



STATE OF TENNESSEE
DEPARTMENT OF HEALTH

JOHN J. DREYZEHNER, MD, MPH
COMMISSIONER

BILL HASLAM
GOVERNOR

October 31, 2018

Fiscal Review Committee
8th Floor, Rachel Jackson Bldg.
Nashville, TN 37243

Re: Appriss, Inc. Contract

Committee:

The Department of Health requests approval to establish a three (3) year, with two (2) options to renew, sole-source contract with Appriss, Inc. The estimated liability is \$2,524,929.21 for three years and \$3,856,092.75 if all options to renew are executed. The funding will be provided by 99% state and less than 1% federal monies.

Appriss, Inc. is a prescription monitoring program vendor active in 42 states and territories. The Department of Health requests approval of this contract to keep Tennessee as a leader in fighting the substance use epidemic by meeting statutory requirements, advancing functionality to health providers across the state, providing the controlled substance monitoring database (CSMD) users the ability to see other states' data, and by providing administrators the functionality to assist the 50,000 plus users.

A competitive Request for Proposal (RFP) was done in 2010 and Appriss was determined to be the most qualified vendor. Since that time, enhancements have been made to the system to better assist the department in our fight against the opioid epidemic and training has occurred for over 50,000 users of the system, which include physicians, hospital systems, dispensers, etc. Switching vendors would require significant reorientation and training of the 50,000 plus users.

We appreciate your approval to proceed with this contract and thank you for your consideration.

Sincerely,

John J. Dreyzehner, MD, MPH, FACOEM
Commissioner

Supplemental Documentation Required for
Fiscal Review Committee

*Contact Name:	David Bess	*Contact Phone:	615-253-1305		
*Presenter's name(s):	Brandon Silby, David Bess				
Edison Contract Number: <i>(if applicable)</i>		RFS Number: <i>(if applicable)</i>	34310-21119		
*Original or Proposed Contract Begin Date:	1/1/2019	*Current or Proposed End Date:	12/31/2021 12/31/2023 (if all options to renew are executed)		
Current Request Amendment Number: <i>(if applicable)</i>					
Proposed Amendment Effective Date: <i>(if applicable)</i>					
*Department Submitting:	Health				
*Division:	Division of Health Licensure				
*Date Submitted:	10/31/2018				
*Submitted Within Sixty (60) days:	Yes				
<i>If not, explain:</i>					
*Contract Vendor Name:	Appriss, Inc.				
*Current or Proposed Maximum Liability:	\$3,856,092.75				
*Estimated Total Spend for Commodities:	\$3,856,092.75				
*Current or Proposed Contract Allocation by Fiscal Year: (as Shown on Most Current Fully Executed Contract Summary Sheet)					
FY:19	FY:20	FY:21	FY:22	FY: 23	FY: 24
405,177.50	1,045,662.10	716,685.33	714,808.55	593,581.77	380,177.50
*Current Total Expenditures by Fiscal Year of Contract: (attach backup documentation from Edison)					
FY:	FY:	FY:	FY:	FY:	FY:
\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$N/A
IF Contract Allocation has been greater than Contract Expenditures, please give the reasons and explain where surplus funds were spent:		N/A			
IF surplus funds have been carried forward, please give the reasons and provide the authority for the carry forward provision:		N/A			
IF Contract Expenditures exceeded Contract Allocation, please give the reasons and explain how funding was acquired to pay the overage:		N/A			

Supplemental Documentation Required for
Fiscal Review Committee

*Contract Funding Source/Amount:			
State:	99.99168%	Federal:	0.008317%
<i>Interdepartmental:</i>		<i>Other:</i>	
If “ <i>other</i> ” please define:			
If “ <i>interdepartmental</i> ” please define:			
Dates of All Previous Amendments or Revisions: <i>(if applicable)</i>		Brief Description of Actions in Previous Amendments or Revisions: <i>(if applicable)</i>	
Method of Original Award: <i>(if applicable)</i>		Competitive RFP was done in 2010 and Optimum (later purchased by Appriss) was determined to be the most qualified vendor.	
*What were the projected costs of the service for the entire term of the contract prior to contract award? How was this cost determined?		\$2,524,929.21 (3 years) \$3,856,092.75 (5 years) This cost includes maintenance of the applications that support the Controlled Substance Monitoring Database (CSMD) in addition to specific cost for each enhancement Health would like to include to provide better applications to its health care providers and administrative staff that support the 50,000 plus users.	
*List number of other potential vendors who could provide this good or service; efforts to identify other competitive procurement alternatives; and the reason(s) a sole-source contract is in the best interest of the State.		A Request for Information (RFI) was conducted in 2017. There are new vendors showing up in this space but none of them offer the current functionality in the existing CSMD used by the health care providers in TN. Each vendor would have to extensively build their systems just to meet the CSMD’s current/required functionality. Also, switching systems would require reorientation and training of the over 50,000 users, most of which are non-state citizens or organizations. It would be a significant undertaking to require these entities to go through extensive retraining.	



STS Pre-Approval Endorsement Request E-Mail Transmittal

Received by STS on Friday, September 21, 2018.

TO : STS Contracts
Department of Finance & Administration
E-mail : it.abc@tn.gov

FROM : Scott Creel, TDH - ITSD
E-mail : Scott.Creel@tn.gov

DATE : September 21, 2018

RE : Request for STS Pre-Approval Endorsement

Applicable RFS # 34310-21119

State Security Confidential Information Applicability

Under Tenn. Code Ann. §10-7-504(i) vendor identity or a description of the goods or services provided by the vendor shall be confidential.

- Applicable
 Not Applicable

STS Endorsement Signature & Date:

Mark F. Bengel
(WMH)

Digitally signed by Mark F. Bengel (WMH)
DN: cn=Mark F. Bengel (WMH), o=Tennessee Dept. of
Finance and Administration, ou=Strategic Technology
Solutions, email=william.hafley@tn.gov, c=US
Date: 2018.10.09 12:39:00 -05'00'

Chief Information Officer

NOTE: Proposed contract/grant support is applicable to the subject IT service technical merit.

Strategic Technology Solutions (STS) pre-approval endorsement is required pursuant to procurement regulations pertaining to contracts with information technology as a component of the scope of service. This request seeks to ensure that STS is aware of and has an opportunity to review the procurement detailed below and in the attached document(s). This requirement applies to any procurement method regardless of dollar amount.

Please indicate STS endorsement of the described procurement (with the appropriate signature above), and return this document via e-mail at your earliest convenience.

Contracting Agency	Health
Agency Contact (name, phone, e-mail)	Scott Creel, (615) 770-1152, Scott.Creel@tn.gov

Applicable RFS # 34310-21119**Attachments Supporting Request** (mark all applicable)

Note: The complete draft procurement document and the applicable documents listed below must accompany this request when submitted to STS. Special Contract Requests and Amendment Requests without Agency Head signature are acceptable. STS is aware that these documents will not have CPO signature when submitted with this request.

- Solicitation Document
- Special Contract Request
- Amendment Request
- Proposed Contract/Grant or Amendment
- Original Contract/Grant and Previous Amendments (if any)

Information Systems Plan (ISP) Project Applicability

To avoid delay of STS pre-approval, the applicability of an ISP project to the procurement must be confirmed with agency IT staff prior to submitting this request to STS. If necessary, agency IT staff should contact STS Planning with questions concerning the need for an ISP project.

IT Director/Staff Name Confirming (required): Mike Newman, Health CIO

- Applicable – Approved ISP Project#
- Not Applicable

Subject Information Technology Service Description

Provide a brief summary of the information technology services involved. Clearly identify included technologies such as system development/maintenance, security, networking, *etc.* As applicable, identify the contract or solicitation sections related to the IT services.

Controlled Substance Monitoring Database. Vendor = Appriss. Hosted at AWS.

Special Contract Request

This form should be utilized to facilitate contract and procurement requests that require the Chief Procurement Officer's prior approval and that of the Comptroller of the Treasury, as applicable.

NOT required for a contract with a federal, Tennessee, or Tennessee local government entity or a grant.

Route a completed request, as one file in PDF format, via e-mail attachment sent to: agsprs.agsprs@tn.gov.

APPROVED	APPROVED
CHIEF PROCUREMENT OFFICER DATE	COMPTROLLER OF THE TREASURY DATE

Request Tracking #	34310-21119
1. Contracting Agency	Department of Health
2. Type of Contract or Procurement Method	<input type="checkbox"/> No Cost <input type="checkbox"/> Revenue <input checked="" type="checkbox"/> Sole Source <input type="checkbox"/> Proprietary <input type="checkbox"/> Competitive Negotiation <input type="checkbox"/> Other _____
3. Requestor Contact Information	Dr. David Bess Controlled Substance Monitoring Database Program 665 Mainstream Dr., 2nd Floor Nashville, TN 37243 615-253-5287 <u>David.Bess@tn.gov</u>
4. Brief Goods or Services Caption	Collection of prescription data from dispensers (those that dispense or ship to TN Citizens), also known as Data Collection. The second part is the Controlled Substance Monitoring Database (CSMD) which is used by health care professionals and their delegates to view prescription data. This includes the Development, Enhancement, Hosting, and Support for both applications and connected applications.

Request Tracking #	34310-21119
5. Description of the Goods or Services to be Acquired	Appriss will continue to support and maintain the existing Data Collection and CSMD in the AWS (Amazon Web Services) cloud-based environment; complete the enhancements contained in the contract package, and will process and store data initially in the Data Collection application and then transfer to the CSMD application
6. Proposed Contractor	Appriss, Inc. 10401 Linn Station Road, Ste. 200 Louisville, KY 40223
7. Name & Address of the Contractor's principal owner(s) <i>– NOT required for a TN state education institution</i>	Alert Holdings 10401 Linn Station Road Suite 200 Louisville, KY 40223
8. Proposed Contract Period – with ALL options to extend exercised <i>The proposed contract start date shall follow the approval date of this request.</i>	60 months
9. Strategic Technology Solutions (“STS”) Pre-Approval Endorsement Request <i>– information technology (N/A to THDA)</i>	<input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Attached
10. eHealth Pre-Approval Endorsement Request <i>– health-related professional, pharmaceutical, laboratory, or imaging</i>	<input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Attached
11. Human Resources Pre-Approval Endorsement Request <i>– state employee training</i>	<input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Attached
12. Are these goods or services currently available on a statewide contract? If YES, please explain why the current statewide contract is not being used for this procurement.	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES,
13. Maximum Contract Cost – with ALL options to extend exercised	\$ 3,856,092.75
14. Was there an initial government estimate? If so, what amount?	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES, \$
15. Cost Determination Used- How did agency arrive at the estimate of expected costs?	Quotation provided by Appriss

Request Tracking #	34310-21119
16. Explanation of Fair and Reasonable Price- Explain how agency determined that price is fair and reasonable	Prices quoted by Appriss for collection, cleansing, and archiving of data; for reporting; for developing additional functionality in the following areas in Data Collection and also for those elements to be transferred to the CSMD databases. Areas of Data Collection will be enhanced to permit valid and reliable data to be collected and transferred into the CSMD; and for maintenance and support consistent with pricing under current contract. Price quoted by Appriss for software licensing is consistent with marketplace pricing of licensing of proprietary software of similar complexity and functionality.
17. Documentation of Discussions with Contractor- How did agency document discussions with Contractor? Attach documentation to this request as applicable.	E-mail correspondence; telephone discussions
18. Explanation of Need for or requirement placed on the State to acquire the goods or services	This contract will allow the State to continue to monitor dispensing of controlled substances in order to comply with legislation requiring annual reporting on dispensing of these substances. It will also significantly enhance the data capture and data analysis capability of the State with respect to dispensing and use of these substances and to communicate detailed, timely information about these activities, including trends, to relevant governmental and law enforcement entities.
19. Proposed contract impact on current State operations	The contract allows us to ensure compliance to state legislation related to monitoring controlled-substance prescriptions.

Request Tracking #	34310-21119
<p>20. Justification – Specifically explain why the goods or services should be acquired through the procurement method or contract type selected.</p>	<p>State and non-state users have extensive training and experience using the Appriss system and migrating to a new system would require significant reorientation and training. There are more than 50,000 registered users, delegates, dispensers, etc. using the system. In addition, the current system has been operational for 6+ years and was customized to TN's needs. It would be cost and time prohibitive to hold a competitive process for a new system. A new system would require significant rework of the customized features and would require re-coding to connect our system to other State's systems. Currently, the system connects with 17 other states, with plans to connect to more states in the near future to assist with better collaboration and nation-wide efforts to reduce opioid abuse. In addition, the software to manage the current CSMD is proprietary to Appriss and can only be maintained, supported and/or enhanced by Appriss. 43 states use the Appriss system and have agreed to share information through Appriss' software to combat the opioid epidemic.</p>
For No Cost and Revenue Contracts Only	
<p>21. What costs will the State incur as a result of this contract? If any, please explain.</p>	
<p>22. What is the total estimated revenue that the State would receive as a result of this contract?</p>	
<p>23. Could the State also contract with other parties interested in entering substantially the same agreement? Please explain.</p>	<input type="checkbox"/> NO <input type="checkbox"/> YES
<p>24. Summary of State responsibilities under proposed contract</p>	
For Sole Source and Proprietary Procurements Only	

Request Tracking #	34310-21119
25. Evidence of Contractor's experience & length of experience providing the goods or services to be procured.	Appriss acquired Optimum Technology, Inc., the holder of the 2011-2016 contract with TDH to develop and support the current CSMD, on July 1, 2015. This acquisition transferred to Appriss the CSMD-related assets and expertise of Optimum. Appriss has actively supported the CSMD since its acquisition of Optimum and, has transitioned the application to the AWS cloud in 2017 and incorporated into the CSMD several critical State-specified functionalities/enhancements under the current (2017-2018 one-year) contract. The Appriss system is used in 43 states/territories.
26. Has the contracting agency procured the subject goods or services before? If yes, provide the method used to purchase the goods or services and the name and address of the contractor.	<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES, Method: Request for Proposal Name/Address: Optimum Technology, Inc., 100 East Campus View Blvd., Suite 380, Columbus, Ohio 43235
27. Contractor selection process and efforts to identify reasonable, competitive, procurement alternatives	This contract is to support, maintain, and enhance the current proprietary data collection and CSMD. A Request for Information (RFI) was conducted in 2017 to determine available systems in the marketplace, estimated cost to switch to a new system, and feasibility and time to train over 50,000 users if a new system was selected.
Signature Required for all Special Contract Requests	
<p>Signature of Agency head or authorized designee, title of signatory, and date (the authorized designee may sign his or her own name if indicated on the Signature Certification and Authorization document)</p> <p style="font-size: 24pt; margin-left: 100px;">John J. Dreyzehner - BS</p> <p style="margin-left: 100px;">Digitally signed by John J. Dreyzehner - BS DN: cn=John J. Dreyzehner - BS, o, ou, email=Brandon.C.Silby@tn.gov, c=US Date: 2018.10.12 16:30:43 -05'00'</p> <p>Signature: _____ Date: _____</p>	



E-Health Pre-Approval Endorsement Request E-Mail Transmittal

TO : Office of e-Health Initiatives
Department of Finance & Administration
E-mail: office.eHealth@tn.gov

FROM : Scott Creel, TDH - ITSD
E-mail: Scott.Creel@tn.gov

DATE : September 25, 2018

RE : Request for eHealth Pre-Approval Endorsement

Applicable RFS # 34310-21119

Office of e-Health Initiatives Endorsement Signature & Date:

 9/25/18

Office of e-Health Initiatives

Office of e-Health Initiatives (eHealth) pre-approval endorsement is required pursuant to procurement regulations pertaining to contracts with medical/mental health-related professional, pharmaceutical, laboratory, or imaging type services as a component of the scope of service. This request seeks to ensure that eHealth is aware of and has an opportunity to review the procurement detailed below and in the attached document(s). This requirement applies to any procurement method regardless of dollar amount.

Please indicate eHealth endorsement of the described procurement (with the appropriate signature above), and return this document via e-mail at your earliest convenience.

Contracting Agency	Health
Agency Contact (name, phone, e-mail)	Scott Creel, (615) 770-1152, Scott.Creel@tn.gov
Attachments Supporting Request (as applicable – copies without signatures acceptable)	
<input type="checkbox"/> Solicitation Document <input type="checkbox"/> Special Contract Request <input type="checkbox"/> Amendment Request <input checked="" type="checkbox"/> Proposed contract or amendment	
Subject Medical/Mental Health-Related Service Description (Brief summary of eHealth services involved. As applicable, identify the contract and solicitation sections related to eHealth services.)	
Controlled Substance Monitoring Database (CSMD) long term contract	



CONTRACT

(fee-for-goods or services contract with an individual, business, non-profit, or governmental entity of another state)

Begin Date January 01, 2019	End Date December 31, 2021	Agency Tracking # 34310-21119	Edison Record ID
Contractor Legal Entity Name Appriss Inc.			Edison Vendor ID 121147

Goods or Services Caption (one line only)
Tennessee Controlled Substance Monitoring Database Software and Services

Contractor <input checked="" type="checkbox"/> Contractor	CFDA #
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Funding —					
FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount
2019	\$405,177.50				\$405,177.50
2020	\$1,024,662.10	\$21,000.00			\$1,045,662.10
2021	\$716,685.33				\$716,685.33
2022	\$357,404.28				\$357,404.28
TOTAL:	\$2,503,929.21	\$21,000.00			\$2,524,929.21

Contractor Ownership Characteristics:

Minority Business Enterprise (MBE):
 African American Asian American Hispanic American Native American

Woman Business Enterprise (WBE)

Tennessee Service Disabled Veteran Enterprise (SDVBE)

Disabled Owned Business (DSBE)

Tennessee Small Business Enterprise (SBE): \$10,000,000.00 averaged over a three (3) year period or employs no more than ninety-nine (99) employees.

Government Non-Minority/Disadvantaged Other:

Selection Method & Process Summary (mark the correct response to confirm the associated summary)

Competitive Selection

Other Sole Source

Budget Officer Confirmation: There is a balance in the appropriation from which obligations hereunder are required to be paid that is not already encumbered to pay other obligations.

Speed Chart (optional) HL00000587	Account Code (optional) 72203000
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**CONTRACT
BETWEEN THE STATE OF TENNESSEE,
DEPARTMENT OF HEALTH
AND
APPRISS INC.**

This Contract, by and between the State of Tennessee, Department of Health ("State") and Appriss Inc. ("Contractor"), is for the provision of Controlled Substance Monitoring Database (CSMD), as further defined in the "SCOPE." State and Contractor may be referred to individually as a "Party" or collectively as the "Parties" to this Contract.

The Contractor is a For-Profit Corporation
Contractor Place of Incorporation or Organization: Delaware
Contractor Edison Registration ID # 121147

A. SCOPE:

A.1. The Contractor shall provide all goods or services and deliverables as required, described and detailed below and shall meet all service and delivery timelines as specified by this Contract.

A.2. Definitions.

- a. "Active Sessions" is an active working session where communication is occurring between the State PMP User Application and devices being used by Users
- b. "API" means Application Program Interface
- c. "APRN" means Advance Practice Registered Nurse
- d. "ASAP" means American Society for Automation in Pharmacy
- e. "Centers for Disease Control and Prevention (CDC)MME Conversion" morphine milligram equivalent calculation for the amount of a prescribed opioid as defined by the CDC
- f. "Centers for Medicare and Medicaid Services (CMS) Taxonomy" is a hierarchical code set that consists of codes, descriptions and definitions to categorize the type, classification and/or specialization of health care providers
- g. "Central Reporters" means individuals within a corporate structure identified to report controlled substance prescriptions on behalf of their corporate subsidiary, Dispensers, or an individual of a software company contracted by the Dispenser to report controlled substance prescriptions on behalf of Dispenser to the prescription monitoring program
- h. "Certified Registered Nurse Anesthetist" is an advanced practice registered nurse who specializes in the administration of anesthesia
- i. "CFC" means Customer First Center, which is the Appriss Technical Help Desk.
- j. "Change Order" means a formal request for an adjustment or enhancement of a system. A Change Order defines what needs to be accomplished and the effect of the proposed changes to the current project deliverables, schedule, and cost.
- k. "Clinical Risk Indicator (CRI)" means a visual, textual or graphical indicator used in the system to indicate to the user of the system the potential for this patient to be high risk determined by parameters set by the State.
- l. "Controlled Substance Monitoring Database (CSMD)" means an electronic repository that collects and maintains encrypted data on controlled substance prescriptions dispensed in

the State of Tennessee and generates reports on this data. This is the State Prescription Monitoring Program.

- m. "CSMD Director" means the director of the State's CSMD who administers, maintains, and directs the operation and function of the CSMD
- n. "CSV" means Comma Separated Value
- o. "DATA" means Drug Addiction Treatment Act
- p. "Data Collection Manual" is a document used by Dispensers that contains information related to definitions, explanations, processes and instructions regarding prescription data to be submitted to the State
- q. "Data Dictionary" means document that will catalog the organization, contents, and conventions of the databases. It shall include the names and descriptions and characteristics of all the various tables (records or entities) and their contents (fields) plus additional details, e.g., type and length of each data element. It shall document the relationship between all tables.
- r. "DDS" means Dentist
- s. "DEA" means Drug Enforcement Agency
- t. "DEA Dispenser" is an individual or entity with a DEA number that reports dispensed prescriptions to the State PMP Data Collection Application
- u. "DEA Suffix" is an identifying number assigned to a prescriber by an institution when the institution's DEA number is used
- v. "Delegates" means licensed or unlicensed individuals who act as agents of their Supervisors, per the Prescription Safety Act of 2016.
- w. "Disaster" means a serious intentional or unintentional disruption of network and/or system functionality causing all or part of an organization's operations and/or computer services to be rendered unusable.
- x. "Disaster Recovery" means the procedures an organization will follow to maintain or quickly resume mission-critical functions following a disaster.
- y. "Disclaimer" is language in CRIs, reports, and other areas of the State PMP User Application and State PMP Data Collection Application to communicate the conditions, limitations and exceptions of the information presented
- z. "Dispenser" means a person who physically delivers a controlled substance to any person, institution or entity with the intent that it be consumed away from the premises on which it is dispensed.
- aa. "DO" means Osteopathic Doctor
- bb. "DPM" means Doctor of Podiatric Medicine
- cc. "DVM" means Doctor of Veterinary Medicine
- dd. "DWP" means DATA Waived Physician
- ee. Enhancement – new development / functionality requested by State that does not exist in current State PMP User Application or State Data Collection Application that vendor will need to provide estimate and timeline to complete

- ff. “ETL” means Extract, Transform, and Load
- gg. Existing functionality - Existing functionality or feature that, at no additional cost to the State, is serving its expected purpose (i.e., it's not broken) or meeting *critical* functionality to accomplish a particular task.
- hh. “FDA” means Food and Drug Administration
- ii. “FIPS” means Federal Information Processing Standards
- jj. Gap – functionality that exists in the current applications the Contractor provides to the State at the time of this Contract start date that would need to be developed in the Contractor’s new version of the State PMP User Application or State Data Collection Application should the State migrate to the Contractor’s new applications. Development of Gap items would be at no cost to the State.
- kk. “Healthcare Practitioner (for the purposes of this contract)” is any person licensed, registered, or otherwise permitted to prescribe, distribute, or dispense a controlled substance in the course of professional practice and Certified Registered Nurse Anesthetist (CRNA)
- ll. “Internet Protocol (IP) Address” is a numerical label assigned to each device connected to a computer network that uses the Internet Protocol for communication
- mm. “IS” means Information Source
- nn. “KPIs” means Key Performance Indicators
- oo. “MD” means Medical Doctor
- pp. “MME” means Morphine Milligram Equivalent
- qq. “NCPDP” means National Council for Prescription Drug Programs
- rr. “NDC” means National Drug Code
- ss. “NPI” means National Provider Identification
- tt. “NTP” means Narcotic Treatment Program
- uu. “OTech” means Optimum Technology; the organization who provided the current CSMD system to the State. This system was purchased and is currently maintained by Appriss, Inc.
- vv. “PA” means Physician Assistant
- ww. “Patient Consolidation ID, also known as Group ID” for the purposes of this contract it is an identifier assigned by the Contractor to identify patients whose prescription information contain common elements and by using an algorithm determine there is a high probability these different Patient IDs belong to a single patient
- xx. “Patient ID” for the purposes of this contract when prescription data is submitted from the Dispenser to State PMP Data Collection Application and the Contractor processes the data and assigns unique identifiers to patients associated with that data. If the patient information matches existing patient data associated to Patient ID in the State PMP Data Collection Application the new data will be associated to that Patient ID, otherwise a new Patient ID will be created in the State PMP Data Collection Application

- yy. "PDF" means Portable Document Format
- zz. "PHA" means Pharmacy Header
- aaa. "Pharmacist" means an individual health care provider licensed by a state to practice the profession of pharmacy
- bbb. "Pharmacist In Charge" means the supervisory pharmacist who has the authority and responsibility for compliance with laws and rules pertaining to the practice of pharmacy at the practice site of the pharmacist-in-charge
- ccc. "PMP" means Prescription Monitoring Program
- ddd. "PMPi" means Prescription Monitoring Program Interconnect
- eee. "Prescriber" – anyone in the medical profession authorized by law to prescribe drugs (= to write an order for medicine for a patient
- fff. "Prescriber Consolidation ID" for the purposes of this contract it is an identifier that will be assigned by the Contractor to identify a prescriber who possesses multiple DEA numbers
- ggg. "Production Environment" the environment where the application is put into operation for its intended use by end users
- hhh. Profession as used in the BRD refers to the individual's primary vocation identified by the individual to the State to obtain licensure (Examples: Medical Doctors, Osteopathic Doctors, Nurse, Podiatrist, etc.). This is not the individual's specialty (Examples: Anesthesiology, Internal Medicine, Family Medicine) or sub Specialty (Examples: Pain Management, Pediatric Cardiology).
- iii. "Remediation Plan" means a plan to remedy any problems or deficiencies that occur during the testing of Disaster Recovery.
- jjj. "Report Output" is defined as the results from a query run in either the State PMP Data Collection Application or the State PMP User Application that can be either viewed online or that generates a document that can be viewed or downloaded from the respective application
- kkk. "Role" means an identification in the application to identify different types of users (e.g. Medical Doctors, Osteopathic Doctors, Advance Practice Registered Nurses, Licensed Delegate, Unlicensed Delegates, Administrators, etc.)
- lll. "RPO" means Recovery Point Objective which is the age of files that must be recovered from backup storage for normal operations to resume if a computer, system, or network goes down as a result of a hardware, program, or communications failure.
- mmm. "RTO" means Recovery Time Objective which is the duration of time and a service level within which a business process must be restored after a disaster in order to avoid unacceptable consequences associated with a break in continuity.
- nnn. "RxNorm" means a normalized naming system for generic and branded drugs; and a tool for supporting semantic interoperation between drug terminologies and pharmacy knowledge base systems.
- ooo. "SFTP" means Secure File Transfer Protocol
- ppp. Shell account - "Shell account" in the context of this contract means an account that does not have its profile information filled out. It technically exists as an account with the bare minimum information (email and password), but is otherwise an empty account.

