

# DRUG CONTROL PRESCRIPTION MONITORING PROGRAM TIMELINE

2006

## PMP Implemented

Legislators enacted [CT General Statutes Sec. 21a-254](#) mandating a prescription drug monitoring program for schedule II-V controlled substances. Healthcare providers, pharmacists, & law enforcement will be granted access to the system.

2008

## CPMRS Goes Live

PMP becomes fully operational in February. CT Prescription Monitoring & Reporting System (CPMRS) goes live on July 1, 2008 with funding through the U.S. Department of Justice (DOJ) and the U.S. Department of Health & Human Services (HHS).

2013

## Mandatory Registration & Reporting for Prescribers

June 21, 2013 - [Public Act 13-172](#)

- All practitioners with an active CSP must register with the CPMRS
- Any prescriber who dispenses controlled substances must upload dispensation data daily

2017

## Opioid Education; Opioid Prescribing Limitations; & Electronic Prescribing

July 1, 2017 - [Public Act 17-131](#)

- Limits opioid prescribing for minors to a 5-day supply of medications.
- Requires education for patients that are prescribed an opioid drug regarding the risks associated with it
- Requires electronic prescribing of controlled substances

2016

## Mandatory Daily Reporting for Dispensers; CPMRS Usage; Opioid Prescribing Limits; & Prescriber Delegates allowed in CPMRS

July 1, 2016 - [Public Act 16-43](#)

- All prescriptions must be reported daily by every pharmacy, nonresident pharmacy, outpatient pharmacy in a hospital or institution, and dispenser (except veterinarians)
- When practitioner prescribing more than 72 hr. supply of any schedule V controlled substance for continuous treatment, the practitioner must review CPMRS patient record once annually
- Initial prescription for an opioid drug to an adult for outpatient use is limited to a 7-day supply
- Opioid prescriptions for minors must not exceed 7-day supply
- Allows practitioners to have delegates perform searches on their behalf

2015

## Mandatory CPMRS Usage

October 1, 2015 - [Public Act 15-198](#)

- Before a practitioner prescribes more than a 72-hr. supply of a schedule II - V controlled substance, the practitioner or practitioner's authorized agent must review the patient's record in the CPMRS.
- When a practitioner prescribes a controlled substance for continuous treatment of any patient then the practitioner or practitioner's agent must review the CPMRS record at least every 90 days
- If CPMRS is not operational, then the practitioner may prescribe more than a 72-hr. supply of a controlled substance as long as the practitioner or authorized agent reviews the record no more than 24 hrs. after regaining access

2019

## Pharmacist delegates allowed in CPMRS

October 1, 2019 - [Public Act No. 19-191](#)  
Pharmacist's authorized pharmacy technician may register for a CPMRS user account.

2021

## Mandatory Reporting for some non-controlled substances except for veterinarians

January 1, 2021 - [Public Act No. 20-4](#)

- Dispensation information for insulin drugs, glucagon drugs, diabetes devices, diabetic ketoacidosis devices, gabapentin, and naloxone are required to be uploaded into the CPMRS.

June 28, 2021 - [Public Act 21-182](#)

- Veterinarians exempt from reporting insulin drugs, glucagon drugs, diabetes devices, and diabetic ketoacidosis devices for animal patients

2022

## Mandatory Reporting for Substance Use Disorder Clinics; & Transportation of controlled substances to patient

July 1, 2022 - [Public Act 21-192](#) & [Public Act 22-108](#)

- Certified substance use disorder clinics are mandated to report dispensations for Schedule II - V drugs to the PMP
- Those with a CSP may transport schedule II - V drugs from the location to where they're registered to treat a patient

2023

## Mandatory Pharmacy Signage

January 1, 2023 - [Public Act 22-81](#)  
Pharmacies are must post a sign notifying consumer about safe storage & disposal of prescription drugs

