, just a different dosage and therefore another check is not required for four months if that controlled substance remains a part of the patient's treatment.

**10. I write less than ten Schedule II-IV controlled substances a year. Do I have to do anything with the CURES Program?**

While you may not prescribe that often, the law requires that if you have a DEA registration that authorizes you to prescribe Schedules II - IV controlled substances, you must be registered in CURES.

Please visit the CURES website for additional information:

[http://www.mbc.ca.gov/Licensees/Prescribing/CURES/Mandatory\\_Use.aspx](http://www.mbc.ca.gov/Licensees/Prescribing/CURES/Mandatory_Use.aspx).

<https://cures.doj.ca.gov/registration/confirmEmailPnDRegistration.xhtml>.

<http://www.mbc.ca.gov/Licensees/Prescribing/CURES/>.