- qqq. "Specialty" means a specialty branch of the medical profession. After completing medical school, physicians or surgeons usually further their medical education in a specific specialty of medicine by completing a multiple year residency to become a medical specialist (e.g. Family Medicine, Anesthesiology, Nursing, Orthopedic Surgeon).
- rrr. "SSDI" means Social Security Death Index
- sss. "State Administrators" means individuals who are designated by the CSMD Director and work in operations for the CSMD and have been given access and an administration role in the CSMD web application(s) provided by the Contractor.
- ttt. "State PMP Data Collection Application" is the application hosted by the Contractor used by the State to collect controlled substance prescription data from dispensers in the state for controlled substances in Schedules II, III, and IV dispensed in this state, and Schedule V controlled substances identified by the controlled substance database committee that will be collected in this application and then processed into the State PMP User Application. This application in Tennessee is known by the dispensers as Tennessee Data Collection
- uuu. "State PMP User" means a person officially registered in the CSMD, by role.
- vvv. "State PMP User Application" is the application that is hosted by the Contractor and used to increase the quality of patient care by equipping health care practitioners and others as allowed by law to view prescription data collected on patients acquiring controlled substances in Schedules II, III, and IV dispensed in this state, and Schedule V controlled substances identified by the controlled substance database committee. This application in Tennessee is known by the registered Users as the Controlled Substance Monitoring Database (CSMD)
- www. "State PMP User Application Administrator and State PMP Data Collection Application Administration (also known as State Administrators in this BRD and Contract)" are employees of the State that have necessary privileges to provide customer support, operational support, and ability to generate reports as needed or requested
- xxx. "State Release Management Service (RMS) Team" employees of the State who conduct tests, analyze results and reports to the business unit to ensure that the functionality meets business requirements
- yyy. "STS" means Strategic Technology Solutions, which is the State of Tennessee's central Information Technology Services Department.
- zzz. "Sub-Specialty" as it related to the State PMP User Application this category provides the area of expertise that a person has within a specialty area for example: Profession of Medical Doctor, Specialty of Anesthesiology and Sub-Specialty of Pain Management
- aaaa. "Supervisors" are given their authority in the Prescription Safety Act of 2016 to approve individuals to register and/or perform CSMD requests.
- bbbb. "TBI" means Tennessee Bureau of Investigation
- cccc. "TBI Director" is a person appointed by the governor and manages the TBI
- dddd. "TennCare" means the Medicaid program for the State of Tennessee.
- eeee. "Test Environment" is a validated, stable and usable test environment where State team will execute test scenarios to validate that functionality meets business requirements

- ffff. "TN CSMD Committee" means the committee established by TCA §53-10-303 to create the CSMD.
- gggg. "TN Dispensers" means dispensers licensed by the Tennessee Board of Pharmacy
- hhhh. "Training Environment" an environment that mimics production that can be used to allow hands on experience in an environment with fake data and can also be used in educational outreach
- iiii. "UAT" means User Acceptance Testing
- jjjj. "Unlicensed Delegate (also known as Health Care Extender Unlicensed)" is any person who does not hold a professional license or registration that is designated by the healthcare practitioner to act as an agent of the healthcare practitioner
- kkkk. "Users" can be any individual, individual for a corporate entity, individual for a software company who by law can register to submit data to the State PMP Data Collection Application or it can be any individual by law who can register to view the collected prescription data in the State PMP User Application
- llll. "XDEA" means the waiver (DWP) and any related endorsement authorizing qualified physicians to conduct maintenance and detoxification treatment using specifically approved schedule III, IV, or V narcotic medications associated with a DEA registration pursuant to the Drug Addiction Treatment Act (DATA) which waives the requirement for obtaining a separate Drug Enforcement Administration (DEA) registration as a Narcotic Treatment Program (NTP) for qualified physicians administering, dispensing, and prescribing these specific FDA approved controlled substances.

A.3. Current Functionality, Migration and Data Transmission

- a. The Contractor shall, at no additional cost to the State beyond those contained in this Contract, maintain the current State PMP Data Collection and State PMP User Application in the form in which both exist as of the effective date of this Contract, with the exception of changes to current functionality requested or agreed to by the State. Attachment 4 contains a spreadsheet with multiple tabs that identify the functions that constitute the current form of the State PMP User Application and the language contained in all lines in BRD that have Data Collection in the Applications/Group column and the Type Column contains Existing Functionality or Gap indicates this functionality exists in the current State Data Collection application and all functionality and processes and must be maintained until such time that State agrees to migrate to new applications. For the purposes of this Contract "in the form in which both exist" means that all open issues of record that have been communicated in writing by the State to the Contractor shall have been addressed to the satisfaction of the State or that the Contractor is in the process of addressing these issues to the satisfaction of the State. The Contractor shall, additionally, develop and provide the enhancements to the State Data Collection or State PMP User Applications if state laws, rules, and regulations demand additional functionality to be developed in current applications. The Contractor shall also develop, install, and configure enhancements to the State Data Collection or State PMP User Applications as listed in this Contract and Attachment 3. The Contractor shall not begin work on any enhancement listed in this Contract, including all attachments, without prior written consent from the State. The following enhancements listed in Attachment 3 shall be developed, installed, and configured by the Contractor to the State's approval and acceptance within two (2) months of the Contract start date, if these items were not completed in the previous contract,
 - i. BR2.1.6
 - ii. BR3.0.6
 - iii. BR4.1.2

iv. BR4.1.3

All remaining enhancements listed in Attachment 3 shall be developed, installed, and configured by the Contractor to the State's written approval and acceptance within eighteen (18) months of the Contract Effective Date.

- b. The Contractor shall not migrate the State Data Collection or State PMP User Application until the State provides written documentation agreeing that the Contractor has functionality in production to meet the State's needs currently being met by the two applications and services the Contractor acquired from Optimum Technology and subsequently enhanced to deliver the current level of service provided to the State as of the Contract Effective Date. State reserves the right to migrate without all gaps in functionality being available at time of migration if development is underway by Contractor with agreed upon delivery dates.
- c. Migration by the State to any other application/platform shall be contingent upon the Contractor providing access to the State's production data or providing a near real time replica of State data collected or created by transactions occurring in the databases to the State in a method agreed upon by the State and the Contractor. Data migration will be handled via a Memorandum Of Understanding (MOU) as described in Contract Section E.3.

A.4. Licenses

The Contractor shall provide the appropriate license(s) allowing the State and all authorized individuals to use the proposed solution in all environments provided to the State. Payment for licenses shall be made as described in Contract Section C.3.b.

A.5. Project Kickoff Meeting and Master Project Management Plan.

- a. Project Kickoff Meeting. The Contractor shall prepare for and schedule with the State a one-day project kickoff meeting to be held at a State site in Nashville, Tennessee no later than thirty (30) calendar days after this Contract Effective Date. The project kickoff meeting shall be led by the Contractor project manager and attended by other Contractor team with key project roles and State team. The project kickoff meeting agenda shall include but not be limited to the following topics and tasks, to be completed:

- (1) Project organization: Outline the roles and responsibilities of key project personnel along with the project sponsors.
- (2) Solution vision: Discuss the objectives and benefits of the project.
- (3) Project overview: Outline the scope and timeline of the project and present detailed information (deliverables and responsibilities) on each project task:
- (4) Project management
 - a. project charter
 - b. requirements confirmation and configuration
 - c. communication plan shall include but not limited to how the State project management team and Contractor project management team will communicate with a clear delineation of roles and responsibilities.
 - d. release management plan
 - e. security management plan
 - f. data conversion and migration (if applicable)
 - g. escalation plan
 - h. issue management
 - i. change management
 - j. technical management
 - k. data dictionary
 - l. disaster recovery plan
 - m. software modifications and related interfaces development
 - n. system documentation
 - o. software installation

- p. production deployment and go-live support
- q. training
- r. transition to help desk
- s. user acceptance testing

- (5) Review key success factors: Outline key factors to ensure project success.
- (6) Demo: Demonstrate the key features of the procured solution.
- (7) Question and answer period: Answers to questions pertaining to the project.

The Contractor shall complete these activities (and any additional project kickoff meeting activities to which the State and the Contractor mutually agree) and obtain approval and acceptance from the State prior to distribution of payment as scheduled in Section C.3.b.

b. Master Project Management Plan.

The Contractor shall prepare a master project management plan and deliver this plan to the State no later than thirty (30) calendar days after this Contract Effective Date. This plan, which should follow the Tennessee Business Solutions Methodology (TBSM) located at <https://www.tn.gov/finance/strategic-technology-solutions/strategic-technology-solutions/tbsm.html>, must describe in detail the approach, activities, stages, duration, risks, and implementation for all work to be performed by the Contractor under the project. It must also detail, by name and position, the responsibilities of Contractor staff with respect to the work to be completed under the contract. As a minimum, this plan shall include the following deliverables:

- (1) A detailed project schedule describing all project deliverables and their completion dates.
- (2) The Contractor's change management plan, including a detailed description of the Contractor's proposed process for initiating Change Orders and the Contractor's proposed Change Order form.
- (3) A detailed description of the Contractor's proposed method of weekly reporting on the status of specific project deliverables. This description must include sample reporting documents.
- (4) A detailed description of the Contractor's proposed method of weekly reporting on the overall progress toward project goals and objectives. This description must include sample reporting documents and an agenda for and schedule of Contract reviews held between the Contractor's project manager and the State's project manager at a Nashville State site at least as often as every forty-five (45) calendar days after the project kickoff meeting.
- (5) A detailed description of the Contractor's proposed issue management plan for recording, monitoring, resolving, and reporting on resolution of issues that arise during the project. This description must include issues resolution timetables and escalation procedures.
- (6) A detailed risk management plan and register.
- (7) A communication plan that includes a detailed description of the processes and tools the Contractor will use to manage communication with State team and the timetables on which these communications will occur.

- (8) A detailed release management plan.
- (9) A detailed security management plan that adheres to the requirements as set forth in this contract.
- (10) A detailed description of the system documentation to be provided to State by the Contractor and the schedule on which this documentation will be provided.
- (11) A detailed description of the hardware/software and communication requirements for the proposed solution (e.g., browser compatibility, minimum system requirements, preferred operating system, any application specific add-ons or middleware, etc.).

A.6. Project Management.

The Contractor shall designate a single project manager to serve as the Contractor's primary point of contact for all activities and issues. The Contractor shall ensure that its project manager provides sufficient management of the project to ensure that all project activities are performed efficiently, accurately, and on schedule. Project management continues for the entire duration of the project.

The Contractor project manager shall coordinate as necessary with the State project manager through the executive sponsor to ensure that Contractor activities are managed consistently within overall Contract requirements as they are described in this Contract.

- a. Project Management. The workflow and minimum acceptable activities the Contractor shall perform for project management are as follows:
 - (1) Prepare and maintain a detailed project plan. This plan shall include project objectives and milestones; a critical path for all major project activities; schedules for completion of project deliverables; designations of the Contractor staff responsible for these deliverables and the reporting relationship among these staff; Contractor response and reporting protocols and timeframes; and documents relating to these responsibilities.
 - (2) Secure, schedule, and manage the resources necessary to assure that all project deliverables are completed to the satisfaction of the State on schedule and at the costs contained in the Contract.
 - (3) Communicate with the State's project manager, other State team, and relevant third parties using the methods, on the schedule(s), and within the timeframes contained in this Contract.
 - (4) Measure, track, and evaluate progress toward project objectives; report on progress at each contract review described in the Contract and, at other times, within five (5) business days of request by the State. Initiate corrective action, as necessary, to correct deficiencies in Contractor performance and to resolve other issues that arise during the Contract.
 - (5) Schedule, conduct, and report on the reviews required under the Contract. Respond within three (3) business days to requests from the State to schedule additional project progress reviews and discussions of other project-related matters, including Contractor staff performance.
 - (6) Track and report within ten (10) business days on all items identified for follow-up in Contract status reviews.
 - (7) Administer the change management plan, review and analyze change requests, and maintain the change request log as required.

- (8) Administer the project security management plan and review, analyze, resolve, and report security issues that arise during the Contract in a manner and on a schedule consistent with the State of Tennessee's STS Enterprise Information Security Policies; <https://www.tn.gov/content/dam/tn/finance/documents/Enterprise-Information-Security-Policies-ISO-27002-Public.pdf>.
- (9) Prepare and provide the State, on the schedule contained in the Contract, the system documentation required by the Contract.

The Contractor shall complete project management activities (and any additional project management activities to which the State and the Contractor mutually agree) to the approval and acceptance of the State prior to distribution of payments as scheduled in Section C.3.b.

A.7. Data Ownership.

- a. The State will own all rights, title and interest in its data that is related to the services provided by this Contract. The Contractor shall not access State user accounts or State data except to the extent:
 - (1) In the course of data center operations,
 - (2) In response to service or technical issues,
 - (3) As required by the express terms of this contract, or
 - (4) At the State's written request.
- b. All data collected for the State by the Contractor, subcontractor(s), or agents in the performance of this Contract shall become and remain the property of the State and such data may not be used by Contractor except by express written permission of the State.

A.8. Compliance with Data Security and Privacy Controls.

The Contractor warrants that security and privacy for all applicable data the Contractor, subcontractors, or agents create, receive, process, maintain, or store during the course of this Contract shall be handled in accordance with the terms outlined in this Contract.

A.9. Amazon Web Services Hosting Environment.

The Contractor shall host and maintain the CSMD in an Amazon Web Services (AWS) environment. Within thirty (30) days of request by the State, the Contractor shall provide their AWS hosting environment technical specifications and descriptions.

The Contractor shall provide advance written notice of at least ten (10) business days to the State's technical contact of any changes to the AWS hosting environment that may impact service availability or performance.

A.10. Change Order.

The State may, at its sole discretion and with written notice to the Contractor, request changes in the Scope that are necessary but were inadvertently unspecified in this Contract.

- a. Change Order Creation— After receipt of a written request for additional services from the State, the Contractor shall respond to the State, within a maximum of ten (10) business days, with a written proposal for completing the service. Contractor's proposal must specify:
 - (1) the effect, if any, of implementing the requested change(s) on all other services required under this Contract;
 - (2) the specific effort involved in completing the change(s);
 - (3) the expected schedule for completing the change(s);
 - (4) the maximum number of person hours required for the change(s); and

- (5) the maximum cost for the change(s)— this maximum cost shall in no instance exceed the product of the person hours required multiplied by the appropriate payment rate proposed for such work.

The Contractor shall not perform any additional service until the State has approved the proposal. If approved, the State will sign the proposal, and it shall constitute a Change Order between the Contract Parties pertaining to the specified change(s) and shall be incorporated, hereby, as a part of this Contract.

- b. Change Order Performance— Subsequent to creation of a Change Order, the Contractor shall complete the required services. The State will be the sole judge of the acceptable completion of work and, upon such determination, shall provide the Contractor written approval.
- c. Change Order Remuneration— The State will remunerate the Contractor only for acceptable work. All acceptable work performed pursuant to an approved Change Order, without a formal amendment of this Contract, shall be remunerated in accordance with and further limited by Contract Section C.3.c., PROVIDED THAT, the State shall be liable to the Contractor only for the cost of the actual goods or services provided to complete the necessary work, not to exceed the maximum cost for the change detailed in the Change Order. In no instance shall the State be liable to the Contractor for any amount exceeding the maximum cost specified by the Change Order authorizing the goods or services. Upon State approval of the work, the Contractor shall invoice the State in accordance with the relevant provisions of this Contract.

- A.11. Warranty. Contractor represents and warrants that the term of the warranty (“Warranty Period”) shall be the greater of the Term of this Contract or any other warranty generally offered by Contractor, its suppliers, or manufacturers to customers of its goods or services. The goods or services provided under this Contract shall conform to the terms and conditions of this Contract throughout the Warranty Period. Any nonconformance of the goods or services to the terms and conditions of this Contract shall constitute a “Defect” and shall be considered “Defective.” If Contractor receives notice of a Defect during the Warranty Period, then Contractor shall correct the Defect, at no additional charge.

Contractor represents and warrants that the State is authorized to possess and use all equipment, materials, software, and deliverables provided under this Contract.

Contractor represents and warrants that all goods or services provided under this Contract shall be provided in a timely and professional manner, by qualified and skilled individuals, and in conformity with standards generally accepted in Contractor’s industry.

If Contractor fails to provide the goods or services as warranted, then Contractor will re-provide the goods or services at no additional charge. If Contractor is unable or unwilling to re-provide the goods or services as warranted, then the State shall be entitled to recover the fees paid to Contractor for the Defective goods or services. Any exercise of the State’s rights under this Section shall not prejudice the State’s rights to seek any other remedies available under this Contract or applicable law.

- A.12. Inspection and Acceptance. The State shall have the right to inspect all goods or services provided by Contractor under this Contract. If, upon inspection, the State determines that the goods or services are Defective, the State shall notify Contractor, and Contractor shall re-deliver the goods or provide the services at no additional cost to the State. If after a period of thirty (30) days following delivery of goods or performance of services the State does not provide a notice of any Defects, the goods or services shall be deemed to have been accepted by the State.

B. TERM OF CONTRACT:

- B.1. This Contract shall be effective on January 1, 2019 (“Effective Date”) and extend for a period of thirty six (36) months after the Effective Date (“Term”). The State shall have no obligation for goods or services provided by the Contractor prior to the Effective Date.
- B.2. Renewal Options. This Contract may be renewed upon satisfactory completion of the Term. The State reserves the right to execute up to two (2) renewal options under the same terms and conditions for a period not to exceed twelve (12) months each by the State, at the State's sole option. In no event, however, shall the maximum Term, including all renewals or extensions, exceed a total of sixty (60) months.
- C. PAYMENT TERMS AND CONDITIONS:**
- C.1. Maximum Liability. In no event shall the maximum liability of the State under this Contract exceed **Two Million Five Hundred Twenty-Four Thousand Nine Hundred Twenty-Nine Dollars and Twenty-One Cents (\$2,524,929.21)** (“Maximum Liability”). This Contract does not grant the Contractor any exclusive rights. The State does not guarantee that it will buy any minimum quantity of goods or services under this Contract. Subject to the terms and conditions of this Contract, the Contractor will only be paid for goods or services provided under this Contract after a purchase order is issued to Contractor by the State or as otherwise specified by this Contract.
- C.2. Compensation Firm. The payment methodology in Section C.3. of this Contract shall constitute the entire compensation due the Contractor for all goods or services provided under this Contract regardless of the difficulty, materials or equipment required. The payment methodology includes all applicable taxes, fees, overhead, and all other direct and indirect costs incurred or to be incurred by the Contractor.
- C.3. Payment Methodology. The Contractor shall be compensated based on the payment methodology for goods or services authorized by the State in a total amount as set forth in Section C.1.
- a. The Contractor’s compensation shall be contingent upon the satisfactory provision of goods or services as set forth in Section A.
 - b. The Contractor shall be compensated based upon the following payment methodology:

Goods or Services Description	Amount (per compensable increment)
ENHANCEMENTS	
State PMP Data Collection Application Validations – Attachment 3; Section BR4.1.4. A single, one-time fixed payment shall be made upon completion and the State’s written approval and acceptance of installation and configuration of this enhancement. Documentation on functionality will be provided and training will be provided when necessary.	\$24,000 / (one-time charge upon written approval of State)
State PMP Data Collection and State PMP User Application Data Sources - RxNorm Validation– Attachment 3; Section BR4.2.0.1.a. A single, one-time fixed payment shall be made upon completion and the State’s written approval and acceptance of installation and configuration of this enhancement. Documentation on functionality will be provided and training will be provided when necessary.	\$43,200 / (one-time charge upon written approval of State)
State PMP Data Collection and State PMP User Application Data Sources - ICD-10 – Attachment 3; Section BR4.2.0.1.b..	\$24,000 / (one-time charge upon

<p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement.</p> <p>Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>written approval of State)</p>
<p>State PMP User and Data Collection Applications Registration – Attachment 3; Section BR5.0.1.</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement.</p> <p>Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$12,000 / (one-time charge upon written approval of State)</p>
<p>State PMP User Application Registration: CMS Taxonomy Customization – Attachment 3; Section BR5.0.11.1 and CMS Taxonomy Specialties – Attachment 3; Section BR5.0.11.2</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of both of these enhancements.</p> <p>Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$15,000 / (one-time charge upon written approval of State)</p>
<p>State PMP User Application PMPi Data Sharing – Attachment 3; Section BR8.0.1.</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement.</p> <p>Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$7,200 / (one-time charge upon written approval of State)</p>
<p>State PMP User Application Prescriber Records – Attachment 3; Section BR9.0.0.</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement.</p> <p>Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$36,000 / (one-time charge upon written approval of State)</p>
<p>State PMP User Application MME Conversions – Attachment 3; Section BR10.0.1.</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement.</p> <p>Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$24,000 / (one-time charge upon written approval of State)</p>
<p>State PMP User Application Clinical Risk Indicators: Combo Benzodiazepine/Opioid – Attachment 3; Section BR17.5 and State PMP User Application Clinical Risk Indicators: Combo Benzodiazepine/Opioid/Carisoprodol – Attachment 3; Section BR17.6</p> <p>A single, one-time fixed payment shall be made upon completion</p>	<p>\$36,000 / (one-time charge upon written approval of State)</p>

<p>and the State's written approval and acceptance of installation and configuration of both of these enhancements. Documentation on functionality will be provided and training will be provided when necessary.</p>	
<p>State PMP User Application Reporting: State Administrator(s) User Reports – Attachment 3; Section BR20.3.0</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement. Documentation on functionality will be provided and training will be provided when necessary</p>	<p>\$14,400 / (one-time charge upon written approval of State)</p>
<p>State PMP Data Collection Application Reporting: Admin User Reports – Attachment 3; Section BR20.3.2.</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement. Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$24,000 / (one-time charge upon written approval of State)</p>
<p>State Reporting Tool (with access to State PMP Data Collection Application data) Reporting: Zero Reports - Attachment 3; Section BR20.12.0.</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement. Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$6,000 / (one-time charge upon written approval of State)</p>
<p>State Reporting Tool (with access to State PMP User Application data) Reporting: User Compliance - Attachment 3; Section BR20.25.1.</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of this enhancement. Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$30,000 / (one-time charge upon written approval of State)</p>
<p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of each enhancement from Attachment 3 – BRD as listed below. The total cost for these enhancements combined, shall not exceed \$76,750</p> <ul style="list-style-type: none"> • BR3.0.3 State PMP Data Collection Application General Operations: Daily DEA File • BR3.0.4 State PMP Data Collection Application General Operations: Prescriber Consolidation ID • BR5.0.0.1.1 State PMP Data Collection Application Validation Requirements • BR5.0.10 State PMP User Application Registration • BR20.32.0 State Reporting Tool (with access to State PMP Data Collection Application data) Reporting: Prescription Processing Report <p>Documentation on functionality will be provided and training will be provided when necessary.</p>	<p>\$76,750 / (maximum amount for all enhancements combined, upon written approval of State)</p>

