

PRACTITIONERS WHO WRITE 25 OR LESS PRESCRIPTIONS PER YEAR

For those practitioners who write 25 or less prescriptions a year, you may submit a certificate to receive a waiver.

To do so, a practitioner can either:

- Submit a certification online at <https://commerce.health.state.ny.us> or *
- Complete the attached certification form **DOH-5221** and email or fax to the Bureau of Narcotic Enforcement (instructions are located at the bottom of the form). **

**See NYSDOH Electronic Prescribing Frequently Asked Questions for instructions (next page).*

***See DOH-5221 Certification Form (last page).*

Q149: When is a practitioner required to notify the Bureau of Narcotic Enforcement that an ONYSRx or oral prescription was issued to prevent patient harm because it was impractical to issue the prescription electronically in a timely manner?

A149: A practitioner who issues a prescription that could cause patient harm because it was impractical to issue the prescription electronically in a timely manner, shall file information about the issuance of such prescription with the department within 48 hours of the date of issue.

Certifications

Q150: How does a practitioner certify that he or she will not issue more than 25 prescriptions during a twelve-month period?

A150: A practitioner can either submit a certification online through the Electronic Prescribing Waiver (EPW) application on the NYS Health Commerce System or by submitting Certification form, DOH-5221, to the Bureau of Narcotic Enforcement.

Complete the steps below to submit a certification online in HCS:

1. Log into the HCS at <https://commerce.health.state.ny.us>
2. Under "My Content" click on "All Applications"
3. Click on "E"
4. Scroll down to Electronic Prescribing Waivers and double click to open the application. You may also click on the "+" sign to add this application under "My Applications" on the left side of the Home screen.
5. Select the practitioner name from the list. If the name appears more than once, select the option that starts with the profession (i.e., Medicine-##### Doe John).
6. Provide contact information for the person who should be contacted regarding the Certification.
7. Click on "Submit Certification"
8. Enter in the "Begin Date" of the twelve-month certification period.
9. Enter in the Mailing Address of the practitioner submitting the certification.
10. Click "Submit"
11. Click "Certify"
12. You will be returned to the "Waiver Requests and Certifications Summary" screen. The certification period will be displayed.

Q151: Can a practitioner submit a certification with an effective date prior to the date of submission?

A151: During the first year of the certification process, certifications postmarked or submitted to the Department by July 1, 2016, may specify a begin date as early as March 27, 2016. Certifications submitted to the Department after July 1, 2016, cannot be backdated.

Q152: Can a practitioner submit a certification with a future effective date?

A152: Yes, up to 3 months in the future.

Q153: Does the 25 count script limit include all prescriptions?

A153: Prescriptions in both oral and written form for both controlled and non-controlled substances must be included in determining whether the practitioner will reach the limit of twenty-five prescriptions.

Q154: What should a practitioner do if he or she exceeds twenty-five prescriptions within the twelve-month certification period?

A154: The practitioner is required to issue prescriptions electronically or obtain a waiver from the requirement to electronically prescribe. Please see information related to electronic prescribing waivers at www.health.ny.gov/professionals/narcotic/electronic_prescribing/waiver.htm

Q155: Does my certification need to be approved?

A155: There is no review and approval process for certifications.

Q156: Who can submit the certification for a practitioner?

A156: Each individual practitioner must certify independently. A hospital or group practice organization cannot submit a certification on behalf of the practitioner.

Q157: How long is the certification valid?

A157: A certification is valid for one year from the begin date.

Q158: Does a practitioner need to submit a certification each year?

A158: Yes. A practitioner must recertify each year.

Q159: Can a practitioner submit a certification for a period that begins prior to the end date of its current certification period?

A159: No. The certification periods can't overlap. The begin date of a new certification period must be after the end date of the previous certification.

Q160: Does a practitioner who already has an approved waiver from the requirement to electronically prescribe also need to submit a certification?

A160: No. The practitioner is covered by the waiver until March 26, 2017.

Q161: Does a practitioner who issues less than 25 prescriptions per year and already has an approved waiver from the requirement to electronically prescribe also need to submit a certification?

A161: No. The practitioner is covered by the waiver until March 26, 2017.

NEW YORK STATE DEPARTMENT OF HEALTH

Practitioner Certification Form - Electronic Prescribing

Pursuant to §281(7) of the Public Health Law, a practitioner shall not be required to issue prescriptions electronically if he or she certifies to the Department, in a manner specified by the Department, that he or she will not issue more than twenty-five prescriptions during a twelve-month period. Prescriptions in both oral and written form for both controlled substances and non-controlled substances are included in determining whether the practitioner will reach the limit of twenty-five prescriptions. A certification is valid for one year.

Certifications postmarked or submitted to the Department by July 1, 2016, may be specified to begin as of March 27, 2016. Such certifications remain valid through March 26, 2017.

Should the practitioner exceed twenty-five prescriptions within the twelve-month period, he or she is required to issue prescriptions electronically or obtain from the Department a waiver from the requirement to electronically prescribe.

Complete Sections I through III.

I. PRACTITIONER INFORMATION - Please Print Legibly
Practitioner Name: _____ License #: _____ Profession: _____
E-mail: _____ Contact Phone # (_____) _____ - _____
Mailing Address: _____ Street City State Zip
II. PRACTITIONER CERTIFICATION
I certify during the twelve-month period beginning on _____, I will not issue more than MM/DD/YYYY twenty-five prescriptions. I will count prescriptions in both oral and written form for both controlled and non-controlled substances toward my limit of twenty-five prescriptions.
Practitioner Signature _____ Date _____
Print Name _____
<i>False statements made herein are punishable as a class A misdemeanor pursuant to §210.45 of the Penal Law.</i>
III. SUBMIT CERTIFICATION
Please email the completed form to narcotic@health.ny.gov with "Certification" in the subject line. Or, mail to: NYS Bureau of Narcotic Enforcement OPP Registration Unit Riverview Center 150 Broadway Albany, NY 12204 FAX: 518-402-1058