- 1. What does KASPER stand for?
- 2. How do dispensers report to KASPER?
- 3. Who may request a KASPER report?
- 4. What does a KASPER report show?
- 5. Will a KASPER report show out of state prescriptions?
- 6. What can I do with the report once I get it?
- 7. When are KASPER reports available?
- 8. I have a patient that had a prescription last week, why is that not on the report?
- 9. Why are the controlled substance prescriptions I am writing for this individual not showing up on the KASPER report?
- 10. As a health care provider, what do I do if I suspect diversion?
- 11. How is this information safeguarded?
- 12. Where can I obtain intervention information?
- 13. Who benefits the most from using the KASPER system?

1. What does KASPER stand for?

Kentucky All Schedule Prescription Electronic Reporting.

2. How do dispensers report to KASPER?

Pharmacies and other dispensers that dispense controlled substances in Kentucky are required to report to KASPER within every seven days as provided for under KRS 218A.202 and 902 KAR 55:110. RelayHealth currently serves as the data collection agent for the Cabinet for Health and Family Services. Please contact RelayHealth for information and guidance on reporting dispensed controlled substance information to KASPER. RelayHealth can be reached by phone at 800-892-0333 and by email at kypmp@RelayHealth.com; or visit the RelayHealth Web site at: http://pmp.relayhealth.com/KY/.

3. Who may request a KASPER report?

A prescriber for medical treatment of existing or prospective patients, a pharmacist for pharmaceutical treatment, a law enforcement officer with an active investigation, a licensure board for a licensee, Medicaid for a Medicaid member, a grand jury by subpoena, and a judge, probation or parole officer administering a drug diversion or probation program.

4. What does a KASPER report show?

The report will show information for all the scheduled prescriptions a patient has had for the specified time period, as well as the prescriber who prescribed them and dispenser who dispensed them.

5. Will a KASPER report show out of state prescriptions?

Only pharmacies licensed by the Kentucky Board of Pharmacy are required to report any controlled substance prescriptions dispensed to the KASPER program. The Kentucky Board of Pharmacy licenses mail order pharmacies so we do have their data available.

6. What can I do with the report once I get it?

- KRS 218A.202 specifies allowable disclosures of information contained in KASPER and
 the penalties for inappropriate disclosure. The Kentucky Board of Medical Licensure
 has published a legal opinion entitled Standards of Acceptable Medical Practice
 Relating to a Physician's use of KASPER Reports. This legal opinion is available on the
 KBML Web site at: www.kbml.ky.gov. Please refer to this legal opinion or your specific
 licensure board for guidance regarding proper use and controls on KASPER reports.
- In general, providers may discuss KASPER and the information contained in the report
 with the patient or another health care provider, but should not show or give a copy of
 the actual report to anyone else including the patient.
- A law enforcement officer may share the information contained in the report and/or the report with other law enforcement officers as long as they are both involved in a bona

fide drug related investigation pertaining to the subject of the report. If a law enforcement office chooses to share KASPER data and/or a report, the law enforcement officers are required to record in writing each person to whom the data/report has been given or received as well as the date the data/report was given or received. Each party must maintain a log of the transaction.

 Any other authorized KASPER user may not provide or share a report with anyone unless specifically allowed in KRS 218A.202. Knowing disclosure of KASPER data to a person not authorized to receive the data under KRS 218A.202 is a class D felony.

7. When are KASPER reports available?

Reports are available 24 hours a day, 7 days a week, and are typically available within 15-20 seconds unless review by a staff pharmacist is required, in which case the report will be available by the next business day.

8. I have a patient that had a prescription last week, why is that not on the report? Under Kentucky Statutes, dispensers have 7 days from the date a controlled substance is dispensed to report the information to KASPER. Some dispensers report more frequently, but most prescriptions should be reflected in a KASPER report within 8 days after dispensing. If you are aware of a controlled substance prescription that has not been reflected in KASPER within 8 days, please contact the Drug Enforcement and Professional Practices Branch at (502) 564-7985 so they can determine the reason.

9. Why are the controlled substance prescriptions I am writing for this individual not showing up on the KASPER report?

Prescription data may not show up in a KASPER report if the patient can not be identified because of erroneous information given to the dispenser, the dispenser is not reporting to the KASPER system, the patient is going across state lines to fill the prescriptions, or the requested data range is not currently available. If you become aware of any dispenser not submitting data, or submitting inaccurate data, to the KASPER system, please contact the Drug Enforcement and Professional Practices Branch at (502) 564-7985.

10. As a health care provider, what do I do if I suspect diversion?

If you suspect an individual is involved in diverting controlled pharmaceutical substances, we ask that you please report them to the proper law enforcement authorities. If you are unsure of who that may be, please contact the Drug Enforcement and Professional Practices Branch at (502) 564-7985.

11. How is this information safeguarded?

The enhanced system requires an extensive registration process, the data provided by the enrolling entity is verified by independent source systems, and the KASPER system includes financial institution level security features and is compliant with HIPAA and KRS 218A.202. Any violation or breach of access or usage guidelines will result in the Office of the Inspector General initiating an internal review to verify the breach or misuse, and refer the information to the Kentucky State Police for appropriate action.

12. Where can I obtain intervention information?

Following are resources for information and support with intervention for a patient who may be misusing or abusing prescription drugs.

- Substance Abuse Hotline: (888) 729-8028
- Kentucky Substance Abuse Treatment Information: http://mhmr.ky.gov/ProviderDirectory
- American Society of Addiction Medicine: www.asam.org
- Institute for Research, Education and Training in Addictions: www.ireta.org
- Center for Substance Abuse Treatment: www.csat.samhsa.gov

13. Who benefits the most from using the KASPER system?

The primary beneficiaries of KASPER are patients throughout Kentucky. Because of KASPER, health care providers can make better and more informed treatment decisions that allow them to provide the most appropriate medical care for their patients. However ultimately all the citizens of the Commonwealth benefit through the ability to provide improved medical care and to reduce the abuse and diversion of controlled substance prescription drugs, safeguarding our health care dollars and making the Commonwealth a safer place to live.

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