<p>Drug Court/Law Enforcement Enhancements</p> <p>A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of each enhancement from Attachment 3 – BRD as listed below. The total cost for these enhancements combined, shall not exceed \$75,000</p> <ul style="list-style-type: none"> • BR5.0.18.1 State PMP User Application Registration: Drug Courts • BR5.0.18.2 State PMP User Application Registration: Law Enforcement • BR5.0.18.3 State PMP User Application Registration: District Attorney and TBI Director • BR5.0.18.4 State PMP User Application Support • BR5.3.0 State PMP User Application Registration: Law Enforcement and Drug Courts • BR5.3.0.1 State PMP User Application Registration: Law Enforcement and Drug Courts Supervisors • BR5.3.1.1 State PMP User Application Registration: Law Enforcement and Drug Courts • BR5.3.2 State PMP User Application Registration: Law Enforcement • BR5.3.3 State PMP User Application Registration: Law Enforcement • BR5.3.4 State PMP User Application Registration: Law Enforcement and Drug Courts • BR5.3.5 State PMP User Application Registration: Drug Courts • BR14.2.0 State PMP User Application Law Enforcement Requests • BR14.2.1 State PMP User Application Law Enforcement Patient Requests • BR14.2.2 State PMP User Application Law Enforcement Dispenser Requests • BR14.2.3 State PMP User Application Law Enforcement Prescriber Requests • BR14.3.0 State PMP User Application: Drug Court Patient Requests • BR14.3.1 State PMP User Application: Drug Court Patient Requests • BR20.1.1 State PMP User Application Reporting: Request History • BR20.33.0 State Reporting Tool (with access to State PMP User Application Data) Reporting: State Administrator(s) Ad-hoc Law Enforcement and Drug Courts • BR20.33.1 State Reporting Tool (with access to State PMP User Application Data) Reporting: State Administrator(s) Ad-hoc Law Enforcement and Drug Courts <p>Documentation on functionality will be provided and training will</p>	<p>\$75,000 / (maximum amount for all enhancements combined, upon written approval of State)</p>
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be provided when necessary.	
State Identified Issue Support – Attachment 3; Section 3.2.1.3.a. – Test environment for RMS	
A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of installation and configuration of one additional testing environment. Documentation on functionality will be provided and training will be provided when necessary.	\$6,000 / (one-time charge upon written approval of State)
State Reporting Tool (with access to State PMP User Application data) Prescriber Report – Attachment 3; Section BR22.0.0.	
A single, one-time fixed payment to provide the Prescriber Report product (BR22.0.0) to the State shall be made upon completion and the State's written approval and acceptance of product development, installation and configuration. Documentation on functionality will be provided and training will be provided when necessary.	\$75,000 / (one-time charge upon written approval of State)
A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of enhancements to the Prescriber Report product (BR22.0.0). The total cost for all enhancements to the Prescriber Report product during the term of this Contract shall not exceed \$7,500. Documentation on functionality will be provided and training will be provided when necessary.	\$7,500 / (maximum amount for all enhancements combined, upon written approval of State)
OTECH Platform Annual Fees	
Payments for OTECH software, licenses, system maintenance, support, goods and services shall be made monthly as listed below during the period in which Apriss provides current functionality as described in Contract Section A.3. Payment may be prorated if the State migrates off the OTECH Platform.	
PMP software, licenses, goods and services, system maintenance and support of the Databases, collection of data from Dispensers, cleansing of data collected, data archiving, data reporting, loading of that data to the CSMD, system maintenance and support and PMPi interface support. Payments to begin thirty (30) days after Contract Effective Date.	\$42,696.25 / (monthly)
Payment shall be made for maintenance and support of the additional test environment as described in Attachment 3, Section 3.2.1.3.a., after the State's written approval and acceptance of the test environment's installation and configuration. This amount may be prorated to coincide with the ending term date of this Contract.	\$500 / (monthly)
Payment shall be made for maintenance and support of the Prescriber Report product as described in Attachment 3, Section BR22.0.0., after the State's written approval and acceptance of product installation and configuration. This amount may be prorated to coincide with the ending term date of this Contract.	\$4,166.66 / (monthly)

Penetration Test and HISTRUST Certification	
A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of third party vendor's penetration test of the Contractor's OTECH application.	\$41,000 / (one-time charge upon written approval of State)
A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of the HISTRUST certification of the Contractor's OTECH application in year 1 of this Contract.	\$96,000 / (one-time charge upon written approval of State)
A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of the HISTRUST certification of the Contractor's OTECH application in year 3 of this Contract.	\$96,000 / (one-time charge upon written approval of State)
A single, one-time fixed payment shall be made upon completion and the State's written approval and acceptance of the HISTRUST certification of the Contractor's OTECH application in year 5 of this Contract.	\$96,000 / (one-time charge upon written approval of State)

C.4. The Contractor shall be compensated for changes requested and performed pursuant to Contract Section A.10, without a formal amendment of this Contract based upon the payment rates detailed in the schedule below and as agreed pursuant to Section A.10, PROVIDED THAT compensation to the Contractor for such "change order" work shall not exceed SEVEN PERCENT (7%) of the sum of milestone payment rates detailed in Section C.3.b., above (which is the total cost for the milestones and associated deliverables set forth in Contract Sections A.3. through A.12.). If, at any point during the Term, the State determines that the cost of necessary "change order" work would exceed the maximum amount, the State may amend this Contract to address the need.

Service Description	Amount (per compensable increment)
Change Order	\$ 175 per hour
NOTE: The Contractor shall not be compensated for travel time to the primary location of service provision.	

C.5. Travel Compensation. The Contractor shall not be compensated or reimbursed for travel time, travel expenses, meals, or lodging.

C.6. Invoice Requirements. The Contractor shall invoice the State only for goods delivered and accepted by the State or services satisfactorily provided at the amounts stipulated in Section C.3., above. Contractor shall submit invoices and necessary supporting documentation, no more frequently than once a month, and no later than thirty (30) days after goods or services have been provided to the following address:

TN Department of Health
6th floor, Andrew Johnson Building
Carole Sumner
Information Technology Services Division
710 James Robertson Parkway, 6th floor
Nashville, TN 37243

- a. Each invoice, on Contractor's letterhead, shall clearly and accurately detail all of the following information (calculations must be extended and totaled correctly):

- (1) Invoice number (assigned by the Contractor);
- (2) Invoice date;
- (3) Contract number (assigned by the State);
- (4) Customer account name: State of TN Department of Health, ITSD
- (5) Customer account number (assigned by the Contractor to the above-referenced Customer);
- (6) Contractor name;
- (7) Contractor Tennessee Edison registration ID number;
- (8) Contractor contact for invoice questions (name, phone, or email);
- (9) Contractor remittance address;
- (10) Description of delivered goods or services provided and invoiced, including identifying information as applicable;
- (11) Number of delivered or completed units, increments, hours, or days as applicable, of each good or service invoiced;
- (12) Applicable payment methodology (as stipulated in Section C.3.) of each good or service invoiced;
- (13) Amount due for each compensable unit of good or service; and
- (14) Total amount due for the invoice period.

b. Contractor's invoices shall:

- (1) Only include charges for goods delivered or services provided as described in Section A and in accordance with payment terms and conditions set forth in Section C;
- (2) Only be submitted for goods delivered or services completed and shall not include any charge for future goods to be delivered or services to be performed;
- (3) Not include Contractor's taxes, which includes without limitation Contractor's sales and use tax, excise taxes, franchise taxes, real or personal property taxes, or income taxes; and
- (4) Include shipping or delivery charges only as authorized in this Contract.

c. The timeframe for payment (or any discounts) begins only when the State is in receipt of an invoice that meets the minimum requirements of this Section C.5.

C.7. Payment of Invoice. A payment by the State shall not prejudice the State's right to object to or question any payment, invoice, or other matter. A payment by the State shall not be construed as acceptance of goods delivered, any part of the services provided, or as approval of any amount invoiced.

C.8. Invoice Reductions. The Contractor's invoice shall be subject to reduction for amounts included in any invoice or payment that is determined by the State, on the basis of audits conducted in accordance with the terms of this Contract, to not constitute proper compensation for goods delivered or services provided. If a remediation plan is developed, implemented, and found to be acceptable by the State, invoice reductions shall not be invoked.

C.9. Deductions. The State reserves the right to deduct from amounts, which are or shall become due and payable to the Contractor under this or any contract between the Contractor and the State of Tennessee, any amounts that are or shall become due and payable to the State of Tennessee by the Contractor.

C.10. Prerequisite Documentation. The Contractor shall not invoice the State under this Contract until the State has received the following, properly completed documentation.

- a. The Contractor shall complete, sign, and present to the State the "Authorization Agreement for Automatic Deposit Form" provided by the State. By doing so, the Contractor acknowledges and agrees that, once this form is received by the State, payments to the Contractor, under this or any other contract the Contractor has with the State of Tennessee, may be made by ACH; and

- b. The Contractor shall complete, sign, and return to the State the State-provided W-9 form. The taxpayer identification number on the W-9 form must be the same as the Contractor's Federal Employer Identification Number or Social Security Number referenced in the Contractor's Edison registration information.

D. MANDATORY TERMS AND CONDITIONS:

- D.1. Required Approvals. The State is not bound by this Contract until it is duly approved by the Parties and all appropriate State officials in accordance with applicable Tennessee laws and regulations. Depending upon the specifics of this Contract, this may include approvals by the Commissioner of Finance and Administration, the Commissioner of Human Resources, the Comptroller of the Treasury, and the Chief Procurement Officer. Approvals shall be evidenced by a signature or electronic approval.
- D.2. Communications and Contacts. All instructions, notices, consents, demands, or other communications required or contemplated by this Contract shall be in writing and shall be made by certified, first class mail, return receipt requested and postage prepaid, by overnight courier service with an asset tracking system, or by email or facsimile transmission with recipient confirmation. All communications, regardless of method of transmission, shall be addressed to the respective Party at the appropriate mailing address, facsimile number, or email address as stated below or any other address provided in writing by a Party.

The State:

General

David Bess, Pharm D
Director Controlled Substance Monitoring Database
665 Mainstream Drive, 2nd Floor
Nashville, TN 37243
David.Bess@tn.gov
Telephone # (615) 253-1305

Mike Newman, CIO
Tennessee Department of Health
Andrew Johnson Tower – 6th Floor
710 James Robertson Parkway
Nashville, TN 37243
Mike.Newman@tn.gov
Telephone # (615) 253-5417

CSMD Administrator

665 Mainstream Drive, 2nd Floor
Nashville, TN 37243
CSMD.Admin@tn.gov
Telephone # (615) 253-1305

Technical Matters

Marsha Sumner, Deputy CIO
Tennessee Department of Health – Information Technology Services Division
Andrew Johnson Tower – 6th Floor
710 James Robertson Parkway
Nashville, TN 37243
Marsha.Sumner@tn.gov
Telephone # (615) 741-7176

Contract Administration

Carole Sumner, Director – Administrative Services

Tennessee Department of Health – Information Technology Services Division
Andrew Johnson Tower – 6th Floor
710 James Robertson Parkway
Nashville, TN 37243
Carole.Sumner@tn.gov
Telephone # (615) 532-0033

The Contractor:

Jacob Cooper, Client Relationship Manager
Appriss Inc.
10401 Linn Station Rd Ste 200, Louisville, KY 40223
jcooper@appriss.com
Telephone # (502) 815-5656
FAX # (502) 815-5696

All instructions, notices, consents, demands, or other communications shall be considered effective upon receipt or recipient confirmation as may be required.

- D.3. Modification and Amendment. This Contract may be modified only by a written amendment signed by all Parties and approved by all applicable State officials.
- D.4. Subject to Funds Availability. The Contract is subject to the appropriation and availability of State or federal funds. In the event that the funds are not appropriated or are otherwise unavailable, the State reserves the right to terminate this Contract upon written notice to the Contractor. The State's exercise of its right to terminate this Contract shall not constitute a breach of Contract by the State. Upon receipt of the written notice, the Contractor shall cease all work associated with the Contract. If the State terminates this Contract due to lack of funds availability, the Contractor shall be entitled to compensation for all conforming goods requested and accepted by the State and for all satisfactory and authorized services completed as of the termination date. Should the State exercise its right to terminate this Contract due to unavailability of funds, the Contractor shall have no right to recover from the State any actual, general, special, incidental, consequential, or any other damages of any description or amount.
- D.5. Termination for Convenience. The State may terminate this Contract for convenience without cause and for any reason. The State shall give the Contractor at least thirty (30) days written notice before the termination date. The Contractor shall be entitled to compensation for all conforming goods delivered and accepted by the State or for satisfactory, authorized services completed as of the termination date. In no event shall the State be liable to the Contractor for compensation for any goods neither requested nor accepted by the State or for any services neither requested by the State nor satisfactorily performed by the Contractor. In no event shall the State's exercise of its right to terminate this Contract for convenience relieve the Contractor of any liability to the State for any damages or claims arising under this Contract.
- D.6. Termination for Cause. If a Party ("Breaching Party") fails to properly perform its obligations under this Contract, or if a Party materially violates any terms of this Contract ("Breach Condition"), the other Party ("Non-breaching Party") may provide written notice to the Breaching Party specifying the Breach Condition. If within thirty (30) days of notice, the Breaching Party has not cured the Breach Condition, the Non-breaching Party may terminate the Contract. In the event the Non-breaching Party is the State, the State may withhold payments in excess of compensation for completed services or provided goods. The Breaching Party shall not be relieved of liability to the Non-breaching Party for damages sustained by virtue of any breach of this Contract, and the Non-breaching Party may seek other remedies allowed at law or in equity for breach of this Contract.
- D.7. Assignment and Subcontracting. The Contractor shall not assign this Contract or enter into a subcontract for any of the goods or services provided under this Contract without the prior written approval of the State. Notwithstanding any use of the approved subcontractors, the Contractor

shall be the prime contractor and responsible for compliance with all terms and conditions of this Contract. The State reserves the right to request additional information or impose additional terms and conditions before approving an assignment of this Contract in whole or in part or the use of subcontractors in fulfilling the Contractor's obligations under this Contract.

- D.8. Conflicts of Interest. The Contractor warrants that no part of the Contractor's compensation shall be paid directly or indirectly to an employee or official of the State of Tennessee as wages, compensation, or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to the Contractor in connection with any work contemplated or performed under this Contract.

The Contractor acknowledges, understands, and agrees that this Contract shall be null and void if the Contractor is, or within the past six (6) months has been, an employee of the State of Tennessee or if the Contractor is an entity in which a controlling interest is held by an individual who is, or within the past six (6) months has been, an employee of the State of Tennessee.

- D.9. Nondiscrimination. The Contractor hereby agrees, warrants, and assures that no person shall be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination in the performance of this Contract or in the employment practices of the Contractor on the grounds of handicap or disability, age, race, creed, color, religion, sex, national origin, or any other classification protected by federal or state law. The Contractor shall, upon request, show proof of nondiscrimination and shall post in conspicuous places, available to all employees and applicants, notices of nondiscrimination.

- D.10. Prohibition of Illegal Immigrants. The requirements of Tenn. Code Ann. § 12-3-309 addressing the use of illegal immigrants in the performance of any contract to supply goods or services to the state of Tennessee, shall be a material provision of this Contract, a breach of which shall be grounds for monetary and other penalties, up to and including termination of this Contract.

- a. The Contractor agrees that the Contractor shall not knowingly utilize the services of an illegal immigrant in the performance of this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant in the performance of this Contract. The Contractor shall reaffirm this attestation, in writing, by submitting to the State a completed and signed copy of the document at Attachment 1, semi-annually during the Term. If the Contractor is a party to more than one contract with the State, the Contractor may submit one attestation that applies to all contracts with the State. All Contractor attestations shall be maintained by the Contractor and made available to State officials upon request.
- b. Prior to the use of any subcontractor in the performance of this Contract, and semi-annually thereafter, during the Term, the Contractor shall obtain and retain a current, written attestation that the subcontractor shall not knowingly utilize the services of an illegal immigrant to perform work under this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant to perform work under this Contract. Attestations obtained from subcontractors shall be maintained by the Contractor and made available to State officials upon request.
- c. The Contractor shall maintain records for all personnel used in the performance of this Contract. Contractor's records shall be subject to review and random inspection at any reasonable time upon reasonable notice by the State.
- d. The Contractor understands and agrees that failure to comply with this section will be subject to the sanctions of Tenn. Code Ann. § 12-3-309 for acts or omissions occurring after its effective date.
- e. For purposes of this Contract, "illegal immigrant" shall be defined as any person who is not: (i) a United States citizen; (ii) a Lawful Permanent Resident; (iii) a person whose physical presence in the United States is authorized; (iv) allowed by the federal Department of Homeland Security and who, under federal immigration laws or

regulations, is authorized to be employed in the U.S.; or (v) is otherwise authorized to provide services under the Contract.

- D.11. Records. The Contractor shall maintain documentation for all charges under this Contract. The books, records, and documents of the Contractor, for work performed or money received under this Contract, shall be maintained for a period of five (5) full years from the date of the final payment and shall be subject to audit at any reasonable time and upon reasonable notice by the State, the Comptroller of the Treasury, or their duly appointed representatives. The financial statements shall be prepared in accordance with generally accepted accounting principles.
- D.12. Monitoring. The Contractor's activities conducted and records maintained pursuant to this Contract shall be subject to monitoring and evaluation by the State, the Comptroller of the Treasury, or their duly appointed representatives.
- D.13. Progress Reports. The Contractor shall submit brief, periodic, progress reports to the State as requested.
- D.14. Strict Performance. Failure by any Party to this Contract to require, in any one or more cases, the strict performance of any of the terms, covenants, conditions, or provisions of this Contract shall not be construed as a waiver or relinquishment of any term, covenant, condition, or provision. No term or condition of this Contract shall be held to be waived, modified, or deleted except by a written amendment signed by the Parties.
- D.15. Independent Contractor. The Parties shall not act as employees, partners, joint venturers, or associates of one another. The Parties are independent contracting entities. Nothing in this Contract shall be construed to create an employer/employee relationship or to allow either Party to exercise control or direction over the manner or method by which the other transacts its business affairs or provides its usual services. The employees or agents of one Party are not employees or agents of the other Party.
- D.16. Patient Protection and Affordable Care Act. The Contractor agrees that it will be responsible for compliance with the Patient Protection and Affordable Care Act ("PPACA") with respect to itself and its employees, including any obligation to report health insurance coverage, provide health insurance coverage, or pay any financial assessment, tax, or penalty for not providing health insurance. The Contractor shall indemnify the State and hold it harmless for any costs to the State arising from Contractor's failure to fulfill its PPACA responsibilities for itself or its employees.
- D.17. Limitation of State's Liability. The State shall have no liability except as specifically provided in this Contract. In no event will the State be liable to the Contractor or any other party for any lost revenues, lost profits, loss of business, decrease in the value of any securities or cash position, time, goodwill, or any indirect, special, incidental, punitive, exemplary or consequential damages of any nature, whether based on warranty, contract, statute, regulation, tort (including but not limited to negligence), or any other legal theory that may arise under this Contract or otherwise. The State's total liability under this Contract (including any exhibits, schedules, amendments or other attachments to the Contract) or otherwise shall under no circumstances exceed the Maximum Liability. This limitation of liability is cumulative and not per incident.
- D.18. Limitation of Contractor's Liability. In accordance with Tenn. Code Ann. § 12-3-701, the Contractor's liability for all claims arising under this Contract shall be limited to an amount equal to two (2) times the Maximum Liability amount detailed in Section C.1. and as may be amended, PROVIDED THAT in no event shall this Section limit the liability of the Contractor for: (i) intellectual property or any Contractor indemnity obligations for infringement for third-party intellectual property rights; (ii) any claims covered by any specific provision in the Contract providing for liquidated damages; or (iii) any claims for intentional torts, criminal acts, fraudulent conduct, or acts or omissions that result in personal injuries or death.
- D.19. Hold Harmless. The Contractor agrees to indemnify and hold harmless the State of Tennessee as well as its officers, agents, and employees from and against any and all claims, liabilities,

losses, and causes of action which may arise, accrue, or result to any person, firm, corporation, or other entity which may be injured or damaged as a result of acts, omissions, or negligence on the part of the Contractor, its employees, or any person acting for or on its or their behalf relating to this Contract. The Contractor further agrees it shall be liable for the reasonable cost of attorneys for the State to enforce the terms of this Contract.

In the event of any suit or claim, the Parties shall give each other immediate notice and provide all necessary assistance to respond. The failure of the State to give notice shall only relieve the Contractor of its obligations under this Section to the extent that the Contractor can demonstrate actual prejudice arising from the failure to give notice. This Section shall not grant the Contractor, through its attorneys, the right to represent the State in any legal matter, as the right to represent the State is governed by Tenn. Code Ann. § 8-6-106.

- D.20. HIPAA Compliance. The State and Contractor shall comply with obligations under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), Health Information Technology for Economic and Clinical Health (“HITECH”) Act and any other relevant laws and regulations regarding privacy (collectively the “Privacy Rules”). The obligations set forth in this Section shall survive the termination of this Contract.
- a. Contractor warrants to the State that it is familiar with the requirements of the Privacy Rules, and will comply with all applicable requirements in the course of this Contract.
 - b. Contractor warrants that it will cooperate with the State, including cooperation and coordination with State privacy officials and other compliance officers required by the Privacy Rules, in the course of performance of the Contract so that both parties will be in compliance with the Privacy Rules.
 - c. The State and the Contractor will sign documents, including but not limited to business associate agreements, as required by the Privacy Rules and that are reasonably necessary to keep the State and Contractor in compliance with the Privacy Rules. This provision shall not apply if information received or delivered by the parties under this Contract is NOT “protected health information” as defined by the Privacy Rules, or if the Privacy Rules permit the parties to receive or deliver the information without entering into a business associate agreement or signing another document.
 - d. The Contractor will indemnify the State and hold it harmless for any violation by the Contractor or its subcontractors of the Privacy Rules. This includes the costs of responding to a breach of protected health information, the costs of responding to a government enforcement action related to the breach, and any fines, penalties, or damages paid by the State because of the violation.
- D.21. Tennessee Consolidated Retirement System. Subject to statutory exceptions contained in Tenn. Code Ann. §§ 8-36-801, *et seq.*, the law governing the Tennessee Consolidated Retirement System (“TCRS”), provides that if a retired member of TCRS, or of any superseded system administered by TCRS, or of any local retirement fund established under Tenn. Code Ann. §§ 8-35-101, *et seq.*, accepts State employment, the member's retirement allowance is suspended during the period of the employment. Accordingly and notwithstanding any provision of this Contract to the contrary, the Contractor agrees that if it is later determined that the true nature of the working relationship between the Contractor and the State under this Contract is that of “employee/employer” and not that of an independent contractor, the Contractor, if a retired member of TCRS, may be required to repay to TCRS the amount of retirement benefits the Contractor received from TCRS during the Term.
- D.22. Tennessee Department of Revenue Registration. The Contractor shall comply with all applicable registration requirements contained in Tenn. Code Ann. §§ 67-6-601 – 608. Compliance with applicable registration requirements is a material requirement of this Contract.
- D.23. Debarment and Suspension. The Contractor certifies, to the best of its knowledge and belief, that it, its current and future principals, its current and future subcontractors and their principals:

- a. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal or state department or agency;
- b. have not within a three (3) year period preceding this Contract been convicted of, or had a civil judgment rendered against them from commission of fraud, or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or grant under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statements, or receiving stolen property;
- c. are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses detailed in section b. of this certification; and
- d. have not within a three (3) year period preceding this Contract had one or more public transactions (federal, state, or local) terminated for cause or default.

The Contractor shall provide immediate written notice to the State if at any time it learns that there was an earlier failure to disclose information or that due to changed circumstances, its principals or the principals of its subcontractors are excluded, disqualified, or presently fall under any of the prohibitions of sections a-d.

- D.24. Force Majeure. "Force Majeure Event" means fire, flood, earthquake, elements of nature or acts of God, wars, riots, civil disorders, rebellions or revolutions, acts of terrorism or any other similar cause beyond the reasonable control of the Party except to the extent that the non-performing Party is at fault in failing to prevent or causing the default or delay, and provided that the default or delay cannot reasonably be circumvented by the non-performing Party through the use of alternate sources, workaround plans or other means. A strike, lockout or labor dispute shall not excuse either Party from its obligations under this Contract. Except as set forth in this Section, any failure or delay by a Party in the performance of its obligations under this Contract arising from a Force Majeure Event is not a default under this Contract or grounds for termination. The non-performing Party will be excused from performing those obligations directly affected by the Force Majeure Event, and only for as long as the Force Majeure Event continues, provided that the Party continues to use diligent, good faith efforts to resume performance without delay. The occurrence of a Force Majeure Event affecting Contractor's representatives, suppliers, subcontractors, customers or business apart from this Contract is not a Force Majeure Event under this Contract. Contractor will promptly notify the State of any delay caused by a Force Majeure Event (to be confirmed in a written notice to the State within one (1) day of the inception of the delay) that a Force Majeure Event has occurred, and will describe in reasonable detail the nature of the Force Majeure Event. If any Force Majeure Event results in a delay in Contractor's performance longer than forty-eight (48) hours, the State may, upon notice to Contractor: (a) cease payment of the fees until Contractor resumes performance of the affected obligations; or (b) immediately terminate this Contract or any purchase order, in whole or in part, without further payment except for fees then due and payable. Contractor will not increase its charges under this Contract or charge the State any fees other than those provided for in this Contract as the result of a Force Majeure Event.
- D.25. State and Federal Compliance. The Contractor shall comply with all applicable state and federal laws and regulations in the performance of this Contract.
- D.26. Governing Law. This Contract shall be governed by and construed in accordance with the laws of the State of Tennessee. The Tennessee Claims Commission or the state or federal courts in Tennessee shall be the venue for all claims, disputes, or disagreements arising under this Contract. The Contractor acknowledges and agrees that any rights, claims, or remedies against the State of Tennessee or its employees arising under this Contract shall be subject to and limited to those rights and remedies available under Tenn. Code Ann. §§ 9-8-101 - 407.

