## TERMS AND CONDITIONS FOR PRESCRIBER AND DISPENSER USE OF THE MASSACHUSETTS PRESCRIPTION AWARENESS TOOL (MassPAT)

By logging in to and using the Massachusetts Online Prescription Awareness Tool ("MassPAT"), you agree to abide by the requirements governing the Prescription Monitoring Program at M.G.L. c. 94C, 105 CMR 700.012 and any other applicable requirements, including, but not necessarily limited to:

- You attest that you are a duly licensed practitioner, pharmacist or other licensed health care
  professional authorized to prescribe or dispense controlled substances in the Commonwealth of
  Massachusetts.
- You further attest that you are duly registered with the Massachusetts Department of Public Health, Office of Prescription Monitoring and Drug Control, to prescribe controlled substances in at least one of the Schedules II through V or duly registered with the Board of Registration in Pharmacy to dispense controlled substances in at least one of the Schedules II through V. You also agree to promptly notify the Department of any change or proposed change in licensure or registration status.
- You further attest that you are duly enrolled to use the MassPAT and that you have not provided nor will provide your login credentials (i.e., username, password, Personal Identification Number or any other security information) to anyone else. You are responsible for promptly notifying the Office of Prescription Monitoring and Drug Control of any compromise of your login credentials or changes to your enrollment information (e.g., changes to name, business or email address, license or registration number).
- 4) You attest that your use of the MassPAT is for evaluating the prescribing and/or dispensing (including administering) of a controlled substance in Schedules II through V or an additional drug determined by the Department to carry a bona fide potential for abuse to a patient or research subject for whom you have previously prescribed or dispensed a controlled substance in one of the Schedules II through V or an additional drug determined by the Department to carry a bona fide potential for abuse or for whom you are evaluating the prescribing or dispensing of such a controlled substance. You may not use the MassPAT for general screening of patients unless they fit the above criteria.
- 5) You attest that use of the MassPAT is for the purpose of preventing the prescribing and/or dispensing of controlled substances to the same individual from multiple sources or the unlawful diversion of controlled substances. You may not request the prescription history for anyone other than your patient or for a patient encounter.
- 6) You acknowledge that the Department of Public Health does not guarantee the accuracy or completeness of the information contained in the database. You also understand that there may be multiple persons with the same name in the database, so you should use other information, such as date of birth and address, to distinguish your patient from others with the same name.
- 7) You acknowledge that you may use or disclose information obtained from the MassPAT, including reports generated from the database, only as permitted by applicable state and federal laws governing confidentiality and security of personal/patient information, including, if applicable, the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA).
- You acknowledge that you are aware that you must promptly notify the Department of any potential violation of confidentiality or use of the data in a manner contrary to the regulations or applicable professional standards.
- 9) You understand that usage of MassPAT is recorded and monitored and that your right to use the system may be revoked at any time at the discretion of the Department.
- 10) You further acknowledge that you are aware that your controlled substances registration may be suspended or terminated in accordance with 105 CMR 700.004(L)(1), and that a referral may be made for criminal prosecution or disciplinary action by your licensing board, for the following:
  - a) a request, use or disclosure of data that involves a willful failure to comply with the standards in 105 CMR 700.012 for request, transmission or disclosure of data;
  - b) a failure to reasonably protect data in accordance with the requirements of 105 CMR 700.012 or other applicable state or federal law; or
  - c) an attempt to obtain data through fraud or deceit.
- 11) You acknowledge that this data is being provided for the purpose of safe prescribing and dispensing, including assessing or preventing the possibility of drug abuse or diversion, but does not require you to take action that you believe to be contrary to the best interests of your patient.

12)	You acknowledge that the Department may revise these Terms and Conditions from time to time. You will be notified of any change and your continued use of the MassPAT after such notice shall constitute your acceptance of the new Terms and Conditions.