

**To:** System of Care Providers

**Date:** June 6, 2018

**From:** Steve Jones, LCSW, QM Program Manager

**Re:** Senate Bill 482, Controlled Substances- CURES 2.0 Database

**Effective:** July 1, 2018

Dear Providers,

This memo is to inform providers about Controlled Substance Utilization Review and Evaluation System (CURES 2.0) database consultation mandate. The Department of Justice (DOJ) maintains the CURES 2.0 database in order to electronically monitor Schedule II, III, and IV controlled substance prescriptions dispensed in California. As of April 2, 2018, the CURES 2.0 database was ready for statewide use and the CURES 2.0 consultation mandate becomes effective as of October 2, 2018.

It is a requirement for all California licensed health practitioners authorized to prescribe, order, administer, or furnish a controlled substance. The County of San Diego will begin implementation of this mandate as of **July 1, 2018**.

**A. MANDATORY CURES 2.0 CONSULTATION REQUIREMENTS**

Pursuant to Health and Safety Code section 11165.4(a), the mandatory consultation requirement indicates that health care practitioners review the CURES 2.0 database to evaluate a patient's controlled substance history under both of the following situations:

- a. Prior to prescribing a Schedule II, III, and IV controlled substance for the first time.
- b. At least once every 4 months thereafter if substance remains a part of treatment.

This requirement applies to any health care practitioner with both of the following:

- a. Drug Enforcement Administration (DEA) Controlled Substance Registration Certificate
- b. California licensure as one of the following:
  - (i) Dentist
  - (ii) Medical Physician
  - (iii) Naturopathic Physician
  - (iv) Optometrist
  - (v) Osteopathic Physician
  - (vi) Physician Assistant
  - (vii) Podiatrist
  - (viii) Registered Certified Nurse Midwife
  - (ix) Registered Nurse Practitioner (Furnishing)

While pharmacists have access to the CURES 2.0 database, the mandatory consultation requirement **does not apply** to these particular health care practitioners.

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## QUALITY MANAGEMENT MEMO

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### B. DOCUMENTATION REQUIREMENTS

All BHS providers with health practitioners authorized to prescribe, order, administer, or furnish Schedule II, III, and IV controlled substances shall ensure compliance with and documentation of the CURES 2.0 consultation requirements.

#### **MEDICATION MONITORING**

The County BHS Medication Monitoring tool has been updated to reflect the CURES 2.0 consultation mandate. Health care practitioners participating in the Medication Monitoring Committee shall attest to their peer's review of the CURES 2.0 database by marking either Affirmative or Negative for the corresponding question on the Medication Monitoring tool based on the review of the chart documentation.

#### **MEDICATION PROGRESS NOTES**

Medication progress note documentation shall attest to the prescribing health care practitioner's review the CURES 2.0 database, when applicable, within the required timelines. Medication progress note templates include the prompt "*Review of CURES Database.*" After this prompt practitioners shall document their review of patient's CURES history in order to demonstrate compliance.

#### **PATIENT MEDICATION AGREEMENT – ADULT/OLDER ADULT SYSTEM ONLY**

This form is required, in addition to the Informed Consent for Psychotropic Medications form, for all A/OA clients receiving Schedule II, III, IV controlled substances. It shall be reviewed with the client upon initial prescription. The form shall be signed and dated by client and staff completing form. Agreement is to be retained in the client's file.

Patient Medication Agreement is **not** applicable to CYF clients. Instead CYF providers shall review the Informed Consent for Psychotropic Medications form with client and/or parent/legal guardian.

#### **QI MONITORING**

At the time of the Medical Record Review, the QM Specialist will review health care practitioner's medication progress note documentation, Informed Consent for Psychotropic Medication form, A/OA Patient Medication Agreement, and medication monitoring practices.

While the statewide CURES 2.0 consultation requirement is effective as of October 2, 2018, County of San Diego Behavioral Health Service providers are required to integrate this mandate into their current prescriptive regimen as of FY 18-19 beginning **July 1, 2018**.

As questions arise, QM encourages programs to contact [QIMatters.hhsa@sdcounty.ca.gov](mailto:QIMatters.hhsa@sdcounty.ca.gov) for technical assistance.