- D.27. Entire Agreement. This Contract is complete and contains the entire understanding between the Parties relating to its subject matter, including all the terms and conditions of the Parties' agreement. This Contract supersedes any and all prior understandings, representations, negotiations, and agreements between the Parties, whether written or oral.
- D.28. Severability. If any terms and conditions of this Contract are held to be invalid or unenforceable as a matter of law, the other terms and conditions of this Contract shall not be affected and shall remain in full force and effect. The terms and conditions of this Contract are severable.
- D.29. Headings. Section headings of this Contract are for reference purposes only and shall not be construed as part of this Contract.
- D.30. Incorporation of Additional Documents. Each of the following documents is included as a part of this Contract by reference. In the event of a discrepancy or ambiguity regarding the Contractor's duties, responsibilities, and performance under this Contract, these items shall govern in order of precedence below:
- a. any amendment to this Contract, with the latter in time controlling over any earlier amendments;
 - b. this Contract with any attachments or exhibits (excluding the items listed at subsections c. through f., below);
 - (1) Attachment 1 – Attestation RE Personnel used in Contract Performance
 - (2) Attachment 2 – Business Associate Agreement (BAA)
 - (3) Attachment 3 – Business Requirements Document
 - (4) Attachment 4 – Current Functionality
 - c. any clarifications of or addenda to the Contractor's proposal seeking this Contract;
 - d. the State solicitation, as may be amended, requesting responses in competition for this Contract;
 - e. any technical specifications provided to proposers during the procurement process to award this Contract; and
 - f. the Contractor's response seeking this Contract.
- D.31. Iran Divestment Act. The requirements of Tenn. Code Ann. § 12-12-101 et.seq., addressing contracting with persons as defined at T.C.A. §12-12-103(5) that engage in investment activities in Iran, shall be a material provision of this Contract. The Contractor certifies, under penalty of perjury, that to the best of its knowledge and belief that it is not on the list created pursuant to Tenn. Code Ann. § 12-12-106.
- D.32. Insurance. Contractor shall maintain insurance coverage as specified in this Section. The State reserves the right to amend or require additional insurance coverage, coverage amounts, and endorsements required under this Contract. Contractor's failure to maintain or submit evidence of insurance coverage, as required, is a material breach of this Contract. If Contractor loses insurance coverage, fails to renew coverage, or for any reason becomes uninsured during the Term, Contractor shall immediately notify the State. All insurance companies providing coverage must be: (a) acceptable to the State; (b) authorized by the Tennessee Department of Commerce and Insurance ("TDCI"); and (c) rated A- / VII or better by A.M. Best. All coverage must be on a primary basis and noncontributory with any other insurance or self-insurance carried by the State. Contractor agrees to name the State as an additional insured on any insurance policy with the exception of workers' compensation (employer liability) and professional liability (errors and omissions) insurance. All policies must contain an endorsement for a waiver of subrogation in favor of the State. Any deductible over fifty thousand dollars (\$50,000) must be approved by the State. The deductible and any premiums are the Contractor's sole responsibility. The Contractor agrees that the insurance requirements specified in this Section do not reduce any liability the Contractor has assumed under this Contract including any indemnification or hold harmless requirements.

To achieve the required coverage amounts, a combination of an otherwise deficient specific policy and an umbrella policy with an aggregate meeting or exceeding the required coverage

amounts is acceptable. For example: If the required policy limit under this Contract is for two million dollars (\$2,000,000) in coverage, acceptable coverage would include a specific policy covering one million dollars (\$1,000,000) combined with an umbrella policy for an additional one million dollars (\$1,000,000). If the deficient underlying policy is for a coverage area without aggregate limits (generally Automobile Liability and Employers' Liability Accident), Contractor shall provide a copy of the umbrella insurance policy documents to ensure that no aggregate limit applies to the umbrella policy for that coverage area.

Contractor shall provide the State a certificate of insurance ("COI") evidencing the coverages and amounts specified in this Section. The COI must be on a form approved by the TDCI (standard ACORD form preferred). The COI must list each insurer's National Association of Insurance Commissioners (NAIC) number and be signed by an authorized representative of the insurer. The COI must list the State of Tennessee – CPO Risk Manager, 312 Rosa L. Parks Ave., 3rd floor Central Procurement Office, Nashville, TN 37243 as the certificate holder. Contractor shall provide the COI ten (10) business days prior to the Effective Date and again thirty (30) calendar days before renewal or replacement of coverage. Contractor shall provide the State evidence that all subcontractors maintain the required insurance or that subcontractors are included under the Contractor's policy. At any time, the State may require Contractor to provide a valid COI. The parties agree that failure to provide evidence of insurance coverage as required is a material breach of this Contract. If Contractor self-insures, then a COI will not be required to prove coverage. Instead Contractor shall provide a certificate of self-insurance or a letter, on Contractor's letterhead, detailing its coverage, policy amounts, and proof of funds to reasonably cover such expenses.

The State agrees that it shall give written notice to the Contractor as soon as practicable after the State becomes aware of any claim asserted or made against the State, but in no event later than thirty (30) calendar days after the State becomes aware of such claim. The failure of the State to give notice shall only relieve the Contractor of its obligations under this Section to the extent that the Contractor can demonstrate actual prejudice arising from the failure to give notice. This Section shall not grant the Contractor or its insurer, through its attorneys, the right to represent the State in any legal matter, as the right to represent the State is governed by Tenn. Code Ann. § 8-6-106.

The Contractor shall obtain and maintain, at a minimum, the following insurance coverages and policy limits.

a. Commercial General Liability Insurance

- 1) The Contractor shall maintain commercial general liability insurance, which shall be written on an Insurance Services Office, Inc. (also known as ISO) occurrence form (or a substitute form providing equivalent coverage) and shall cover liability arising from property damage, premises/operations, independent contractors, contractual liability, completed operations/products, personal and advertising injury, and liability assumed under an insured contract (including the tort liability of another assumed in a business contract).

The Contractor shall maintain bodily injury/property damage with a combined single limit not less than one million dollars (\$1,000,000) per occurrence and two million dollars (\$2,000,000) aggregate for bodily injury and property damage, including products and completed operations coverage with an aggregate limit of at least two million dollars (\$2,000,000).

b. Workers' Compensation and Employer Liability Insurance

- 1) For Contractors statutorily required to carry workers' compensation and employer liability insurance, the Contractor shall maintain:

- i. Workers' compensation in an amount not less than one million dollars (\$1,000,000) including employer liability of one million dollars (\$1,000,000) per accident for bodily injury by accident, one million dollars (\$1,000,000) policy limit by disease, and one million dollars (\$1,000,000) per employee for bodily injury by disease.
 - 2) If the Contractor certifies that it is exempt from the requirements of Tenn. Code Ann. §§ 50-6-101 – 103, then the Contractor shall furnish written proof of such exemption for one or more of the following reasons:
 - i. The Contractor employs fewer than five (5) employees;
 - ii. The Contractor is a sole proprietor;
 - iii. The Contractor is in the construction business or trades with no employees;
 - iv. The Contractor is in the coal mining industry with no employees;
 - v. The Contractor is a state or local government; or
 - vi. The Contractor self-insures its workers' compensation and is in compliance with the TDCI rules and Tenn. Code Ann. § 50-6-405.
- c. Automobile Liability Insurance
- 1) The Contractor shall maintain automobile liability insurance which shall cover liability arising out of any automobile (including owned, leased, hired, and non-owned automobiles).
 - 2) The Contractor shall maintain bodily injury/property damage with a limit not less than one million dollars (\$1,000,000) per occurrence or combined single limit.

D.33. Major Procurement Contract Sales and Use Tax. Pursuant to Tenn. Code Ann. § 4-39-102 and to the extent applicable, the Contractor and the Contractor's subcontractors shall remit sales and use taxes on the sales of goods or services that are made by the Contractor or the Contractor's subcontractors and that are subject to tax.

D.34. Equal Opportunity. The Contractor agrees as follows:

- a. The Contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, gender identity, or national origin. The Contractor will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, sex, sexual orientation, gender identity, or national origin. Such action shall include, but not be limited to the following:
 - (1) Employment, upgrading, demotion, or transfer, recruitment or recruitment advertising;
 - (2) Layoff or termination;
 - (3) Rates of pay or other forms of compensation; and
 - (4) Selection for training, including apprenticeship.

The Contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of this nondiscrimination clause.

- b. The Contractor will, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, state that all qualified applicants will receive considerations for employment without regard to race, color, religion, sex, sexual orientation, gender identity, or national origin.
- c. If the State approves any subcontract, the subcontract shall include paragraphs (a) and (b) above.

In addition, to the extent applicable the Contractor agrees to comply with 41 C.F. R. § 60-1.4, as that section is amended from time to time during the term.

E. SPECIAL TERMS AND CONDITIONS:

- E.1. Conflicting Terms and Conditions. Should any of these special terms and conditions conflict with any other terms and conditions of this Contract, the special terms and conditions shall be subordinate to the Contract's other terms and conditions.
- E.2. Confidentiality of Records. Strict standards of confidentiality of records and information shall be maintained in accordance with applicable state and federal law. All material and information, regardless of form, medium or method of communication, provided to the Contractor by the State or acquired by the Contractor on behalf of the State that is regarded as confidential under state or federal law shall be regarded as "Confidential Information." Nothing in this Section shall permit Contractor to disclose any Confidential Information, regardless of whether it has been disclosed or made available to the Contractor due to intentional or negligent actions or inactions of agents of the State or third parties. Confidential Information shall not be disclosed except as required or permitted under state or federal law. Contractor shall take all necessary steps to safeguard the confidentiality of such material or information in conformance with applicable state and federal law.

The obligations set forth in this Section shall survive the termination of this Contract.

- E.3. Additional lines, items, or options. At its sole discretion, the State may make written requests to the Contractor to add lines that are needed and within the Scope but were not included in the original Contract. Such lines will be added to the Contract through a Memorandum of Understanding ("MOU"), not an amendment.
 - a. After the Contractor receives a written request to add lines, the Contractor shall have ten (10) business days to respond with a written proposal. The Contractor's written proposal shall include:
 - (1) The effect, if any, of adding the lines on the other goods or services required under the Contract;
 - (2) Any pricing related to the new lines;
 - (3) The expected effective date for the availability of the new lines
 - b. The State may negotiate the terms of the Contractor's proposal by requesting revisions to the proposal.
 - c. To indicate acceptance of a proposal, the State will sign it. The signed proposal shall constitute a MOU between the Parties, and the lines shall be incorporated into the Contract as if set forth verbatim.
 - d. Only after a MOU has been executed shall the Contractor perform or deliver the new lines.
- E.4. Intellectual Property Indemnity. The Contractor agrees to indemnify and hold harmless the State of Tennessee as well as its officers, agents, and employees from and against any and all claims or suits which may be brought against the State concerning or arising out of any claim of an alleged patent, copyright, trade secret or other intellectual property infringement. In any such claim or action brought against the State, the Contractor shall satisfy and indemnify the State for the amount of any settlement or final judgment, and the Contractor shall be responsible for all

legal or other fees or expenses incurred by the State arising from any such claim. The State shall give the Contractor notice of any such claim or suit, however, the failure of the State to give such notice shall only relieve Contractor of its obligations under this Section to the extent Contractor can demonstrate actual prejudice arising from the State's failure to give notice. This Section shall not grant the Contractor, through its attorneys, the right to represent the State of Tennessee in any legal matter, as provided in Tenn. Code Ann. § 8-6-106.

- E.5. Software License Warranty. Contractor grants a license to the State to use all software provided under this Contract in the course of the State's business and purposes.
- E.6. Software Support and Maintenance Warranty. Contractor shall provide to the State all software upgrades, modifications, bug fixes, or other improvements in its software that it makes generally available to its customers.
- E.7. Contractor Hosted Services and Confidential Data.
- a. "Confidential State Data" is defined as data deemed confidential by State or Federal statute or regulation. The Contractor shall protect Confidential State Data as follows:
- (1) The Contractor shall ensure that all Confidential State Data is housed in the continental United States, inclusive of backup data.
 - (2) The Contractor shall encrypt Confidential State Data at rest and in transit using the current version of Federal Information Processing Standard ("FIPS") 140-2 validated encryption technologies.
 - (3) The Contractor's processing environment containing Confidential State Data shall be in accordance with at least one of the following security standards: (i) International Standards Organization ("ISO") 27001; (ii) Federal Risk and Authorization Management Program ("FedRAMP"); (iii) American Institute of Certified Public Accountants ("AICPA") Service Organization Controls ("SOC") 2 Type II; or (iv) Health Information Trust Alliance (HITRUST) certified. The Contractor shall provide proof of current certification annually and upon State request.
 - (4) The Contractor must comply with the State's Enterprise Information Security Policies. This document is found at the following URL: <https://www.tn.gov/content/dam/tn/finance/documents/Enterprise-Information-Security-Policies-ISO-27002-Public.pdf>.
 - (5) In the event that the operating system is an integral part of the application, the Contractor agrees to maintain Operating Systems at current, manufacturer supported versions. "Operating System" shall mean the software that supports a computer's basic functions, such as scheduling tasks, executing applications, and controlling peripherals.
 - (6) The Contractor agrees to maintain the Application so that it will run on a current, manufacturer-supported Operating System. "Application" shall mean the computer code that supports and accomplishes the State's requirements as set forth in this Contract. The Contractor shall make sure that the Application is at all times fully compatible with a manufacturer-supported Operating System; the State shall not be required to run an Operating System that is no longer supported by the manufacturer.
 - (7) If the Application requires middleware or database software, Contractor shall maintain middleware and database software versions that are at all times fully compatible with current versions of the Operating System and Application, to ensure that security vulnerabilities are not introduced.

- (8) With advance notice from the State, and no more than one (1) time per year the Contractor agrees to allow the State to perform logical audits and/or receive reports from third party audits of the facility that is hosting Confidential State Data.
 - (9) The Contractor must annually perform Penetration Tests and Vulnerability Assessments against its Processing Environment. "Processing Environment" shall mean the combination of software and hardware on which the Application runs. "Penetration Tests" shall be in the form of software attacks on the Contractor's computer system, with the purpose of discovering security weaknesses, and potentially gaining access to the computer's features and data. The "Vulnerability Assessment" shall have the goal of defining, identifying, and classifying the security holes (vulnerabilities) in the Contractor's computer, network, or communications infrastructure. The Contractor shall allow the State, at its option, to perform Penetration Tests and Vulnerability Assessments on the Contractor's Processing Environment.
- b. Business Continuity Requirements. The Contractor shall maintain set(s) of documents, instructions, and procedures which enable the Contractor to respond to accidents, disasters, emergencies, or threats without any stoppage or hindrance in its key operations ("Business Continuity Requirements"). Business Continuity Requirements shall include:
- (1) "Disaster Recovery Capabilities" refer to the actions the Contractor takes to meet the Recovery Point and Recovery Time Objectives defined below. Disaster Recovery Capabilities shall meet the following objectives:
 - i. Recovery Point Objective ("RPO"). The RPO is defined as the maximum targeted period in which data might be lost from an IT service due to a major incident: One (1) hour
 - ii. Recovery Time Objective ("RTO"). The RTO is defined as the targeted duration of time and a service level within which a business process must be restored after a disaster (or disruption) in order to avoid unacceptable consequences associated with a break in business continuity: twenty-four (24) hours
 - (2) The Contractor shall perform at least one Disaster Recovery Test every three hundred sixty-five (365) days. A "Disaster Recovery Test" shall mean the process of verifying the success of the restoration procedures that are executed after a critical IT failure or disruption occurs. The Disaster Recovery Test shall use actual State Data Sets that mirror production data, and success shall be defined as the Contractor verifying that the Contractor can meet the State's RPO and RTO requirements. A "Data Set" is defined as a collection of related sets of information that is composed of separate elements but can be manipulated as a unit by a computer. The Contractor shall provide written confirmation to the State after each Disaster Recover Test that its Disaster Recovery Capabilities meet the RPO and RTO requirements.
- c. Upon State request, the Contractor shall provide a copy of all Confidential State Data it holds. The Contractor shall provide such data on media and in a format determined by the State.
- d. Upon termination of this Contract and in consultation with the State, the Contractor shall destroy all Confidential State Data it holds (including any copies such as backups) in accordance with the current version of National Institute of Standards and Technology ("NIST") Special Publication 800-88. The Contractor shall provide a

written confirmation of destruction to the State within ten (10) business days after destruction.

- E.8. State Furnished Property. The Contractor shall be responsible for the correct use, maintenance, and protection of all articles of nonexpendable, tangible personal property furnished by the State for the Contractor's use under this Contract. Upon termination of this Contract, all property furnished by the State shall be returned to the State in the same condition as when received, less reasonable wear and tear. Should the property be destroyed, lost, or stolen, the Contractor shall be responsible to the State for the fair market value of the property at the time of loss.
- E.9. Lobbying. The Contractor certifies, to the best of its knowledge and belief, that:
- a. No federally appropriated funds have been paid or will be paid, by or on behalf of the Contractor, to any person for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
 - b. If any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with any contract, grant, loan, or cooperative agreement, the Contractor shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
 - c. The Contractor shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into and is a prerequisite for making or entering into this transaction imposed by 31 U.S.C. § 1352.

- E.10. Personally Identifiable Information. While performing its obligations under this Contract, Contractor may have access to Personally Identifiable Information held by the State ("PII"). For the purposes of this Contract, "PII" includes "Nonpublic Personal Information" as that term is defined in Title V of the Gramm-Leach-Bliley Act of 1999 or any successor federal statute, and the rules and regulations thereunder, all as may be amended or supplemented from time to time ("GLBA") and personally identifiable information and other data protected under any other applicable laws, rule or regulation of any jurisdiction relating to disclosure or use of personal information ("Privacy Laws"). Contractor agrees it shall not do or omit to do anything which would cause the State to be in breach of any Privacy Laws. Contractor shall, and shall cause its employees, agents and representatives to: (i) keep PII confidential and may use and disclose PII only as necessary to carry out those specific aspects of the purpose for which the PII was disclosed to Contractor and in accordance with this Contract, GLBA and Privacy Laws; and (ii) implement and maintain appropriate technical and organizational measures regarding information security to: (A) ensure the security and confidentiality of PII; (B) protect against any threats or hazards to the security or integrity of PII; and (C) prevent unauthorized access to or use of PII. Contractor shall immediately notify State: (1) of any disclosure or use of any PII by Contractor or any of its employees, agents and representatives in breach of this Contract; and (2) of any disclosure of any PII to Contractor or its employees, agents and representatives where the purpose of such disclosure is not known to Contractor or its employees, agents and representatives. The State reserves the right to review Contractor's policies and procedures used to maintain the security and confidentiality of PII and Contractor shall, and cause its employees, agents and representatives to, comply with all reasonable requests or directions from

the State to enable the State to verify and/or procure that Contractor is in full compliance with its obligations under this Contract in relation to PII. Upon termination or expiration of the Contract or at the State's direction at any time in its sole discretion, whichever is earlier, Contractor shall immediately return to the State any and all PII which it has received under this Contract and shall destroy all records of such PII.

The Contractor shall report to the State any instances of unauthorized access to or potential disclosure of PII in the custody or control of Contractor ("Unauthorized Disclosure") that come to the Contractor's attention. Any such report shall be made by the Contractor within twenty-four (24) hours after the Unauthorized Disclosure has come to the attention of the Contractor. Contractor shall take all necessary measures to halt any further Unauthorized Disclosures. The Contractor, at the sole discretion of the State, shall provide no cost credit monitoring services for individuals whose PII was affected by the Unauthorized Disclosure. The Contractor shall bear the cost of notification to all individuals affected by the Unauthorized Disclosure, including individual letters and public notice. The remedies set forth in this Section are not exclusive and are in addition to any claims or remedies available to this State under this Contract or otherwise available at law.

E.11. Survival. The terms, provisions, representations, and warranties contained in this Contract which by their sense and context are intended to survive the performance and termination of this Contract, shall so survive the completion of performance and termination of this Contract.

IN WITNESS WHEREOF,

APPRISS, INC.:

CONTRACTOR SIGNATURE

DATE

PRINTED NAME AND TITLE OF CONTRACTOR SIGNATORY (above)

TENNESSEE DEPARTMENT OF HEALTH:

JOHN J. DREYZEHNER, MD, MPH, FACOEM, COMMISSIONER

DATE

ATTESTATION RE PERSONNEL USED IN CONTRACT PERFORMANCE

SUBJECT CONTRACT NUMBER:	
CONTRACTOR LEGAL ENTITY NAME:	
EDISON VENDOR IDENTIFICATION NUMBER:	

The Contractor, identified above, does hereby attest, certify, warrant, and assure that the Contractor shall not knowingly utilize the services of an illegal immigrant in the performance of this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant in the performance of this Contract.

CONTRACTOR SIGNATURE

NOTICE: This attestation MUST be signed by an individual empowered to contractually bind the Contractor. Attach evidence documenting the individual's authority to contractually bind the Contractor, unless the signatory is the Contractor's chief executive or president.

PRINTED NAME AND TITLE OF SIGNATORY

DATE OF ATTESTATION

BUSINESS ASSOCIATE AGREEMENT AND SERVICE LEVEL AGREEMENT

THIS BUSINESS ASSOCIATE AGREEMENT (hereinafter agreement) is between Tennessee Department of Health (hereinafter Covered Entity) and Appriss, Inc. **CONTRACT 34310-21119** (hereinafter Business Associate). Covered Entity and Business Associate may be referred to herein individually as "Party" or collectively as "Parties."

BACKGROUND

Covered Entity acknowledges that it is subject to the Privacy Rule (45 C.F.R. Parts 160 and 164) promulgated by the United States Department of Health and Human Services pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191.

Business Associate acknowledges that effective February 17, 2010, the American Recovery and Reinvestment Act of 2009 (Pub. L.111-5), pursuant to Title XIII of Division A and Title IV of Division B, entitled the "Health Information Technology for Economic and Clinical Health" (HITECH) Act, which modifies the HIPAA Privacy and Security Rules, subjects and obligates the Business Associate to protect patient health information to the same extent and manner as the Covered Entity under the Privacy Rule (45 C.F.R. Parts 160 and 164) promulgated by the United States Department of Health and Human Services pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191. 45 C.F.R. §§ 164.308, 164.310, 164.312, and 164.316 shall apply to a business associate of a covered entity in the same manner that these sections apply to the covered entity.

In the course of executing Service Contracts, Business Associate may come into contact with, use, or disclose Protected Health Information (PHI) (defined in Section 1.7 below). Said Service Contracts are hereby incorporated by reference and shall be taken and considered as a part of this document the same as if fully set out herein. In accordance with the federal privacy regulations set forth at 45 C.F.R. Part 160 and Part 164, Subparts A and E, which require Covered Entity to have a written contract with each of its Business Associates, the Parties wish to establish satisfactory assurances that Business Associate will appropriately safeguard PHI and, therefore, execute this Agreement.

1. DEFINITIONS

- 1.1. Terms used, but not otherwise defined, in this Agreement shall have the same meaning as those terms in 45 C.F.R. §§ 160.103, 164.304, 164.501 and 164.504.
- 1.2. "Breach" shall mean the unauthorized acquisition, access, use, or disclosure of protected health information which compromises the security or privacy of the protected health information except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information. 42 U.S.C.A. § 17921.
- 1.3. "Breach of the security system" under T.C.A. § 47-18-2107 means unauthorized acquisition of unencrypted computerized data that materially compromises the security of confidentiality or integrity of personal information maintained by the information holder.
- 1.4. "Designated Record Set" shall have the meaning set out in its definition at 45 C.F.R. § 164.501.
- 1.5. "Electronic Health Record" shall have the same meaning as set forth in the HITECH Act; "Electronic Protected Health Information" shall have the same meaning as set forth in 45

- C.F.R. § 160.103, limited to the information that the Business Associate creates, receives, maintains, or transmits for or on behalf of the Covered Entity.
- 1.6. "Health Care Operations" shall have the meaning set out in its definition at 45 C.F.R. § 164.501.
 - 1.7. "Individual" shall have the same meaning as the term "individual" in 45 C.F.R. § 164.501 and shall include a person who qualifies as a personal representative in accordance with 45 C.F.R. § 164.502(g).
 - 1.8. "Information Holder" means any person or business that conducts business in this state, or any agency of the state of Tennessee or any of the political subdivisions, that owns or stores computerized data that includes personal information. T.C.A. § 47-18-2107(a)(2).
 - 1.9. "Personal Information" means an individual's first name or first initial and last name, in combination with any one (1) or more of the following data elements, when either the name or the data elements are not encrypted: social security number, drivers license number, or account number, credit or debit card number; in combination with required security code, access code, or password that would permit access to an individual's financial account. T.C.A. § 47-18-2107(a)(3)(A)
 - 1.10. "Privacy Officer" shall have the meaning as set out in its definition at 45 C.F.R. § 164.530(a) (1).
 - 1.11. "Privacy Rule" shall mean the Standards for Privacy for Individually Identifiable Health Information at 45 C.F.R. Part 160 and Part 164, subparts A and E.
 - 1.12. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 C.F.R. § 164.501, limited to the information created or received by Business Associate from or on behalf of Covered Entity.
 - 1.13. "Required By Law" shall have the same meaning as the term "required by law" in 45 C.F.R. § 164.501.
 - 1.14. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.
 - 1.15. "Security Event" shall mean an immediately reportable subset of security incidents which would include:
 - a) a suspected penetration of Business Associate's information system of which the Business Associate becomes aware but for which it is not able to verify within FORTY-EIGHT (48) HOURS (of the time the Business Associate became aware of the suspected incident) that PHI or other confidential data was not accessed, stolen, used, disclosed, modified, or destroyed;
 - b) any indication, evidence, or other security documentation that the Business Associate's network resources, including, but not limited to, software, network routers, firewalls, database and application servers, intrusion detection systems or other security appliances, may have been damaged, modified, taken over by proxy, or otherwise compromised, for which Business Associate cannot refute the indication within FORTY-EIGHT (48) HOURS of the time the Business Associate became aware of such indication;

- c) a breach of the security of the Business Associate's information system(s)(see definition 1.3 above), by unauthorized acquisition, including, but not limited to, access to or use, disclosure, modification or destruction, of unencrypted computerized data and which incident materially compromises the security, confidentiality, or integrity of PHI; and/or
- d) the unauthorized acquisition, including, but not limited to, access to or use, disclosure, modification or destruction, of unencrypted PHI or other confidential information of the covered Entity by an employee or authorized user of Business Associate's system(s) which materially compromises the security, confidentiality, or integrity of PHI or other confidential information of the Covered Entity.
- e) a security incident involving 500 or more patients shall be reported to HHS immediately and a security incident involving less than 500 patients shall be reported to HHS annually.

If data acquired (including, but not limited, to access to or use, disclosure, modification or destruction of such data) is in encrypted format but the decryption key which would allow the decoding of the data is also taken, the parties shall treat the acquisition as a breach for purposes of determining appropriate response.

- 1.16. "Security Incident" shall mean the attempt or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system.
- 1.17. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information" at 45 C.F.R. Parts 160 and 164, Subparts A and C.
- 1.18. "Services Agreement" shall mean any present or future agreements, either written or oral, between Covered Entity and Business Associate under which Business Associate provides services to the covered entity which involves the use or disclosure of Protected Health Information. The services Agreement is amended by and incorporates the terms of the business associate agreement.
- 1.19. "Unsecured Protected Health Information" is protected health information that is not rendered unusable, unreadable or indecipherable to unauthorized individuals through the use of a technology or methodology specified by the Secretary in the guidance issued under 42 U.S.C.A. § 17932(h)(2) decoding of the data is also taken, the parties shall treat the acquisition as a breach for purposes of determining appropriate response.

2. OBLIGATIONS AND ACTIVITIES OF BUSINESS ASSOCIATE (PRIVACY RULE)

- 2.1. Business Associate agrees to fully comply with the requirements under the Privacy Rule applicable to "business associates," as that term is defined in the Privacy Rule and not use or further disclose Protected Health Information other than as permitted or required by this Agreement, Service Contracts as required by law. In case of any conflict between this Agreement and Service Contracts, this Agreement shall govern.
- 2.2. Business Associate agrees to implement administrative, including policies, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of any PHI, including EPHI, that it creates, receives, maintains, or that it transmits on behalf of the covered entity to prevent use or disclosure of PHI other than as provided for by this Agreement. Said safeguards shall include, but are not limited to, requiring employees to agree to use or disclose PHI only as permitted or

required by this Agreement and taking related disciplinary actions for inappropriate use or disclosure as necessary.

- 2.3. Business Associate shall, following a breach of unsecured PHI, as defined in the HITECH Act, immediately notify the Covered Entity pursuant to the terms of 45 C.F.R. § 164.410, cooperate in the Covered Entity's analysis procedures, including risk assessment, if requested. A breach shall be treated as discovered by the Business Associate as of the first day on which such breach is known or should have been known or, by exercising reasonable diligence, would have been known to Business Associate. Business Associate will provide notification to the Covered Entity without unreasonable delay and in no event later than twenty-four (24) hours of any suspected or actual breach of security, intrusion, or unauthorized use or disclosure. Such notification will contain the elements required in 45 C.F.R. § 164.410; and
- 2.4. Business Associate shall, pursuant to the HITECH Act and its implementing regulations, comply with all additional applicable requirements of the Privacy Rule, including those contained in 45 C.F.R. §§ 164.502(e) and 164.504(e)(1)(ii), at such time as the requirements become applicable to Business Associates. Business Associate will not accept payment in exchange for PHI, subject to the exceptions contained in the HITECH Act, without a valid authorization from the applicable patient/individual. Business associate shall not engage in any communication which might be considered marketing under the HITECH Act. Further, business Associate shall, pursuant to the HITECH Act and its implementing regulations, comply with applicable requirements of the Security Rule, contained in 45 C.F.R. §§ 164.308, 164.310, 164.312 and 164.316, at such time as the requirements are applicable to Business Associates.
- 2.5. Business Associate shall within ten (10) days of a written request from the Covered Entity and its agents or subcontractors allow the Covered Entity to conduct a reasonable inspection of the facility, systems, books, records agreements, policies and procedures relating to the use, or disclosure of protected health information pursuant to this Agreement for the purpose of monitoring compliance with the terms of this Agreement.
- 2.6. Business Associate shall require any agent, including a subcontractor, to whom it provides PHI received from, created or received by, Business Associate on behalf of Covered Entity or that carries out any duties for the Business Associate involving the use, custody, disclosure, creation of, or access to PHI, to agree, by written contract with Business Associate, to the same restrictions and conditions that apply through this Agreement to Business Associate with respect to such information.
- 2.7. Business Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of PHI by Business Associate in violation of the requirements of this Agreement. Business Associate agrees to require its employees, agents, and subcontractors to immediately report, to Business Associate, any use or disclosure of Protected Health Information in violation of this Agreement, and to report to Covered Entity any use or disclosure of the PHI not provided by or agreed upon in this Agreement.
- 2.8. If Business Associate receives PHI from Covered Entity in a Designated Record Set, then Business Associate agrees to provide access, at the request of Covered Entity, to PHI in a Designated Record Set, to Covered Entity or, as directed by covered Entity, to an Individual in order to meet the requirements under 45 C.F.R. § 164.524, provided that Business Associate shall have at least thirty (30) days from Covered Entity's notice to provide access to, or deliver such information.
- 2.9. If Business Associate receives Protected Health Information from Covered Entity in a Designated Record Set, then Business Associate agrees to make any amendments to

Protected Health Information in a Designated Record Set that the Covered Entity directs or agrees to pursuant to the 45 C.F.R. §164.526 at the request of Covered Entity or an Individual, and in the time and manner designated by Covered Entity, provided that Business Associate shall have at least thirty (30) days from Covered Entity notice to make an amendment.

- 2.10. Business Associate agrees to make its internal practices, books, and records including policies and procedures and Protected Health Information, relating to the use and disclosure of PHI received from, created by or received by Business Associate on behalf of, Covered Entity available to the Covered Entity or to the Secretary of the United States Department of Health in Human Services or the Secretary's designee, in a time and manner designated by the Covered Entity or the Secretary, for purposes of determining Covered Entity's or Business Associate's compliance with the Privacy Rule.
- 2.11. Business Associate agrees to document disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosure of PHI in accordance with 45 C.F.R. §164.528.
- 2.12. Business Associate agrees to provide Covered Entity or an Individual, in time and manner designated by Covered Entity, information collected in accordance with this Agreement, to permit Covered Entity to respond to a request by an Individual for and accounting of disclosures of Protected Health Information in accordance with 45 C.F.R. § 164.528, provided that Business Associate shall have at least thirty (30) days from Covered Entity notice to provide access to, or deliver such information which shall include, at minimum, (a) date of the disclosure; (b) name of the third party to whom the Protected Health Information was disclosed and, if known, the address of the third party; (c) brief description of the disclosed information; and (d) brief explanation of the purpose and basis for such disclosure.
- 2.13. Business Associate agrees it must limit any use, disclosure, or request for use or disclosure of PHI to the minimum amount necessary to accomplish the intended purpose of the use, disclosure, or request in accordance with the requirements of the Privacy Rule. Business Associate understands and agrees that the definition of "minimum necessary" has not been established by HHS guidance and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary."
- 2.14. Business Associate agrees it must use reasonable efforts to limit any use, disclosure, or request for use or disclosure of PHI to the minimum amount necessary to accomplish the intended purpose of the use, disclosure, or request in accordance with the requirements of the Privacy Rule.
- 2.15. Covered Entity may, pursuant to the Privacy Rule, reasonably rely on any requested disclosure as the minimum necessary for the stated purpose when the information is requested by Business Associate.
- 2.16. Business Associate acknowledges that if Business Associate is also a covered entity, as defined by the Privacy Rule, Business Associate is required, independent of Business Associate's obligations under this Agreement, to comply with the Privacy Rule's minimum necessary requirements when making any request for PHI from Covered Entity.
- 2.17. Business Associate agrees to adequately and properly maintain all Protected Health Information received from, or created or received on behalf of, Covered Entity, document subsequent uses and disclosures of such information by Business Associate as may be deemed necessary and appropriate by the Covered Entity, and provide Covered Entity with reasonable access to examine and copy such records and documents during normal business hours of Business Associate.

- 2.18. Business Associate agrees that Covered Entity may at any time review Business Associate's privacy policies and procedures to determine whether they are consistent with Covered Entity's policies, procedures, and privacy practices, and shall promptly notify Business Associate in writing regarding any modifications Covered Entity may reasonably believe are needed in order to meet Covered Entities requirements.
- 2.19. If Business Associate receives a request from an individual for a copy of the individual's Protected Health Information, and the Protected Health Information is in the sole possession of the Business Associate, Business Associate will provide the requested copies to the individual and notify the Covered Entity of such action. If Business Associate receives a request for PHI in the possession of the Covered Entity, or receives a request to exercise other individual rights as set forth in the Privacy Rule, Business Associate shall notify Covered Entity of such request and forward the request to Covered Entity. Business Associate shall then assist Covered Entity in responding to the request.
- 2.20. Business Associate agrees to fully cooperate in good faith with and to assist Covered Entity in complying with the requirements of the Privacy Rule.

3. OBLIGATIONS AND ACTIVITIES OF BUSINESS ASSOCIATE (Security Rule)

- 3.1. Business Associate agrees to fully comply with the requirements under the Security Rule applicable to "business associates" as such terms is defined in the Security Rule. In case of any conflict between this Agreement and Service Contracts, this agreement shall govern.
- 3.2. Business Associate Agrees to implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality integrity, and availability of the electronic PHI that it creates, receives, maintains, or transmits on behalf of the covered entity as required by the Security Rule. This includes specifically, but not limited to, the utilization of technology commercially available at the time to the Business Associate to protect the Covered Entity's PHI against any reasonably anticipated threats or hazards The Business Associate understands that it has an affirmative duty to perform a regular review or assessment of security risks, conduct active risk management and supply best efforts to assure that only authorized persons and devices access its computing systems and information storage, and that only authorized transactions are allowed. The Business Associate will maintain appropriate documentation of its compliance with the Security Rule.
- 3.3. Business Associate shall ensure that any agent, including a subcontractor, to whom it provides electronic PHI received from, maintained, or created for Covered Entity or that carries out any duties for the Business Associate involving the use, custody, disclosure, creation of, or access to PHI supplied by Covered Entity, shall execute a bilateral contract (or the appropriate equivalent if the agent is a government entity) with Business Associate, incorporating the same restrictions and conditions in this Agreement with Business Associate regarding PHI.
- 3.4. Tennessee Consumer Notice of System Breach. Business Associate understands that the Covered Entity is an "information holder" (as may be Business Associate) under the terms of T.C.A. § 47-18-2107, and that in the event of a breach of the Business Associate's security system as defined by that statute and Definition 1.7 of this agreement, the Business Associate shall indemnify and hold the Covered Entity harmless for expenses and/or damages related to the breach. Such obligations shall include, but is not limited to, the mailed notifications to any Tennessee resident whose personal information is reasonably believed to have been acquired by an unauthorized individual.

- In the event that the Business Associate discovers circumstances requiring notification of more than a thousand (1,000) persons at one time, the person shall also notify, without unreasonable delay, all consumer reporting agencies and credit bureaus that compile and maintain files on consumers on a nationwide basis, as defined by 15 U.S.C. §1681a, of the timing distribution and content of the notices. Substitute notice as defined T.C.A. § 47-18-2107(e)(2) and (3), shall not be permitted except as approved in writing in advance by the Covered Entity. The parties agree that PHI includes data elements in addition to those included by "personal information" under T.C.A. § 47-18-2107, and agree that Business Associate's responsibilities under this paragraph shall include all PHI and PII.
- 3.5. Reporting of Security Incidents. The Business Associate shall track all security incidents as defined by HIPAA. The Business Associate shall reasonably use its own vulnerability assessment of damage potential and monitoring to define levels of Security Incidents and responses for Business Associate's operations. However, the Business Associate shall expediently notify the Covered Entity's Privacy Officer of any Security Incident which would constitute a Security Event as defined by this Agreement, including any "breach of the security of the system" under T.C.A. § 47-18-2107, in a preliminary report within two (2) business days of any unauthorized acquisition including, but not limited to, use, disclosure, modification, or destruction of PHI by an employee or otherwise authorized user of its system of which it becomes aware with a full report of the incident not less than five (5) business days of the time it became aware of the incident.
- 3.5.1 Business Associate shall identify in writing key contact persons for administration, data processing, Marketing, Information Systems and Audit Reporting within thirty (30) days of execution of this Agreement. Business Associate shall notify Covered Entity of any reduction of in-house staff persons during the term of this Agreement in writing within ten (10) business days.
- 3.6. Contact for Security Event Notice. Notification for the purposes of Sections 2.7, 3.4 and 3.5 shall be in writing made by certified mail or overnight parcel within two (2) business days of the event, with supplemental notification by facsimile and/or telephone as soon as practicable, to the designated Privacy Official of the Covered Entity in accordance to 8.5 Notices and Communications.
- 3.7. Security Compliance Review upon Request. Business Associate agrees to make its internal practices, books, and records, including policies and procedures relating to the security of electronic PHI received from, created by or received by Business Associate on behalf of Covered Entity, available to the Covered Entity or to the Secretary of the United States Department of Health in Human Services or the Secretary's designee, in a time and manner designated by the requester, for purposes of determining Covered Entity's or Business Associate's compliance with the Security Rule.
- 3.8. Cooperation in Security Compliance. Business Associate agrees to fully cooperate in good faith and to assist Covered Entity in complying with the requirements of the Security Rule.

4. PERMITTED USES AND DISCLOSURES BY BUSINESS ASSOCIATE

- 4.1. Except as otherwise limited in this Agreement, Business Associate may use or disclose PHI to perform functions, activities, or services for, or on behalf of, Covered Entity as specified in Service Contracts, provided that such use or disclosure would not violate the Privacy Rule if done by Covered Entity.
- 4.2. Except as otherwise limited in this Agreement, Business Associate may use Protected Health Information as required for Business Associate's proper management and

administration or to carry out the legal responsibilities of the Business Associate. In the event a party to this Agreement receives a subpoena, court order, or other demand for the information in this Agreement, the receiving party shall immediately inform the other party in writing concerning the demand.

- 4.3. Except as otherwise limited in this Agreement, Business Associate may disclose Protected Health Information for the proper management and administration of the Business Associate, provided that disclosures are required by law, or provided that, if Business Associate discloses any Protected Health Information to a third party for such a purpose, Business Associate shall enter into a written agreement with such third party requiring the third party to: (a) maintain the confidentiality of Protected Health Information and not to use or further disclose such information except as Required By Law or for the purpose for which it was disclosed, and (b) notify Business Associate of any instances in which it becomes aware in which the confidentiality of the Protected Health Information is breached.
- 4.4. Except as otherwise limited in this Agreement, Business Associate may use Protected Health Information to provide Data Aggregation services to Covered Entity as permitted by 42 C.F.R. § 164.504(e)(2)(l)(B).

5. OBLIGATIONS OF COVERED ENTITY

- 5.1. Covered Entity shall provide Business Associate with the notice of privacy practices that Covered Entity produces in accordance with 45 C.F.R. § 164.520, as well as any changes to such notice.
- 5.2. Covered Entity shall provide Business Associate with any changes in, or revocation of, permission by an Individual to use or disclose Protected Health Information, if such changes affect Business Associate's permitted or required uses.
- 5.3. Covered Entity shall notify Business Associate of any restriction to the use or disclosure of Protected Health Information that Covered Entity has agreed to in accordance with 45 C.F.R. § 164.522, to the extent that such restriction may affect Business Associate's use of Protected Health Information.

6. PERMISSIBLE REQUESTS BY COVERED ENTITY

- 6.1. Covered Entity shall not request Business Associate to use or disclose Protected Health Information in any manner that would not be permissible under the Privacy Rule if done by Covered Entity.

7. TERM AND TERMINATION

- 7.1. Term. This Agreement shall be effective as of the date on which it is signed by both parties and shall terminate when all of the Protected Health Information provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy Protected Health Information, Section 7.3 below shall apply.
- 7.2. Termination for Cause.

- 7.2.1. This Agreement authorizes and Business Associate acknowledges and agrees Covered Entity shall have the right to immediately terminate this Agreement and Service Contracts in the event Business Associate fails to comply with, or violates a material provision of, requirements of the Privacy Rule or this Agreement.
- 7.2.2. Upon Covered Entity's knowledge of a material breach by Business Associate,
- 7.2.2.1. Covered Entity shall, whenever practicable, provide a reasonable opportunity for Business Associate to remedy the breach or end the violation.
- 7.2.2.2. If Business Associate has breached a material term of this Agreement and remedy is not possible or if Business Associate does not remedy a curable breach or end the violation within a reasonable time as specified by, and at the sole discretion of, Covered Entity, Covered Entity may immediately terminate this Agreement and Service Contracts.
- 7.2.2.3. If neither remedy nor termination is feasible, Covered Entity shall report the violation to the Secretary of the United States Department of Health in Human Services or the Secretary's designee.
- 7.3. Effect of Termination.
- 7.3.1. Except as provided in Section 7.3.2 below, upon termination of this Agreement, for any reason, Business Associate shall return or destroy all Protected Health Information received from Covered Entity, or created or received by Business Associate on behalf of, Covered Entity. This provision shall apply to Protected Health Information that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the Protected Health Information.
- 7.3.2. In the event that Business Associate determines that returning or destroying the Protected Health Information is not feasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction unfeasible. Upon mutual agreement of the Parties that return or destruction of Protected Health Information is unfeasible, Business Associate shall extend the protections of this Agreement to such Protected Health Information and limit further uses and disclosures of such Protected Health Information to those purposes that make the return or destruction unfeasible, for so long as Business Associate maintains such Protected Health Information.

8. MISCELLANEOUS

- 8.1. Regulatory Reference. A reference in this Agreement to a section in the Privacy Rule means the section as in effect or as amended.
- 8.2. Amendment. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for Covered Entity to comply with the requirements of the Privacy Rule and the Health Insurance Portability and Accountability Act, Public Law 104-191. Business Associate and Covered Entity shall comply with any amendment to the Privacy Rule, the Health Insurance Portability and Accountability Act, Public Law 104-191, and related regulations upon the effective date of such amendment, regardless of whether this Agreement has been formally amended.

- 8.3. Survival. The respective rights and obligations of Business Associate under Section 7.3. of this agreement shall survive the termination of this Agreement.
- 8.4. Interpretation. Any ambiguity in this Agreement shall be resolved in favor of a meaning that permits Covered Entity to comply with the Privacy Rule.
- 8.5. Notices and Communications. All instructions, notices, consents, demands, or other communications required or contemplated by this Agreement shall be in writing and shall be delivered by hand, by facsimile transmission, by overnight courier service, or by first class mail, postage prepaid, addressed to the respective party at the appropriate facsimile number or address as set forth below, or to such other party, facsimile number, or address as may be hereafter specified by written notice.

COVERED ENTITY:

Tennessee Department of Health
 Timothy Gregory, Privacy Officer
 710 James Robertson Parkway (5th Floor) Nashville, TN 37243
 Email: Timothy.Gregory@tn.gov
 Telephone: 615-741-1969
 Fax: 615-253-3926

Tennessee Department of Health
 Mike Moak, Security Officer
 710 James Robertson Parkway (6th Floor) Nashville, TN 37243
 Email: Mike.Moak@tn.gov
 Telephone: 615-741-0899
 Fax: 615-253-3926

BUSINESS ASSOCIATE:

Jacob Cooper, Client Relationship Manager
 Appriss Inc.
 10401 Linn Station Rd Ste 200, Louisville, KY 40223
jcooper@appriss.com
 Telephone # (502) 815-5656
 FAX # (502) 815-5696

All instructions, notices, consents, demands, or other communications shall be considered effectively given as of the date of hand delivery; as of the date specified for overnight courier service delivery; as of three (3) business days after the date of mailing; or on the day the facsimile transmission is received mechanically by the facsimile machine at the receiving location and receipt is verbally confirmed by the sender.

- 8.6. Strict Compliance. No failure by any Party to insist upon strict compliance with any term or provision of this Agreement, to exercise any option, to enforce any right, or to seek any remedy upon any default of any other Party shall affect, or constitute a waiver of, any Party's right to insist upon such strict compliance, exercise that option, enforce that right, or seek that remedy with respect to that default or any prior, contemporaneous, or subsequent default. No custom or practice of the Parties at variance with any provision of this Agreement shall affect, or constitute a waiver of, any Party's right to demand strict compliance with all provisions of this Agreement.
- 8.7. Severability. With respect to any provision of this Agreement finally determined by a court of competent jurisdiction to be unenforceable, such court shall have jurisdiction to reform such provision so that it is enforceable to the maximum extent permitted by applicable

law, and the Parties shall abide by such court's determination. In the event that any provision of this Agreement cannot be reformed, such provision shall be deemed to be severed from this Agreement, but every other provision of this Agreement shall remain in full force and effect.

- 8.8. Governing Law. This Agreement shall be governed by and construed in accordance with the laws of the State of Tennessee.
- 8.9. Compensation. There shall be no remuneration for performance under this HIPAA Business Associate Agreement except as specifically provided by, in, and through, contractual relationships referenced herein.

IN WITNESS WHEREOF,

TENNESSEE DEPARTMENT OF HEALTH:

JOHN J. DREYZEHNER, MD, MPH, FACOEM

Date

BUSINESS ASSOCIATE LEGAL ENTITY NAME:

NAME AND TITLE

Date

Required Capabilities

Tennessee Department of Health
Health Licensure and Regulation
Board of Pharmacy
Controlled Substance Monitoring Database

State PMP User and State PMP Data Collection Applications
Current Functionality and Requirements prior to Migration
and Requirements to Migrate to new applications for State
PMP Data Collection and State PMP User Applications and
Report Requirements for both applications

Appriss Health (vendor for both applications)

Change Log:

Version	Date	Summary of Changes	Author
1.0	3/19/2018	New document	Amanda Pollock
1.1	6/5/2018	Revisions and Additions by State of Tennessee	Tennessee

File Name: Attachment 3 – Business Requirements Document

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Tennessee CSMD Implementation Requirements

Introduction

This document (Business Requirement Document) expresses User functions, operations functions, data attributes and security functions required in relation to current application functionality documented herein and enhancements thereof to support the needs of Tennessee. Specifically, this document defines the enhancements needed in order to meet the needs of Tennessee on the Optimum Technology applications. In addition, this document identifies current gaps between the Optimum Technology applications and Appriss developed applications currently in Production. This document will be used to collect, analyze, and define features and requirements of Tennessee. Should Tennessee decide to migrate at a future date to a new State PMP Data Collection Application and/or a new application for health care users to view the information collected by Appriss from Dispensers or other entities authorized by Tennessee to provide data or files to identify patient risk or provider risky behavior, this document will also serve to begin documenting the requirement capabilities for the potential of a subsequent migration.

The focus of the document is tailored to the capabilities needed by multiple Users in TDH, various stakeholders and target Users of both data collection and data viewing, and why these needs exist. The details of Tennessee's needs in data collection and data viewing will be detailed in the use case specifications and supplementary specifications.

The goal of this document is to identify resources, processes, existing structure and technology expressed in terms of current and future business needs of Tennessee. The Contractor shall be required to ensure all capabilities, functionality, validations, and any other requirements in this document are part of Optimum Technology applications. Should Tennessee decide to migrate to the new applications, a review will occur by Tennessee in consultation with APPRISS to identify any gaps between the enhanced Optimum Technology applications and the new applications. State reserves the right to migrate without all gaps in functionality being available at time of migration if development is underway by Contractor with agreed upon delivery dates.

1.1 Purpose

State Prescription Drug Monitoring Programs (PMPs) play an essential role in the effort to control prescription drug abuse nationwide. State PMPs provide information to health care providers to improve clinical decision-making, identify sources of improper prescribing and dispensing, curb prescription drug misuse and abuse, and potentially saving numerous lives.

State PMP data provides the necessary information to efficiently run operations audits and to perform public health analysis.

User Descriptions

Users of the CSMD applications (State PMP User and Data Collection Applications) for the State will include: state employees, elected officials, licensed and unlicensed healthcare professionals, law enforcement, drug courts, and others as identified by state laws, rules, and regulations.

Definitions

All terms and/or words defined in Section A.2 of the Contract are hereby incorporated in this document as defined in the Contract.

Requirements

3.1 Business

The application will comply with the security requirements of the State.

TABLE 1: Business Requirements

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
1	BR1.0.0	State PMP User and Data Collection Applications: Security	Users will have unlimited login attempts. A User will have four login attempts before a User's account is locked. Once a User account is locked due to failed login attempts, the account shall be locked for ten (10) minutes	N/A	Existing functionality
2	BR1.0.1	State PMP User and Data Collection Applications: Security	Users will have a maximum of ten (10) login attempts before the User's account is locked. Once a User's account is locked due to failed login attempts the account shall remained locked until the User contacts the CSMD Administrator to unlock the account.	Existing Functionality	Gap
3	BR1.1.1	State PMP User and Data Collection Applications: Security	A User cannot use the previous twelve (12) passwords they have used to access the State PMP Data Collection or User Application.	N/A	Existing functionality
4	BR1.1.2	State PMP User and Data Collection Applications: Security	A User cannot use the previous ten (10) passwords they have used to access the State PMP Data Collection or User Application.	Existing functionality	Gap
5	BR1.2.1	State PMP User and Data Collection Applications: Security Admin Setting	State PMP User Application: A State Administrator(s) shall be able to configure a setting for password expiration interval to apply to all Users and Roles and the following options: thirty (30) days; sixty (60) days; ninety (90) days; one hundred eighty (180) days; three hundred sixty-five (365) days will be available to the State. State PMP Data Collection Application: A User must reset their password every ninety (90) days.	Existing Functionality	Existing Functionality
6	BR1.2.2	State PMP User and	State PMP User Application: A User must reset their password based on the password expiration	Existing	Existing

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Data Collection Applications: Security Admin Setting	interval setting maintained by the State Administrator(s) State PMP Data Collection Application: A User must reset their password every ninety (90) days.	Functionality	Functionality
7	BR1.3.1	State PMP User and Data Collection Applications: Security	A User must re-authenticate to the application after twenty (20) minutes of inactivity.	Existing functionality	Existing functionality
8	BR1.4.0	State PMP User and Data Collection Applications: Security	The system shall display to the User, at password creation, the parameters required to create a password to meet the minimum State requirements. State minimum requirements are: upper alpha character, lower alpha character, number character, and special character and must be at least eight (8) characters in length	Existing functionality	Existing functionality
9	BR2.0.0	State PMP Data Collection Application	Dispensers who are licensed in the State of Tennessee shall be able to submit controlled substance dispensation data through SFTP or near real time using a web service, twenty-four (24) hours per day, seven (7) days per week, three hundred sixty-five (365) days per year (24x7x365)	Existing functionality	Existing functionality
10	BR2.0.0.1	State PMP Data Collection Application	Dispensers shall be able to submit required and optional data as specified by the ASAP.Net specification to the State PMP Data Collection Application to be collected both manually and electronically.	Existing functionality	Existing functionality
11	BR2.0.1	State PMP Data Collection Application	Dispensers in the State of Tennessee shall be able to submit controlled substance dispensation data through manual entry of prescriptions directly into application twenty-four (24) hours per day, seven (7) days per week, three hundred sixty-five (365) days per year (24x7x365).	Existing functionality	Existing functionality
12	BR2.0.2	State PMP Data Collection Application	Dispensers in the State of Tennessee shall be able to submit controlled substance dispensation data through some type of manual form (fax, universal claim form, etc.), or through a secure web-based portal twenty-four (24) hours per day, seven (7) days per week, three hundred sixty-five (365) days per year (24x7x365)	Existing functionality	Existing functionality
13	BR2.0.3	State PMP Data Collection	Dispensers shall submit controlled substance dispensation data in the ASAP 4.2 format at a minimum. No later than 1/1/2019 the minimum	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application	requirement to be in Production is ASAP 4.2A.		
14	BR2.0.3.1	State PMP Data Collection Application Maintenance	The Contractor shall allow the State, at no additional cost, to move to new format versions, in a time mutually agreed upon by the State and the Contractor.	Existing functionality	Existing Functionality
15	BR2.0.3.2	State PMP Data Collection Application Maintenance	The Contractor shall maintain previous submission formats plus new submission formats for an agreed upon time period mutually agreed upon by the State and Contractor	Existing functionality	Existing Functionality
16	BR2.0.4	State PMP Data Collection Application	Dispensers shall submit controlled substance dispensation data for prescriptions dispensed in the state of Tennessee or mailed into the state of Tennessee for Tennessee resident by a state of Tennessee licensed Dispenser.	Existing functionality	Existing functionality
17	BR2.0.4.1	State PMP Data Collection Application	Application shall validate the Dispenser Tennessee license number to be valid before accepting prescriptions from that Dispenser.	Existing functionality	Gap
18	BR2.0.5	State PMP Data Collection Application	Contractor shall allow federal Dispensers reporting to the State PMP Data Collection Application who will not be state of Tennessee licensed.	Existing functionality	Existing functionality
19	BR2.1.0	State PMP Data Collection Application	Dispensers can manually enter dispensation records into the application.	Existing functionality	Existing functionality
20	BR2.1.1	State PMP Data Collection Application	Dispensers shall be required to input all ASAP fields for manually entered dispensation records in accordance with State requirements	Existing functionality	Existing functionality
21	BR2.1.2	State PMP Data Collection Application	Dispensers shall be allowed to make electronic revisions to dispensation records in accordance with State requirements.	Existing functionality	Existing functionality
22	BR2.1.3	State PMP Data Collection Application	Dispensers shall have a record in the system if a Tennessee licensed Dispenser has received a waiver from reporting to the State PMP Data Collection Application electronically.	Existing functionality	Existing functionality
23	BR2.1.4	State PMP Data Collection	Manual revisions must be made by the DEA Registrant/Pharmacist in Charge at the dispensing	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application	site in the State PMP Data Collection Application.		
24	BR2.1.6	State PMP Data Collection Application	The Contractor shall provide the functionality to validate Dispensers manually submitting controlled substance dispensation data. During manual entry, if the data entered does not meet validation criteria, the User will receive an error and will not be able to save the entry until correction is made. Validation criteria will be the same for manual entry as for records received electronically.	Existing functionality	Existing functionality
25	BR.2.1.7	State PMP Data Collection Application	State PMP Data Collection Application Manual shall be developed by State and Contractor and State requires approval of State PMP Data Collection Application Manual prior to any sharing to Dispensers or being published on any URL	Existing functionality	Existing functionality
26	BR3.0.0	State PMP Data Collection Application Registration	<p>Prescription reporter registrants are required to provide the following information:</p> <ul style="list-style-type: none"> a. DEA number of Dispenser being reported on b. State license number of Dispenser being reported on except for federal Dispensers c. Central/Prescription Reporter first name d. Central/Prescription Reporter last name e. Central/Prescription Reporter street address f. Central/Prescription Reporter city g. Central/Prescription Reporter state abbreviation (drop down) h. Central/Prescription Reporter zip i. Central/Prescription Reporter phone j. Email address of Central/Prescription Reporter k. Reason for Registration or notes area (optional) 	Existing functionality	Existing functionality
27	BR3.0.0.1	State PMP Data Collection Application Registration	<p>Prescription reporter registrants are required to provide information in BR3.0.0 along with the following enhancements:</p> <ul style="list-style-type: none"> a. Indicator to identify what kind of Dispenser: <ul style="list-style-type: none"> i. Central reporter ii. Human prescribing 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p style="text-align: center;">Dispenser</p> <ul style="list-style-type: none"> iii. Animal prescribing Dispenser iv. Pharmacy <ul style="list-style-type: none"> b. DEA number receiving controlled substance drug shipment/inventory used for dispensing c. License type number (pharmacy, medical doctor, advance practice nurse, etc.) d. Indicate days of week of operation of the Dispenser e. NCPDP number of Dispenser being reported on (Optional) f. NPI number of each Dispenser being reported on (if available) g. Email address associated with each DEA number being reported 		
28	BR3.0.1	State PMP Data Collection Application Registration	<p>Prescription reporter registrants must be validated for the following:</p> <ul style="list-style-type: none"> a. The DEA number must be valid and active. Failure to validate would require the online registration to go to pending. b. State license number and license profession number (would validate that combination (license number + profession) is a valid TN license number) c. The Contractor shall validate State license quarterly and lock accounts when State license is not valid. The Contractor shall provide a list to the State of Dispensers with an invalid State license. 	Existing functionality	Existing functionality
29	BR3.0.2.1	State PMP Data Collection Application Configuration	<p>Contractor shall provide a list of TN's required data fields and validations that occur on each field to inform TN for rulemaking. The State after rulemaking will determine the desired validation and what action occurs if not met. The first type of action would be an Error that would prevent the data from transferring to the State PMP User Application and the Submitter and Dispenser would receive a communication regarding the Error. The second type of action would be a Warning which would allow the data to be</p>	Will address as Change Order once requirements are known	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			transferred to the State PMP User Application but the Submitter and the Dispenser would receive a communication regarding the Warning. Both actions require the submitter or dispenser to revise the data. After rulemaking when the State collaborates with Appriss on TN's required field changes the validations on each field will be re-evaluated and appropriate configuration changes made by Appriss. The only item in this language that does not require a change order is the document informing TN of current functionality on required fields.		
30	BR3.0.3	State PMP Data Collection Application General Operations	The Contractor shall download and update the DEA history file daily.	Enhancement	Enhancement
31	BR3.0.4	State PMP Data Collection Application General Operations	The relationship between a provider and a DEA number is not necessarily one to one. It could be one to many. Therefore, the system must be able to maintain and recognize that relationship in the data that is provided in State PMP Data Collection Application and create a Prescriber Consolidation ID that will be stored in the database	Enhancement	Enhancement
32	BR3.0.5	State PMP Data Collection and State PMP User Applications Configuration	Each User record must contain a unique Identifier which is specific to the registrant	Existing functionality	Existing functionality
33	BR3.0.5.1	State PMP Data Collection Application ASAP Migration Customer Support	The Contractor shall communicate and provide support during migration to Dispensers and software entities to ensure a successful transition to new ASAP format by State set deadline	Existing functionality	Existing functionality
34	BR3.0.6	State PMP Data Collection Application	The Contractor shall cleanse all addresses being submitted to State PMP Data Collection Application. If there is a discrepancy between the state code and street address/zip code, both	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			versions of the record (the original record and the cleansed record) will be processed and stored in the State PMP User database. The State requires the original and cleansed version of the same record.		
35	BR3.1.0	State PMP Data Collection Application Customer Support	State PMP Data Collection Application Users shall contact the helpdesk for data submission issues via phone or secure portal	Existing functionality	Existing functionality
36	BR3.1.1	State PMP Data Collection Application Customer Support	The Helpdesk shall identify any issues requiring State administration intervention reported by State PMP Data Collection Application Users to the State based on contract information.	Existing functionality	Existing functionality
37	BR3.1.2	State PMP Data Collection Application Customer Support	The Helpdesk shall report all State data submission issues to the State on a weekly basis	Enhancement	Existing functionality
38	BR3.1.3	State PMP Data Collection Application: Admin Setting	The State PMP Data Collection Application shall display a state logo as identified by the State	Existing functionality	Existing functionality
39	BR3.1.4	State PMP Data Collection Application Customer Support	The State PMP Data Collection Application shall have tutorials available to Users to guide them through processes.	Existing functionality	Existing functionality
40	BR4.0.0	State PMP Data Collection Application Customer Support	The Contractor shall prepare and provide to Dispensers any instructions needed to successfully submit ASAP files. The State reserves the right to review and approve any communication prior to it being distributed to Dispensers.	Existing functionality	Existing functionality
41	BR4.0.1	State PMP Data Collection	The Contractor shall have a toll-free number and email address by which Dispensers may contact the Contractor to resolve problems and receive	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application Customer Support	information concerning data transmission.		
42	BR4.0.2	State PMP Data Collection Application Configuration	Each dispensation transmission shall be documented to include DEA number of Dispenser, date, and time received	Existing functionality	Existing functionality
43	BR4.0.3	State PMP Data Collection Application Paper Reporting	<p>The Contractor shall accept written paper reports on a form approved by TN CSMD Committee from Dispensers that have been granted a waiver by State.</p> <p>The Contractor shall direct any Dispensers who want to apply for a waiver to the State website for the Waiver form.</p> <p>The Contractor shall enter data submitted on paper into the database within two business days after receipt in the State PMP Data Collection Application.</p>	Existing functionality	Existing functionality
44	BR4.1.0	State PMP Data Collection Application Communication Configuration	<p>Central Reporters/software vendors, and DEA Registrant or Pharmacist in Charge will receive an electronic communication denoting errors and warnings for records submitted connected to the DEA number associated with that prescription.</p> <p>Errors will prevent transfer of the data from State PMP Data Collection Application to the State PMP User Application; warnings will not.</p> <p>Data shall have an indicator for all errors and warnings in the data with the date of submission.</p>	Existing functionality	Existing functionality
45	BR4.1.1	State PMP Data Collection Application Configuration	<p>Dispenser submitted dispensation data with errors cannot be deleted or archived until the error is resolved. Warnings will be retained for 30 days.</p> <p>Contractor will provide a daily report of all warnings to State. State will collaborate with Contractor on data to be provided in report.</p>	N/A	Gap
46	BR4.1.2	State PMP Data Collection and User Applications databases Configuration	Required fields, as defined by the state laws, rules, and regulations, shall be populated with valid information and enforced at the application level.	Existing functionality	Gap
47	BR4.1.3	State PMP	Required fields, as defined by the state laws, rules,	Existing	Existing

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Data Collection Application Validations Configuration	and regulations, shall be populated with valid information and enforced at the database level or application level as appropriate. Contractor shall provide any update scripts run against the database for State to review, test and approve before it is applied to the database.	functionality	functionality
48	BR4.1.4	State PMP Data Collection Application Validations	The Contractor shall validate social security number when reported against the Social Security Death Index (SSDI) if submitted by a Dispenser, and if there is a match a field will be populated in the application to show the date of death.	Enhancement	Enhancement
49	BR4.2.0	State PMP Data Collection and User Applications Data Sources	The following data sources shall be available: <ul style="list-style-type: none"> a. All DEA numbers shall be validated against a source b. State professional licensure numbers shall be validated against a source c. Driver's license shall be validated against a source d. All National Drug Code (NDC) numbers shall be validated against a source 	Existing functionality	Existing functionality
50	BR4.2.0.1	State PMP Data Collection and State PMP User Application Data Sources	The following data sources shall be added as enhancements: <ul style="list-style-type: none"> a. The Contractor shall validate RxNorm information against National Library of Medicine or other standard source of information, if included in the data reported. b. All ICD-10 codes shall be validated against a source to ensure code exist 	Enhancement	Enhancement
51	BR4.2.1	State PMP Data Collection Application Customer Support	If a data file submitted by a Dispenser does not meet the established threshold for accuracy and completeness of data: The Contractor shall be responsible for notifying the Dispenser of the problem with the data specified and instructed on the process to correct the data and resubmit by the Dispenser.	Existing functionality	Existing functionality
52	BR4.2.2	State PMP Data Collection Application Reporting Validation	State Administrator(s) shall have a report of all Dispensers with erroneous data which was not corrected in the timeline established by the State. If the data is not corrected and returned by the State established deadline, the Contractor shall report Dispenser identification to State.	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
53	BR4.3.0	State PMP Data Collection Application Reporting: Resolve Dispensers	<p>Dispensers (if Central Reporter/software vendor) must be able to search for DEA number of Dispenser reporting on behalf of or Dispenser associated to DEA number of prescription reported must be able to identify DEA number to resolve an error that has occurred during reporting</p> <p>Minimum search fields available will be:</p> <ul style="list-style-type: none"> a. Prescription number associated with Dispenser b. Fill date c. Dispenser DEA number d. Dispenser NCPDP provider number e. Last name f. First name g. Provide ability to choose rows within report and allow DEA number to be replaced with new DEA number or allows Dispenser to change all rows associated with that DEA number to a new DEA number h. The search query criteria must allow one or many of the fields above to be used i. Report Output must contain the fields offered in search at a minimum 	Existing functionality	Existing functionality
54	BR4.3.0.1	State PMP Data Collection Application Reporting: Resolve Dispensers	<p>The following search field from BR4.3.0 shall be added as a gap:</p> <ul style="list-style-type: none"> a. Prescriber DEA number 	Existing functionality	Gap
56	BR4.4.0	State PMP Data Collection Application Reporting: Resolve NDC Code	<p>Dispensers shall be able to search prescription records for the product number (NDC, etc.)</p> <ul style="list-style-type: none"> a. Dispenser must have the functionality to generate a report and the minimum fields available will be: <ul style="list-style-type: none"> 1. Prescription number 2. Product number 3. Product code (Ex. NDC) 4. Patient last name 5. Patient first name 	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>b. Provide the ability to choose rows with searched product number with new product number or allows Dispenser to change all rows associated with that product number to a new product number</p> <p>c. The search query criteria must allow one or many of the fields above to be used</p>		
57	BR4.5.0	State PMP Data Collection Application Reporting: Prescription Search Report	<p>Dispenser must have the functionality to generate a report to identify potential reporting issues</p> <p>a. Minimum search fields available will be:</p> <ol style="list-style-type: none"> 1. Prescription number 2. Dispenser DEA number 3. Date filled from 4. Date filled to <p>b. The search query criteria must allow one or many of the fields above to be used</p>	Existing functionality	Existing functionality
58	BR4.5.0.1	State PMP Data Collection Application Reporting: Prescription Search Report	<p>The following search fields from BR4.5.0 shall be added as a gap:</p> <ol style="list-style-type: none"> 1. Prescriber DEA number 2. Dispenser name 3. Patient last name 4. Patient first name 5. Patient middle name 	Existing functionality	Gap
59	BR4.5.1	State PMP Data Collection Application Reporting: Prescription Search Report	<p>Dispenser associated to the DEA of the prescriptions will have ability to edit the details of the prescription that are returned from the search. This would occur in the data input application as most manual submitters do not enter the data but have someone enter on their behalf, therefore a data submission account would be needed to make the edits/revisions/corrections to prescriptions.</p>	Existing functionality	Gap
60	BR4.5.2	State PMP Data Collection Application Reporting: Prescription Search Report	<p>Dispenser details that will be available to be edited are listed below: (once search complete in BR4.5.1 to identify the records)</p> <ol style="list-style-type: none"> a. NCPDP Provider number b. NPI number c. Dispenser DEA number d. Dispenser name e. Contact last name f. Contact first name 	Existing functionality	Potential Gap (under Appriss review)

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			g. Chain site number h. Contact number i. Address (care of) j. Street k. City l. State abbreviation (drop down) m. Zip n. Or any other fields added in the ASAP format The search query criteria must allow one or many of the fields above to be used.		
61	BR4.5.3	State PMP Data Collection Application Reporting: Prescription Search Report	Dispensers shall be able to view, input and update the following Prescription detail data for the DEA number that is associated with the Dispenser's State PMP Data Collection Application login: <ol style="list-style-type: none"> a. The data fields are listed below <ol style="list-style-type: none"> 1. Reporting status 2. Prescription number 3. Date written 4. Authorized refills 5. Date filled 6. Refill number 7. ID qualifier 8. Product number 9. Quantity 10. Days' supply 11. Drug dosage unit 12. Prescription origin code 13. Partial fill 14. Payment method 15. Electronic reference number 16. Or any other field added in the ASAP format b. The search query criteria must allow one or many of the fields above to be used c. Dispenser associated with the DEA can make edits to any of the fields above on prescriptions submitted by that DEA 	Existing functionality	Potential Gap (under Appriss review)
62	BR4.5.4	State PMP Data	Dispenser must have the ability to view the following types of information	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Collection Application Reporting: Prescription Search Report	<ul style="list-style-type: none"> a. Prescription b. Dispenser c. Practitioner d. NDC e. Ingredient f. DEA 		
63	BR4.5.4.1	State PMP Data Collection Application Reporting: Prescription Search Report	<p>The following type of information from BR4.5.4 shall be added as a gap:</p> <ul style="list-style-type: none"> a. Therapeutic 	Existing functionality	Gap
64	BR4.5.5	State PMP Data Collection Application Reporting: Prescription Search Report	<p>State Administrator(s) shall be able to generate a report to view data that was reported by Dispenser associated with DEA Registrant, which DEA Registrant can edit and State Administrators can only view the data</p> <ul style="list-style-type: none"> a. Minimum search fields available will be: <ul style="list-style-type: none"> a. File name b. The search query criteria must allow one or many of the fields above to be used c. Report Output must contain the fields offered in search at a minimum <ul style="list-style-type: none"> a. File name b. Date uploaded c. Total records d. Total uploaded e. Duplicated f. Outstanding g. Uncorrected errors h. Corrected errors i. Status d. Additional Details <ul style="list-style-type: none"> a. File name b. Uploaded by c. Uploaded on date d. Status e. Records in file f. Records uploaded g. Records rejected 	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> h. Records deleted i. Corrected errors j. Outstanding errors k. Total warnings l. Ability to display warnings m. Total duplicates 		
65	BR4.5.5.1	State PMP Data Collection Application Reporting; Prescription Search Report	<p>The following search fields from BR4.5.5 shall be added as a gap:</p> <ul style="list-style-type: none"> a. File type b. Upload start date c. Upload end date d. Upload type e. Login f. Email address g. Users first name h. Users last name 	Existing functionality	Gap
66	BR4.5.6	State PMP Data Collection Application Reporting; Prescription Search Report	<p>Dispensers shall have the ability to submit, view and update zero reports</p> <ul style="list-style-type: none"> a. Submit <ul style="list-style-type: none"> 1. Input Dispenser name 2. Input DEA number 3. From report period 4. To report period b. View <ul style="list-style-type: none"> 1. Search criteria <ul style="list-style-type: none"> i. Dispenser Name ii. DEA number iii. From report period iv. To report period 2. Returns a list <ul style="list-style-type: none"> i. Dispenser name ii. Dispenser license number iii. From date iv. To date 	Existing functionality	Existing Functionality
67	BR5.0.0	State PMP User Application and State PMP Data Collection	Registrants shall be authenticated through an online access request process. All items in BR5.0.X cover State registration requirements.	Existing functionality	Existing Functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application Registration			
68	BR5.0.0.1	State PMP User Application Validation Requirement s	State will provide validation requirements necessary to authenticate through the online registration request process for the State PMP User Application.	Existing functionality	Gap
69	BR5.0.0.1.1	State PMP Data Collection Application Validation Requirement s	State will provide validation requirements necessary to authenticate through the online registration request process for State PMP Data Collection Application.	Enhancement	Enhancement
70	BR5.0.0.2	State PMP User Application Configuration	State requires the ability or Contractor must set mandatory fields as directed by the State for patient requests	Existing functionality	Existing Functionality
71	BR5.0.0.3	State PMP User Application Configuration	Either the State or Contractor shall have the ability to set mandatory fields as directed by the State for Prescriber requests	Existing functionality	Existing Functionality
72	BR5.0.0.4	State PMP User Application	State must have the functionality to create announcements and news within the State PMP User Application. These messages shall be displayed on the home page and shall include fields to be set by State Administrator(s) for start date, expiration date that would be used to determine when the message would no longer be seen by State PMP Users	Existing functionality	Existing Functionality
73	BR5.0.0.4.1	State PMP User Application	Messages in BR5.0.0.4 shall include expiration date as a field to be set by State Administrator(s).	Existing functionality	Gap
74	BR5.0.1	State PMP User and Data Collection Applications Registration	Registrants shall not be able to make duplicate registrations. Duplication shall be determined by cross checking personal identifying information (User email address, User DEA number, User NPI, User professional license and profession) with existing registrations in the database and preventing duplication.	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			Contractor will provide documentation detailing the process for State review and acceptance.		
75	BR5.0.1.1	State PMP User and Data Collection Applications Registration	A duplication check for unlicensed Delegates will be performed using driver's license number and driver's license state.	Existing functionality	Gap
76	BR5.0.3	State PMP User and Data Collection Applications	Users shall be able to self-service to retrieve their username.	Existing functionality	Gap
77	BR5.0.4	State PMP User Application	State Administrator(s) shall be able to manage Supervisory relationships for all Users.	Existing functionality	Existing Functionality
78	BR5.0.5	State PMP User Application Registration	Registrants shall provide an email and password to create a User shell account. In the Contractor system, this "shell account" serves as a placeholder for a User to return and complete the registration process.	N/A	Existing functionality
79	BR5.0.5.1	State PMP User Application Registration	Registrants shall provide all information as contained in Attachment 4 to register for the CSMD	Existing functionality	Gap
80	BR5.0.6	State PMP User Application Registration	Registrants shall confirm their registered email address via receiving an email from the system. This is only applicable for the migration strategy. Currently registrant would receive email with temporary to login and change to a password of their choosing.	Existing functionality	Existing functionality
81	BR5.0.7	State PMP User Application Registration	Registrants of State specified Roles shall be automatically validated. If they fail auto-validation or if they are of a Role not identified for automatic validation, these registrant records shall be available for manual review and approval/denial by a State Administrator(s).	Existing functionality	Existing functionality
82	BR5.0.8	State PMP User Application Registration	Registrants may have unique data requirements dependent on their Role	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
83	BR5.0.9	State PMP User Application Registration Configuration	State Administrator(s) shall identify and communicate the registration requirements for each Role	Existing functionality	Existing functionality
84	BR5.0.10	State PMP User Application Registration	<p>Registrants shall provide the following information at registration if appropriate for their Role:</p> <ul style="list-style-type: none"> a. First name b. Middle name c. Last name d. Suffix e. Degree f. DEA number (ability to add all DEA numbers used by this individual) g. DEA Suffix h. Professional licensure number i. State that issued professional licensure number abbreviation (drop down) j. NPI number k. Driver's license l. State that issued driver's license number abbreviation (drop down) m. Date of birth n. Primary phone or work phone o. Cell phone p. Last four (4) digits of Social Security Number q. Email address r. Delegate professional licensure number or choice of none or similar for non-licensed Delegates s. Delegate state of issued license number or registration t. Delegate profession u. Clinical notification preference v. Badge number 	Existing functionality	Existing functionality
85	BR5.0.10.1	State PMP User Application Registration	<p>The following information from BR5.0.10 shall be added as a gap:</p> <ul style="list-style-type: none"> a. Degree b. State that issued professional licensure number abbreviation (drop 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>down)</p> <ul style="list-style-type: none"> c. State that issued driver’s license number abbreviation (drop down) d. Cell phone e. Delegate state of issued license number or registration 		
86	BR5.0.11	State PMP User Application Registration	<p>The professions licensed will be associated with a profession code and a description provided by State that will be included in the drop down for selection. State reserves the right to add, remove, or modify professions in list. State will provide a list of professions, specialties and sub-specialties to Contractor for all Roles that will be used by the State.</p> <p>If not licensed but given access by statute such as a Medical Examiner, Office of Inspector General investigators, Office of General Counsel, Health Related Boards investigators, law enforcement and judges of drug courts and any other professions granted access by statute to the State PMP User Application.</p> <p>The professions list will be determined by State and provided to Contractor.</p>	Existing functionality	Existing functionality (possible Gaps dependent on contents of professions list)
87	BR5.0.11.1	State PMP User Application Registration	<p>The Role, Specialty, and Sub-Specialty shall be selected by the User from a State –identified list from the Centers for Medicare and Medicaid Services (CMS) Taxonomy. The list agreed upon by the State.</p>	Enhancement	Existing functionality
88	BR5.0.11.2	State PMP User Application Registration	<p>Specialties within the CMS Taxonomy list may be omitted within the User Application, as agreed upon by the State.</p>	Enhancement	Enhancement
89	BR5.0.12	State PMP User Application Registration	<p>Supervisors must be registered in the State PMP User Application before a Delegate can create the Supervisory relationship, identifying the Supervisor by their state driver license number.</p> <p>State rules provides that the identification of the Supervisor be driven by the Supervisor’s driver license number or State ID number.</p>	Existing functionality	Gap
90	BR5.0.13	State PMP User Application Registration	<p>Licensed Delegates would need to provide their license number.</p>	Existing functionality	Existing functionality
91	BR5.0.13.	State PMP	<p>Licensed Delegates would need to provide the</p>	Existing	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
	1	User Application Registration	State that issued their licensure.	functionality	
92	BR5.0.14	State PMP User Application Registration	Once a Supervisor’s driver license is selected, a list of all practice locations for that health care provider shall be presented for the Delegate to select the Supervisor location(s) where the Delegate/APRN/PA is supervised	Existing functionality	Gap
93	BR5.0.15	State PMP User Application Registration	Supervisors must reauthorize Delegates on an annual basis. This will exclude APRNs and PAs	Existing functionality	Existing functionality
94	BR5.0.15. 1	State PMP User Application Registration	APRNs and PAs will be excluded from BR5.0.15.	Existing functionality	Gap
95	BR5.0.16	State PMP User Application Delegate Functionality	The system must contain historical records of Supervisor/Delegate acceptance of relationship as well as historical data when relationship ended.	Existing functionality	Existing functionality
96	BR5.0.17	State PMP User and Data Collection Applications Functionality	State Administrator(s) shall be able to enter Notes as free text and save them to a registration/User record as long as the record contains a User login.	Existing functionality	Existing functionality
97	BR5.0.18	State PMP User Application Registration: Admin Setting	As a registrant, I must acknowledge an “I Certify” statement to successfully complete the registration process. Current language: I certify that I am authorized to access this database pursuant to Tenn. Code Ann. § 53-10-306 and view all confidential information obtained during this session. Unauthorized access, unauthorized searches, or improper use or disclosure of the information contained in this database is a violation of State law and subject to criminal prosecution.	Existing functionality	Existing functionality
98	BR5.0.18. 1	State PMP User Application Registration: Drug Courts	As a drug court registrant, I must acknowledge an “I Certify” statement to successfully complete the registration process. Current language: I certify that any patient request generated by me is for a current participant in the Drug Court Treatment Program in my district, and I have a reasonable belief that this patient may not be in	Enhancement	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			compliance with the guidelines or rules pertaining to use of controlled substances required for participation in this drug court program.		
99	BR5.0.18.2	State PMP User Application Registration: Law Enforcement	As a law enforcement registrant, the registrant must acknowledge an "I Certify" statement to successfully complete the registration process. : I certify that all requests made during this session are part of my official duties and I am engaged in the official investigation or enforcement of state or federal laws involving controlled substances or violations of the Prescription Safety Act.	Enhancement	Existing functionality
100	BR5.0.18.3	State PMP User Application Registration: District Attorney and TBI Director	As a District Attorney or Tennessee Bureau of Investigation (TBI) Director registrant, I must acknowledge an "I Certify" statement to successfully complete the registration process. Current language: I certify that my use of the CSMD during this session is in compliance with all applicable statutes and rules state laws, rules, and regulations including the Prescription Safety Act of 2016	Enhancement	Existing functionality
101	BR5.0.18.4	State PMP User Application Support	State Administrators shall have the ability to modify the language in BR5.0.18-BR5.0.18.3 when necessary.	Enhancement	Existing Functionality
102	BR.5.0.18.5	State PMP User Application Functionality	The registered User must acknowledge these statements before access to the State PMP User Application is granted and remains active only for that session.	Existing functionality	Existing Functionality
103	BR.5.0.18.6	State PMP User Application Functionality	These statements are presented each time a registered User logs into the State PMP User Application based on Role.	Existing functionality	Gap
104	BR5.0.19	State PMP User Application: Registration and User Profile	State Administrator(s) shall have the ability to manually override the validation process for scenarios which are not addressed in the current validation rules. Manual override shall be an option for Admin in the Pending registrations and on the User profile page.	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			When manual override option is selected, a reason must be entered Manual override will require an expiration date to be entered		
105	BR5.0.20	State PMP User and Data Collection Applications	Users shall have self-service functionality for password resets	Existing functionality	Existing functionality
106	BR5.1.0	State PMP User Application Registration: Medical Examiners and Delegates	The following fields are required for the medical examiners and their licensed and unlicensed Delegates for registration. State will determine what fields shall be mandatory. <ul style="list-style-type: none"> a. First name b. Middle name c. Last name d. Suffix e. Professional licensure number (if applicable) f. Profession Code/description (if applicable) g. Driver's license number h. Date of birth i. Primary phone or work phone j. Email address k. Occupation (licensed under Title 53) l. Supervisor driver license number needed to create Supervisory relationship 	Existing functionality	Existing functionality
107	BR5.1.0.1	State PMP User Application Registration: Medical Examiners and Delegates	The following search fields from BR5.1.0 shall be added as a gap: <ul style="list-style-type: none"> a. Degree b. State that issued professional license number abbreviation (drop down) c. State that issued driver's license number abbreviation (drop down) d. Cell phone e. Last four (4) digits of Social Security Number f. Specialty (State Medical Examiner, Deputy State Chief Medical Examiner, County Medical Examiner) 	Existing functionality	Gap
108	BR5.1.1	State PMP User	Supervisors with Delegates who require approval to view requested reports shall receive an email	Existing	Existing

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application Delegate permissions	when a Delegate enters information into the State PMP User Application to request a report	functionality	functionality
109	BR5.1.1.1	State PMP User Application - Delegate permissions	For Delegate who has only one Supervisor and that Supervisor revokes the Delegate, the Delegate can still log into application but can only access User profile to add a new Supervisor and Supervisor approval would be needed before Delegate could run patient requests	Existing functionality	Existing functionality
110	BR5.1.1.2	State PMP User Application Delegate permissions	For any Delegate who has no Supervisor, if Delegate tries to generate patient request, system would provide a message that Delegate cannot run a patient request until Supervisor is added and Supervisor approves the supervisory relationship	Existing functionality	Existing functionality
111	BR5.1.1.3	State PMP User Application - Delegate permissions	User profile for APRN, PA or Delegate will show Supervisor(s) and Supervisor(s) location(s) associated with the supervisory relationship	Existing Functionality	Gap
112	BR5.1.2	State PMP User Application - Delegate permissions	Supervisors with Delegates who require approval to view requested reports must then log in and approve Delegate requests for reports and then the report is generated within the system and Delegate is notified via email request has been approved	Existing functionality	Existing functionality
113	BR5.1.2.1	State PMP User Application - Delegate permissions	Delegates that work in the Office of the Inspector General and Tennessee Bureau of Investigations Medicare Fraud Control Unit require approval by Supervisor before reports are viewable by Delegate.	Existing functionality	Existing functionality
114	BR5.1.3	State PMP User Application Delegate permissions	Delegates must login to the application once their Supervisor approves their request for a report to access the requested report. If the Supervisor denies a Delegate's report request, it shall not be available to the Delegate for review	Existing functionality	Existing functionality
115	BR5.1.4	State PMP User Application - Delegate permissions	Prescribers shall be limited to a maximum of two active unlicensed Delegates and unlimited licensed Delegates per list provided by State. TN at this time doesn't allow unlicensed/unregistered Delegates for Pharmacists.	Existing functionality	Gap
116	BR5.1.5	State PMP User Application - Delegate	Supervisors shall approve their Delegate registrations in the State PMP User Application Delegates, APRNs and PAs shall not have access to make requests until approved by their Supervisor	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		permissions	<p>A system generated email shall be sent to the Supervisor for each pending Delegate registration for approval</p> <p>A system generated email shall be sent to the Delegate once the Supervisor approves the Delegate to inform the Delegate their account is approved and the Delegate can now perform patient requests.</p> <p>Templates of email(s) that go to Supervisor or Delegate when establishing or breaking a Supervisory relationship shall be approved by the State</p>		
117	BR5.1.6	State PMP User Application - Delegate permissions	For Delegate who has only one Supervisor and that Supervisor revokes the Delegate, the Delegate can still log into application but can only access User profile to add a new Supervisor and Supervisor approval would be needed before Delegate could run patient requests	Existing functionality	Existing functionality
118	BR5.1.7	State PMP User Application Supervisor permissions	<p>A Supervisor shall be able to revoke a Supervisory relationship.</p> <p>When a Supervisor revokes a relationship the Supervisor would not show in the list of choices for the Delegate to make request on behalf of.</p>	Existing functionality	Existing functionality
119	BR5.1.7.1	State PMP User Application Supervisor permissions	A system generated email shall be sent to the Delegate to notify them the Supervisory relationship has been revoked	Existing functionality	Gap
120	BR5.1.8	State PMP User Application Delegate permissions	<p>A Delegate shall be able to revoke a relationship with a Supervisor.</p> <p>Delegates will be able to delete/add Supervisors from their "user profile" area</p>	Existing functionality	Existing functionality
121	BR5.1.8.1	State PMP User Application Delegate permissions	A system generated email shall be sent to the Supervisor to notify them their Supervisory relationship has been revoked.	Existing functionality	Gap
122	BR5.1.9	State PMP User Application Delegate permissions	<p>Delegates if revoked by one Supervisor will still be able to log into system if Delegate has other Supervisors that Delegate is still performing work on their behalf.</p> <p>If no Supervisory relationship exists, Delegates will only be able to access user profile.</p> <p>The revoked Supervisors would no longer appear in</p>	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			the list for the Delegate to choose when creating a patient request		
123	BR5.1.10	State PMP User Application	Prescribers/Dispensers will have an area that will display the last five patients viewed, or that their Delegate has previously reviewed.	Existing functionality	Existing functionality
124	BR5.2.0	State PMP User Application Delegate permissions: Supervisors	Supervisors must verify that Supervisory relationships are still active at frequency determined by the State. The State would determine the frequency and the Contractor shall make it a variable that can be easily configurable by the State throughout the term of the Contract. <ul style="list-style-type: none"> a. Prompt at log in to indicate to Supervisor this list of Delegates needed to be confirmed or revoked b. The Delegate may bypass the prompt for a maximum of seven (7) days. The Contractor shall provide a message that states that the Supervisor must log in and approve/reapprove your relationship within thirty (30) days or the Delegate will not be able to run patient request. c. The Supervisor may bypass the prompt for a maximum of seven (7) days. The Contractor shall provide a message that states that you have Delegates that need you to approve or reapprove your relationship within thirty (30) days or the Delegate will not be able to run patient requests. 	Existing functionality	Gap
125	BR5.2.1	State PMP User Application Supervisory Relationship History and Audit Trail	Supervisory relationship approve and revoke date (history) must be captured	Existing functionality	Existing functionality
126	BR5.3.0	State PMP User Application Registration: Law Enforcement and Drug Courts	State PMP User Application Users shall be given the following additional registration options to account for law enforcement and drug courts: <ul style="list-style-type: none"> a. Law enforcement officer b. Law enforcement Supervisor c. Drug court judge d. District Attorney or TBI Director 	Enhancement	Enhancement

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
127	BR5.3.0.1	State PMP User Application Registration: Law Enforcement and Drug Courts Supervisors	Language that would appear on page presented to Supervisors listed in BR5.3.0 “I certify the individuals approved by me during this session are agents of a judicial drug task force employed by the United States Department of Justice, law enforcement officers certified pursuant to 38-8-107, a law enforcement officer certified by a state other than Tennessee, a TBI agent, or a drug enforcement administration agent.”	Enhancement	Enhancement
128	BR5.3.1	State PMP User Application Registration: Law Enforcement and Drug Courts	The following fields are required for all law enforcement and drug court Users for registration. State shall have the ability to configure which fields are mandatory. <ul style="list-style-type: none"> a. First name b. Middle name c. Last name d. Agency name e. Agency street address f. Agency city g. Agency state h. Agency zip code i. Agency contact number j. Registrant email address k. Driver’s license number l. Date of birth m. Primary phone or work phone n. Fax number o. Last four (4) digits of Social Security Number 	Enhancement	Existing functionality
129	BR5.3.1.1	State PMP User Application Registration: Law Enforcement and Drug Courts	The following registration fields from BR5.3.1 shall be added as an enhancement: <ul style="list-style-type: none"> a. Judicial District (drop down, 31 districts plus TBI as an option) b. Badge number, ID number, commission number, or Board of Professional Responsibility (BPR) license number 	Enhancement	Enhancement
130	BR5.3.1.2	State PMP User Application Registration:	The following registration fields from BR5.3.1 shall be added as a gap: <ul style="list-style-type: none"> a. State that issued driver’s license number 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Law Enforcement and Drug Courts	b. Cell Phone		
131	BR5.3.2	State PMP User Application Registration: Law Enforcement	<p>The following fields are required for law enforcement officers in addition to the law enforcement and drug court registration fields. State shall have the ability to configure which fields are mandatory.</p> <ul style="list-style-type: none"> a. Title (drop down) <ul style="list-style-type: none"> 1. Agent 2. Sergeant 3. Detective 4. Lieutenant 5. Investigator 6. Patrol officer 7. Police officer 8. Captain 9. Investigator 10. TBI - Special agent in charge 11. TBI - Assistant special agent in charge b. Agency Supervisor name c. Agency Supervisor email address d. Agency Supervisor phone number e. Agency Supervisor driver's license number f. Issuing state of driver's license <p>State PMP User Application registration shall not be approved for law enforcement officers until approved by the registered law enforcement Supervisor(s) identified in their registration</p>	Enhancement	Enhancement
132	BR5.3.3	State PMP User Application Registration: Law Enforcement	<p>The following fields are required for law enforcement Supervisors in addition to the law enforcement and drug court registration fields. State shall have the ability to configure which fields are mandatory.</p> <ul style="list-style-type: none"> a. Title (drop down) <ul style="list-style-type: none"> 1. Drug task force manager 2. TBI – Deputy director 3. TBI – Assistant director 4. Sheriff 	Enhancement	Enhancement

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>5. Chief of police</p> <p>b. District Attorney or TBI Director name</p> <p>c. District Attorney or TBI Director email address</p> <p>d. District Attorney or TBI Director phone number</p> <p>e. District Attorney or TBI Director driver's license number</p> <p>f. Issuing state of driver's license</p> <p>State PMP User Application registration shall not be approved for law enforcement Supervisors until approved by the registered District Attorney or TBI Director identified in their registration.</p>		
133	BR5.3.4	State PMP User Application Registration: Law Enforcement and Drug Courts	<p>The following fields are required for District Attorneys and TBI Directors in addition to the law enforcement and drug court registration fields. State shall have the ability to configure which fields are mandatory.</p> <p>a. Title (drop down)</p> <p>1. District Attorney</p> <p>2. TBI Director</p>	Enhancement	Enhancement
134	BR5.3.5	State PMP User Application Registration: Drug Courts	<p>The following fields are required for the drug court judges in addition to the law enforcement and drug court registration fields. State will determine what fields shall be mandatory.</p> <p>a. Board of Professional Responsibility (BPR) license number</p> <p>b. State that issued professional license number</p> <p>c. Title (automatically defaults to drug court judge)</p> <p>d. District Attorney email for Judicial District of the judge and drug court</p> <p>e. District Attorney driver's license number</p> <p>f. Issuing state of the driver's license</p> <p>State PMP User Application registration shall not</p>	Enhancement	Enhancement

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			be approved for drug court judges until approved by the registered District Attorney identified in their registration.		
135	BR6.0.0	State PMP User Application Patient Records	Each patient record shall have a unique identifier. The unique identifier shall be used to maintain a relationship between a patient and a prescription record and stored in the database.	Existing functionality	Existing functionality
136	BR7.0.0	State PMP User Application Communication	State PMP User Application registrants shall be able to communicate with a designated State Administrator(s) through the State PMP User Application via an embedded email link. The email should be directed to CSMD.ADMIN@TN.GOV	Existing functionality	Gap
137	BR.7.0.1	State PMP User Application Configuration	The Contractor shall provide functionality to upload and display types of images the State and Contractor mutually agree upon	Existing functionality	Existing functionality
138	BR7.1.0	State PMP User Application Communication	<p>State Administrator(s) shall have the ability to send communications to registered Users through the State PMP User Application:</p> <ul style="list-style-type: none"> a. Create new messages and include Subject and text <ul style="list-style-type: none"> 1. When you choose a Role there will be a drop down list of registrants in that Role to search for specific Users or include all Users in that Role 2. Organization and User Name to appear on screen as many Users in system with same first name and last name b. Select Users by Role only to create targeted messages. c. Ability to search by First Name or Last Name or combination to include single Users potentially from a different Role for inclusion to receive the message 	Existing functionality	Existing functionality
139	BR7.1.0.1	State PMP User Application Communication	Users shall have the ability to include images in communications.	Existing functionality	Gap
140	BR7.1.0.2	State PMP User	In communications, Users shall also be able to select Users by Role plus Specialty to create	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application Communication	targeted messages.		
141	BR7.1.1	State PMP User Application Communication	The PMP must send batch confirmations to State Administrator(s) of success or failure of message to recipients who receive messages in BR7.1.0 Recipient must have enough information to identify the sender of the response. This communication shall includes <ol style="list-style-type: none"> 1. First name 2. Last name 3. Email address 4. A direct link to the State PMP website in the email 	Existing functionality	Gap
142	BR8.0.0	State PMP User Application PMPi Data Sharing	The Contractor shall provide in the application the functionality to connect to PMPi to allow interstate data sharing with other states that the State has turned on in the PMPi console	Existing functionality	Existing Functionality
143	BR8.0.1	State PMP User Application PMPi Data Sharing	The Contractor shall provide in the application the functionality to limit PMPi data request to only accept and use patient First Name, patient Last Name and Date of Birth from requesting state. Any other fields submitted by the requesting state will be excluded. This will prevent the CSMD algorithm from returning multiple patients in a PMPi request by allowing only exact matches on patient First Name, patient Last Name and Date of Birth to the requesting state.	Enhancement	Existing functionality
144	BR9.0.0	State PMP User Application Prescriber Records	Contractor must group Prescribers who have multiple DEA numbers and assign them a Prescriber Consolidation ID that is stored in the database.	Enhancement	Enhancement
145	BR9.0.1	State PMP User Application – Supervisory Relationships Customer Support (This is a support SLA)	The Contractor shall respond to the request from the State regarding Supervisory relationships issues and resolution must occur within three (3) business days.	Enhancement	Enhancement
146	BR10.0.0	State PMP	MME values shall use the CDC MME Conversion	Existing	Existing

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		User Application MME Conversions	logic (including any sliding scale logic)	functionality	functionality
147	BR10.0.1	State PMP User Application MME Conversions	MME values shall use other MME conversion in state laws, rules, and regulations if the State deems necessary.	Enhancement	Enhancement
148	BR11.0.0	State PMP User Application Clinical Notification Preferences	Only registered Users who prescribe with a DEA number shall receive the following options when registering to choose who will receive clinical notifications based on Role: <ul style="list-style-type: none"> • User Only • Delegate • Delegate and Supervised APRN/PA All of the above	Existing functionality	Gap
149	BR11.0.1	State PMP User Application Clinical Notification Preferences	Any User in BR11.0.0 shall have the functionality in the user profile to change clinical notification preference	Existing functionality	Gap
150	BR12.0.0	State PMP User Application Multiple Locations	Users can register and manage/add/remove multiple locations related to their User record Number of locations for each User should not have a limit and all Roles shall have the ability to have multiple locations	Existing functionality	Gap
151	BR12.0.1	State PMP User Application Multiple Locations	Users shall enter the following information for location: <ol style="list-style-type: none"> a. Name of practice (organization) b. Address 1 c. Address 2 d. City e. State abbreviation (drop down) f. Zip g. Work phone and extension if applicable h. Fax number i. DEA number associated with the location address 	Existing functionality	Existing Functionality
152	BR13.0.0	State PMP User	All Roles in the State PMP User Application shall have functionality for multiple locations.	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application Registration Multiple locations			
153	BR13.1.0	State PMP User Application Registration/ User Profile Multiple locations: Prescribers or Pharmacist	<p>Prescriber locations should contain the following minimum information:</p> <ul style="list-style-type: none"> a. Organization name b. Organization address c. Organization street d. Organization city e. Organization state abbreviation (drop down) f. Organization zip g. Organization phone h. DEA number associated with the practice site (Prescribers may work at multiple practice sites and use one DEA number or they may have separate DEA numbers for practice sites. DEA number could be listed in multiple practice locations. In the case of Pharmacist this is an optional field and would be the DEA number of the pharmacy where they work unless not working in a pharmacy setting (i.e. pharmacy consultant, TennCare, etc.) i. Prescriber and Dispenser Delegates can have multiple Supervisors and practice locations and would need to be connected to Supervisor using the driver license that would show all the Supervisor practice locations for the Delegate to choose the appropriate practice location to create the connection. 	Existing functionality	Gap
154	BR13.2.0	State PMP User Application Registration Multiple locations: APRN and PA	<p>APRN and PA locations should contain the following minimum information:</p> <ul style="list-style-type: none"> a. Organization name b. Organization address c. Organization street d. Organization city e. Organization state abbreviation (drop down) f. Organization zip g. Organization phone h. DEA number associated with the practice site (Prescribers may work at multiple 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>practice sites and use one DEA number or they may have separate DEA numbers for practice sites.)</p> <ul style="list-style-type: none"> i. Each practice location must have a Supervisor associated with it j. APRN or PA can have multiple Supervisors and practice locations and would need to be connected to Supervisor using the driver license that would show all the Supervisor practice locations for the Delegate to choose the appropriate location to create the connection. APRN or PAs can have multiple Supervisors associated to a single practice site. 		
155	BR13.2.1	State PMP User Application Registration Multiple locations: APRN and PA	<p>APRN and PA Users shall be required to have a Supervisor with a Role of medical doctor or osteopathic physician. PAs and orthopedic PAs may also have a podiatrist as a Supervisor</p> <p>State shall have the flexibility in the future to allow APRNs and PAs to register and have access without a Supervisor should State laws or rules change.</p>	Existing functionality	Gap
156	BR13.2.2	State PMP User Application Registration	State laws, rules, and regulations shall determine what Roles can have Delegates.	Existing functionality	Gap
157	BR13.3.0	State PMP User Application Registration Multiple locations: Delegates	<p>Delegate locations should contain the following minimum information:</p> <ul style="list-style-type: none"> a. Organization name b. Organization address c. Organization street d. Organization city e. Organization state abbreviation (drop down) f. Organization zip g. Organization phone h. Each practice location must have a Supervisor associated with it i. Delegates can have multiple Supervisors and locations and need to be connected to Supervisor using the driver license that would show all the Supervisor locations for the Delegate to choose the appropriate location to create the 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			connection.		
158	BR13.4.0	State PMP User Application Registration Multiple locations: Medical Examiner Delegates	Medical examiner licensed and unlicensed Delegate registrations shall require approval by State PMP User Application Administrator	Enhancement	Existing functionality
159	BR13.5.0	State PMP User Application: Multiple Locations	Supervisor user profile must present Delegates and location of the Delegate being supervised Delegate user profile must present location of the Supervisor in the relationship Each supervisory relationship should be able to view, approve or revoke the relationship based on relationship and location.	Existing functionality	Existing Functionality (Partial – no multiple locations)
160	BR14.0.0	State PMP User Application Request	Included in BR14.X will be the requests for patients, Dispensers, and Prescribers.	Existing functionality	Existing Functionality
161	BR14.1.0	State PMP User Application Patient Request	The patient request screen will require the following information to be display and required fields will have a type of indicator to let the User know which fields are required by State. The screen will also display the states that share State PMP data based on PMPi Roles. State will provide to vendor required fields. a. Patient Rx Request tutorial button at the top b. Patient first name c. Patient last name d. Patient date of birth (DOB) e. Patient phone number f. Patient street address g. Patient city h. Patient state abbreviation (drop down) i. Patient zip code j. Patient alias (optional, up to four) k. Prescription fill date range boxes (State can set the default date range) l. PMP interconnect search check boxes (based on Roles from PMPi if this Role can initiate an interstate search)	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			m. Element to choose how they would like to receive the report (PDF, HTML, CSV)		
162	BR14.1.1	State PMP User Application Patient Request	<p>The following fields from BR14.1.0 shall be added as a gap:</p> <ul style="list-style-type: none"> a. Question with checkbox – Is this request being run because of suspected overdose or poisoning. (Official language to go on patient request shall be approved by State prior to implementation) b. Ability for Delegates to choose what Supervisor and practice location they are running the report on behalf of (State will determine which Delegate Roles must choose the Supervisor the Delegate is running report on behalf of) 	Existing functionality	Gap
163	BR14.2.0	State PMP User Application Law Enforcement Requests	Law enforcement shall be able to generate reports on any patient, Prescriber, or Dispenser. They do NOT need approval for requests. The registered User will fill out the information required on the request screen to generate a report.	Enhancement	Existing functionality
164	BR14.2.1	State PMP User Application Law Enforcement Patient Requests	<p>The patient request screen for law enforcement will require the following information to be display and required fields will have a type of indicator to let the User know which fields are required by State. The screen will also display the states that share State PMP data based on PMPi Roles (only states that would allow law enforcement would appear). State will provide to vendor required fields. State requires the functionality to configure which fields will be required.</p> <ul style="list-style-type: none"> a. Case number (The case number recorded here will only be used in the report generated but is not part of the search criteria.) b. Patient first name c. Patient last name d. Patient Date of Birth (DOB) e. Patient phone number f. Patient street address g. Patient city h. Patient State i. Patient zip code j. Prescription fill date range boxes 	Enhancement	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>(State can set the default date range)</p> <ul style="list-style-type: none"> k. PMP interconnect search check boxes (based on Roles from PMPi if this Role can initiate an interstate search) l. Ability for User to generate the report as PDF, HTML, or CSV <p>The patient report generated for law enforcement will be the same as detailed in BR16.0.0 (patient prescription history report), with the added case number.</p>		
165	BR14.2.1.1	State PMP User Application Law Enforcement Patient Requests	<p>The following fields from BR14.2.1 shall be added as a gap:</p> <ul style="list-style-type: none"> a. Question with checkbox – Is this request being run because of suspected overdose or poisoning. (Official language to go on patient request shall be approved by State prior to implementation) b. Delegates would be required to choose what Supervisor and agency location they are running the report on behalf of (State will determine which Delegate Roles must choose the Supervisor the Delegate is running report on behalf of) 	Existing functionality	Gap
166	BR14.2.2	State PMP User Application Law Enforcement Dispenser Requests	<p>The Dispenser request screen for law enforcement will require the following information to be display and required fields will have an indicator to let the User know which fields are required by State. State must have ability to configure required fields.</p> <ul style="list-style-type: none"> a. DEA number b. Case number (required) (The case number recorded here will only be used in the report generated but is not part of the search criteria.) c. Prescription fill date range boxes (State can set the default date range) d. Ability for User to generate the report as PDF, HTML, or CSV <p>The Dispenser report generated for law enforcement will be the same as detailed in BR20.16.0 (pharmacy prescription history report),</p>	Enhancement	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			with the added case number.		
167	BR14.2.3	State PMP User Application Law Enforcement Prescriber Requests	<p>The Prescriber request screen for law enforcement will require the following information to be display and required fields will have an indicator to let the User know which fields are required by State. State must have ability to configure required fields.</p> <ul style="list-style-type: none"> a. DEA number b. Case number (required) (The case number recorded here will only be used in the report generated but is not part of the search criteria.) c. Prescription fill date range boxes (State can set the default date range) d. Ability for User to generate the report as PDF, HTML, or CSV <p>The Prescriber report generated for law enforcement will be the same as detailed in the Prescriber report (Prescriber prescription history report), with the added case number. (BR20.10.0)</p> <p>Dispenser and Prescriber report criteria must allow law enforcement to look up <u>ANY</u> DEA number.</p>	Enhancement	Existing functionality
168	BR14.3.0	State PMP User Application Drug Court Patient Requests	<p>The patient request screen will require the following information to be display and required fields will have an indicator to let the User know which fields are required by State. The screen will also display the states that share State PMP data based on PMPi Roles (if that Role is allowed in the other state). State must have ability to configure required fields.</p> <ul style="list-style-type: none"> a. Case number (not part of search, but they must provide this information) b. Patient first name c. Patient last name d. Patient alias (optional, up to four) e. Patient date of birth (DOB) f. Patient phone number g. Patient street address h. Patient city 	Enhancement	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> i. Patient State j. Patient zip code k. Prescription fill date range boxes (State can set the default date range) l. PMP interconnect search check boxes (based on Roles from PMPi if this Role can initiate an interstate search) m. Question with checkbox – Is this request being run because of suspected overdose or poisoning. (Official language to go on patient request shall be approved by State prior to implementation) n. Ability for User to generate the report as PDF, HTML, or CSV <p>The patient report generated for drug courts will be the same as detailed in BR16.0.0 (patient prescription history report), with the added case number.</p>		
169	BR14.3.1	State PMP User Application Drug Court Patient Requests	For each report generated by a drug court judge, the District Attorney identified as the Supervisor will receive an email that a request from a registered drug court judge has been initiated a request and needs approval. Once the District Attorney approves the request the registered requestor will receive an email the request has been approved. The Registered Requestor will log into the State PMP User Application to view the report.	Enhancement	Enhancement
170	BR15.0.0	State PMP User Application Bulk Patient Search	Registered Users shall have the ability to make bulk patient requests using a CSV file upload. If the submitter of the bulk request is a Delegate, the Supervisor would be able to view any of those patient reports that were generated from the bulk request. The patient reports shall contain the same information as a patient report generated from the patient request screen. User shall be able to receive the report in PDF or CSV	Existing functionality	Existing functionality
171	BR16.0.0	State PMP User	A patient request report shall include the following	Existing	Existing

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		<p>Application Patient Request Report</p>	<p>information in the header:</p> <ul style="list-style-type: none"> a. Seal of State (PDF and HTML versions) b. Tennessee Controlled Substance Monitoring Program: Board of Pharmacy-Department of Health (address, city, state zip code, phone number, email and fax number) (PDF and HTML versions) c. Date range (PDF and HTML versions) (State will determine default date range) d. Patient name e. Linked records <ul style="list-style-type: none"> 1. Report criteria <ul style="list-style-type: none"> i. First name ii. Last name iii. Date of birth iv. Zip code v. City vi. State abbreviation vii. Phone viii. Patient ID ix. Patient Consolidation ID <p>The patient report shall display the information listed below at a minimum but could display additional elements if standard in the product</p> <ul style="list-style-type: none"> a. Prescriptions <ul style="list-style-type: none"> 1. Filled date 2. Patient ID 3. Written date 4. Quantity 5. Days' Supply 6. Prescriber Name 7. Prescription number 8. Dispenser Name 9. Dispenser Telephone number 10. Refill number 11. Active prescription, (Y/N), 12. MME per day 13. Payment type 14. PMP where data is originated 15. Buprenorphine product milligrams per 	functionality	Functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>day</p> <p>b. Prescribers</p> <ol style="list-style-type: none"> 1. Prescriber name 2. Prescriber DEA number (PDF & CSV version only) 3. Prescriber address 4. Prescriber city 5. Prescriber state abbreviation (drop down) 6. Prescriber zip code 7. Prescriber phone number shall be populated from ASAP data when collected <p>c. Dispensers</p> <ol style="list-style-type: none"> 1. Dispenser 2. Dispenser DEA number (PDF & CSV version only) 3. Address 4. City 5. State abbreviation (drop down) 6. Zip code 7. Phone number shall be populated from ASAP data when collected <p>d. Clinical Risk Indicators (CRI), Disclaimer and or related messaging (PDF and HTML versions only)</p> <p>e. Summary (PDF and HTML version only)</p> <ol style="list-style-type: none"> 1. Prescription count 2. Prescriber count 3. Type of payment 4. Active daily MME amount 5. Buprenorphine product milligrams per day <p>f. Patient reports shall display common MME conversions from the CDC or State and will be displayed near the end of the patient report</p>		
172	BR16.0.0.1	State PMP User Application Patient Request	State will allow Contractor algorithm to link patients and create a Patient Consolidation ID.	N/A	Existing functionality
173	BR16.0.0.	State PMP User	The State PMP User will see the Patient Consolidation IDs and be able to choose at that	N/A	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
	2	Application Patient Request	level or click to see patient associated with that Patient Consolidation ID and choose at that level what Patient IDs will be included to generate the patient report. Once State PMP User identifies the Patient Consolidation ID(s) or Patient ID (s) only then will the calculations be performed for CRI(s) or MMEs. The State PMP User will also have the option to select “none of these” if the State PMP User believes that none of the Patient Consolidation ID(s) or Patient ID(s) are their patient.		
174	BR16.0.2	State PMP User Application Clinical Risk Indicators	The State and Contractor will collaborate to develop new graphical icons for CRIs. There would be unique graphical icons for each type of CRI and each would have a text description and be displayed prominently near the top of the report and the development shall be complete prior to migration. Any graphical representations of icons within this document (BR17.2.0-BR17.3.1) are subject to change.	Enhancement	Gap
175	BR17.1.0	State PMP User Application Clinical Risk Indicators: NAS	If a patient record is displayed in the application for a female of child bearing age (15-45 years of age), an indicator for Neonatal Abstinence Syndrome (NAS) shall be displayed Indicate in system if female and child bearing age (15-45 years of age) by a type of color different from normal (possibly pink) –This is a CRI: women of child bearing age	Existing functionality	Existing functionality
176	BR17.1.0.1	State PMP User Application Clinical Risk Indicators: NAS	The CRI for NAS shall be displayed by the Patient ID.	Existing functionality	Gap
177	BR17.1.1	State PMP User Application Clinical Risk Indicators: NAS	If a patient has a NAS CRI, a Text warning (bold or red) that appears when patient is looked up that is female and between (15-45 years of age) Possible text: “Please remember that narcotic prescriptions for women of child bearing age could result in NAS should pregnancy occur; please discuss with your patient methods to prevent unintended pregnancy.”	Existing functionality	Existing functionality
178	BR17.2.0	State PMP User Application Clinical Risk	If a patient has multiple Prescribers equal to four (4) providers within a ninety (90) day period, a CRI shall be displayed as	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Indicators: Multiple Prescribers	 =4 in 90 days		
179	BR17.2.1	State PMP User Application Clinical Risk Indicators: Multiple Prescribers	If a patient has multiple Prescribers equal to five (5) or more providers within a ninety (90) day period, a CRI shall be displayed as  >=5 in 90 days	Existing functionality	Gap
180	BR17.2.2	State PMP User Application Clinical Risk Indicators: Multiple Dispensers	If a patient has multiple Dispensers equal to five (5) or more pharmacies within a ninety (90) day period, a CRI shall be displayed as  >=5 in 90 days	Existing functionality	Gap
181	BR17.2.3	State PMP User Application Clinical Risk Indicators: Multiple Dispensers	If a patient has multiple Dispensers equal to four (4) pharmacies within a ninety (90) day period, a CRI shall be displayed as  =4 in 90 days	Existing functionality	Gap
182	BR17.3.0	State PMP User Application Clinical Risk Indicators: Morphine Milligram Equivalents	If a patient has Morphine Milligram equivalent equal to one hundred twenty (120) or more cumulative MME, a CRI shall be displayed as:  >=120 Active Cumulative MME per day	Existing functionality	Gap
183	BR17.3.1	State PMP User Application Clinical Risk Indicators: Morphine Milligram Equivalents	If a patient has Morphine Milligram equivalent more than or equal to ninety (90) but less than one hundred twenty (120) or more cumulative MME, a CRI shall be displayed as:  >=90 but <120 Active Cumulative MME per day	Existing functionality	Gap
184	BR17.4.0	State PMP User Application Clinical Risk Indicators:	The State will provide list to Contractor to identify patients in State PMP User Application to associate this indicator to that patient. The State will provide file at a frequency to be determined by State	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		TennCare Pharmacy Lock In			
185	BR17.5	State PMP User Application Clinical Risk Indicators: Combo Benzodiazepine/Opioid	State and Contractor will work together to determine requirements to identify patients who are taking a Combination of prescriptions for Benzodiazepine/Opioid	Enhancement	Existing functionality
186	BR17.6	State PMP User Application Clinical Risk Indicators: Combo Benzodiazepine/Opioid/Carisoprodol	State and Contractor will work together to determine requirements to identify patients who are taking a Combination of prescriptions for Benzodiazepine/Opioid/Carisoprodol	Enhancement	Enhancement
187	BR18.0.0	State PMP User Application Management	<p>State Administrator(s) will have the ability to perform the following functions in State PMP User Application Create User accounts</p> <ol style="list-style-type: none"> a. Correct User account setting <ol style="list-style-type: none"> 1. Reset passwords by sending a link to User 2. Account approval for pending accounts 3. Update all fields in the User profile b. Save information in any field of the User profile including the notes section of the User profile as long as profile includes a User login. c. The ability to run patient reports when necessary for law enforcement and judicial team d. If an account is locked the State Administrator(s) will have the ability to unlock the account e. The Contractor shall provide a way for the State Administrator(s) to enter and save notes on active and inactive User profiles with date and time stamp. 	Existing functionality	Existing functionality
188	BR18.0.1	State PMP User Application	<p>State Administrator(s) will have the ability to perform the additional functions identified as gaps:</p> <ol style="list-style-type: none"> a. Save information in any field of the User 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Management	<p>profile including the notes section of the User profile as long as profile includes a User login.</p> <p>b. The Contractor shall provide a way for the State Administrator(s) to enter and save notes on active and inactive User profiles with date and time stamp.</p>		
189	BR18.1.0	State PMP User Application Management : Roles	State Administrator(s) will have the ability to include any available elements offered in the standard dashboard to State Users.	Existing functionality	Existing functionality
190	BR18.2.0	State PMP User Application Management : FAQs	Frequently Asked Questions (FAQs) shall be specific to State PMP User Application functionality provided by the Contractor. The State will write the FAQs and provide them to the Contractor or upload through a provided interface.	Existing functionality	Existing functionality
191	BR19.0.0	State PMP User Application Customer Support	<p>State PMP User Application Users can report issues for the State PMP User Application that will be routed to the Contractor and will be able to include:</p> <ol style="list-style-type: none"> Subject Way to choose category to indicate type of issue Text area to fully describe the issue 	Existing functionality	Existing functionality
192	BR19.0.1	State PMP User Application Reporting: Customer Support	<p>State Administrator(s) will receive a weekly report of all the issues reported, date reported and resolution when issue is resolved and date resolved, count of issues, count of issues opened and resolved.</p> <p>The weekly report will be shared with the State and the format will be mutually agreed upon by State and Contractor.</p>	Enhancement	Existing functionality
193	BR19.0.2	State PMP Data Collection and User Applications Reporting Customer Support	<p>State Administrator(s) will receive a weekly report detailing at a minimum the following elements of support issues submitted to the Helpdesk for the week prior for both State PMP Data Collection Application and State PMP User Application:</p> <ul style="list-style-type: none"> Created by Subject Type View status (open, escalated, resolved) Create date Resolution date 	Enhancement	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
194	BR20.0.0	State PMP User Application Summary Reporting Features	<p>All State PMP User summary reports generated for State PMP registered User shall have the following features at a minimum:</p> <ol style="list-style-type: none"> a. The data will be a rolling twenty-six (26) months b. Exportable to CSV, and PDF c. All fields shall be searchable, either individually or in conjunction with any other field 	Enhancement	Existing functionality
195	BR20.1.0	State PMP User Application Reporting: Request History	<p>Supervisors must be able to audit the request history of any combination of themselves and their Delegates.</p> <ul style="list-style-type: none"> • Request History view will contain these data fields: <ol style="list-style-type: none"> i. Patient first name ii. Patient last name iii. Requestor iv. Supervisor of requestor if requestor is a Delegate v. Date of birth • User will have ability to export to CSV and PDF 	Existing functionality	Existing functionality
196	BR20.1.1	State PMP User Application Reporting: Request History	<p>Supervisors at any time may log into the State PMP User Application and view any reports generated by any Delegate or drug court judge in their district. TBI Supervisors will be able to view any reports generated by any TBI Delegates. When Supervisors are reviewing/auditing their Delegate's request there must be language on the screen used to view the list of reports generated regarding any suspicious request made must be reported to the State PMP Administrator by email or phone.</p> <p>Proactive notifications for Supervisors of drug court judges or law enforcement. Each week the Supervisors will receive an email to advise the Supervisor if any reports have been generated in their district or agency. This email will encourage them to audit weekly.</p> <p>Supervisors of law enforcement and drug courts must have the ability to audit Delegates at any time. The audit functionality must contain a feature where Supervisor has to acknowledge the</p>	Enhancement	Enhancement

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			reports reviewed are appropriate.		
197	BR20.2.0	State PMP User Application Reporting: Prescriber Search Report	<p>Prescriber must have the ability to run the report in the State PMP User Application to look at their own prescribing history or any combination that includes their prescribing Delegates.</p> <ul style="list-style-type: none"> a. Prescriber would enter DEA number(s) and a time frame to run a report for self-reporting or would choose one or many of prescribing Delegates to include for Prescriber Supervisory report. 	Existing functionality	Existing Functionality
198	BR20.2.0.1	State PMP User Application Reporting: Prescriber Search Report	<p>Prescriber must have the functionality to generate a report and the minimum search fields available will be:</p> <ul style="list-style-type: none"> a. Patient first name b. Patient last name c. Patient date of birth d. Patient street e. Patient city f. Patient state abbreviation (drop down) g. Patient zip <p>The output of this report shall contain these data fields:</p> <ul style="list-style-type: none"> a. Patient first name b. Patient last name c. Patient date of birth d. Patient street e. Patient city f. Patient state abbreviation g. Fill date h. Product strength i. Product form j. Quantity k. Days supplied l. Written date m. Prescription number n. New/refill code o. Pharmacy DEA number p. Payment classification 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> q. Pharmacy name r. Pharmacy street s. Pharmacy city t. Pharmacy state abbreviation (drop down) u. Pharmacy phone number • User will have ability to export to CSV and PDF 		
199	BR20.3.0	State PMP User Application Reporting: State Administrator(s) User Reports	<p>State Administrator(s) shall have the ability to access User activity information and listed is the minimum requirements:</p> <ul style="list-style-type: none"> a. The search query criteria will allow for search by date range. b. The State Administrator(s) shall create a report and the report must be exportable to CSV and PDF c. Must have functionality to create a report that could be based on one or many request types; time frame; one or many Role types; one or many specialties; requestor, patient last name, patient first name, and patient date of birth. The State Administrator(s) will be able to choose minimum data elements or all data elements to create the report. d. The Contractor shall provide search capability to search prescriptions, patients, Prescribers and Dispensers by any combination (of all) fields available within the State Administrator(s) User reporting. e. Search for all Users in specific Role and Specialty and display information contained in the User profile in the output (only applicable to queries that utilize the User Profile information) 	Partial Enhancement	Existing functionality
200	BR20.3.1	State PMP Data Collection Application Reporting: Admin User Reports	<p>The system shall provide monitoring that each DEA Dispenser has submitted data on the required schedule, and for notifying both the Central Reporter/software vendor (where applicable), DEA Dispenser and State of any failure to submit.</p> <ul style="list-style-type: none"> a. If DEA Dispenser has registered and reported to the State PMP Data Collection Application and then DEA Dispenser stops reporting according to the rules for that submitter as dictated by the State, the system must communicate to the Central 	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>Reporter (where applicable) and DEA Dispenser that DEA Dispenser is delinquent.</p> <p>b. If the data is not corrected and returned by the State established deadline, a system report generated on DEA Dispensers who have failed to submit shall be accessible to the State. Report shall include at a minimum all fields necessary to positively identify the DEA Dispenser, location, contract information and if reported by Central Reporter on behalf of this DEA Dispenser.</p>		
201	BR20.3.2	State PMP Data Collection Application Reporting: Admin User Reports	An automated report must be sent to the Central Reporter/software vendor (where applicable) and DEA Dispenser who has not reported dispensations in the last thirty (30) days after reporting a minimum of twice per month over the last three (3) months and audit will occur monthly by Contractor.	Enhancement	Enhancement
202	BR20.4.0	State PMP User Application Reporting: State Administrator(s) User Audit	<p>State Administrator(s) must be able to audit all Users and their Delegates by Role and include the audit request history of Role and their direct or indirect Delegates if applicable.</p> <ul style="list-style-type: none"> • Request History view will contain these data fields: <ul style="list-style-type: none"> i. Patient first name ii. Patient last name iii. Requestor iv. Supervisor of requestor if requestor is a Delegate v. Date of birth • Ability to export to CSV and PDF 	Existing functionality	Existing functionality
203	BR20.5.0	State Reporting Tool (with access to State PMP Data Collection and User Applications Data)	<p>The State Administrator(s) shall have the functionality to access a configurable ad-hoc reporting tool with the following functionality as examples</p> <ul style="list-style-type: none"> a. Improved compatibility with interstate data sharing hub to determine if Users are meeting State compliance requirements. b. Report to identify Prescribers where data indicates a high MME 	Will address as change order once elements are known about law enforcement and drug courts	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Reporting: State Administrato r(s) Ad-hoc	<p>prescribing.</p> <ul style="list-style-type: none"> c. Ability to receive a report to see who the Contractor has sent a communication indicating they are potentially delinquent in dispensing. d. Ability to create a report that states what ASAP version that each Dispenser is using for reporting. 		
204	BR20.6.0	State Reporting Tool (with access to State PMP Data Collection and User Applications Data) Reporting: Admin Prescription Search by Patient	<p>The State Administrator(s) shall have the functionality to generate prescription reports by patient and the minimum fields available will be:</p> <ul style="list-style-type: none"> a. Patient first name b. Patient last name c. Date of birth d. Prescriber DEA number e. Dispenser DEA number f. Beginning timeframe g. Ending timeframe h. Date filled i. Date written j. Days' supply k. Ingredient l. Patient address (Street, City, State, Zip) m. Product n. Quantity o. Timeframe <p>The search criteria must allow one or many of the fields above to be used</p> <p>Report output must contain the fields offered in search at a minimum</p>	Existing functionality	Existing functionality
205	BR20.7.0	State Reporting Tool (with access to State PMP Data Collection and User Applications Data) Reporting:	<p>The State Administrator(s) shall have the functionality to generate prescription reports by prescription using various data fields. State Administrator(s) must have the functionality to generate a report and the minimum fields available will be:</p> <ul style="list-style-type: none"> a. Prescription number b. Dispenser DEA number c. Prescriber DEA number d. Date filled from 	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Admin Prescription Search	<ul style="list-style-type: none"> e. Date filled to f. Dispenser name g. Patient last name h. Patient first name i. Patient middle name <p>The search query criteria must allow one or many of the fields above to be used</p> <p>View the details of the prescription that are returned from the search</p> <p>Report output must contain the fields offered in search at a minimum</p> <ul style="list-style-type: none"> a. NCPDP Provider number b. NPI number c. DEA number d. Dispenser name e. Contact last name f. Contact First name g. Chain site number h. Contact number i. Address1 j. Address 2 k. City l. State abbreviation m. Zip n. Or any other fields added in the ASAP format <p>The search query criteria must allow one or many of the fields above to be used</p>		
206	BR20.8.0	State Reporting Tool (State PMP User Application and Data Collection Application Data) Reporting: Admin Patient Search	<p>The State Administrator(s) shall have the functionality to generate a patient report and the minimum fields available are listed below but the filters will be modifiable:</p> <ul style="list-style-type: none"> a. Patient ID b. Date of birth c. Drug ingredients d. Patient first name e. Patient last name f. Patient middle name g. Gender h. Dispenser DEA number i. Dispenser status 	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> j. Phone number k. Prescriber DEA number l. Practitioner Status m. Product name n. Patient state abbreviation (drop down) o. Patient street p. Timeframe q. ID type r. ID number s. Issuing state t. Species code u. Location v. Or any other field contained in the ASAP format <p>The search query criteria must allow one or many of the fields above to be used.</p> <p>Report output must contain the fields offered in search and listed below at a minimum</p> <ul style="list-style-type: none"> a. Patient zip b. Fill date c. Product strength d. Product form e. Quantity f. Days' supply g. Prescriber first name h. Prescriber last name i. Prescriber street j. Prescriber city k. Prescriber state abbreviation l. Prescriber zip m. Prescriber phone n. Written date o. Prescription number p. Daily MME q. Indicator if prescription is active r. Dispenser name s. Dispenser street address t. Dispenser city u. Dispenser state abbreviation 		

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> v. Dispenser zip w. Dispenser phone x. Payment classification 		
207	BR20.9.0	State Reporting Tool (with access to State PMP User Application Data) Reporting: Admin Prescribing History Search	<p>The State Administrator(s) shall have the functionality to generate a Prescriber reports to view prescribing history in the State PMP User Application</p> <ul style="list-style-type: none"> a. Prescriber DEA number(s) b. Search timeframe c. Patient first name d. Patient last name e. Patient date of birth <p>The search query criteria must allow one or many of the fields above to be used</p> <p>Report output must contain the fields offered in search plus those listed below at a minimum:</p> <ul style="list-style-type: none"> a. Patient street b. Patient city c. Patient state abbreviation d. Patient zip e. Fill date f. Product strength g. Product form h. Quantity i. Days supplied j. Written date k. Prescription number l. New/refill code m. Pharmacy DEA number n. Payment classification o. Pharmacy name p. Pharmacy street q. Pharmacy city r. Pharmacy state abbreviation s. Pharmacy zip t. Pharmacy phone number <ul style="list-style-type: none"> • User will have ability to export to CSV and PDF 	Existing functionality	Existing functionality
208	BR20.10.0	State Reporting Tool (with	<p>The State Administrator(s) shall have the functionality to generate a Prescriber reports to view prescribing history.</p>	Existing functionality	Existing Functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		access to State PMP Data Collection and User Applications Data) Reporting: Admin Dispenser Prescription History Report	<ul style="list-style-type: none"> a. Dispenser DEA number b. Search timeframe c. Patient first name d. Patient last name e. Patient date of birth The search query criteria must allow one or many of the fields above to be used Report output must contain the fields offered in search plus those listed below at a minimum: <ul style="list-style-type: none"> a. Patient street b. Patient city c. Patient state abbreviation (drop down) d. Patient zip e. Fill date f. Product strength g. Product form h. Quantity i. Days supplied j. Written date k. Prescription number l. New/refill code m. Prescriber DEA number n. Payment classification o. Prescriber first name p. Prescriber last name q. Prescriber street r. Prescriber city s. Prescriber state abbreviation (drop down) t. Prescriber zip u. Prescriber phone number User will have ability to export to CSV and PDF		
209	BR20.10.1	State Reporting Tool (with access to State PMP Data Collection and User Applications	The State Administrator(s) shall have the functionality to generate a Prescriber detail report based on DEA number(s) and the minimum fields are listed but more fields may be available dependent on Contractor standard offering could include or exclude buprenorphine products for opioid use disorders. <ul style="list-style-type: none"> a. User will be able to choose any number of DEA numbers on which to run the report: 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Data) Reporting: Admin Prescriber Detail Report	<ol style="list-style-type: none"> 1. DEA number(s) 2. Last name 3. Degree 4. License status 5. Prescriber NPI number 6. State license number 7. DEA Suffix 8. Prescriber last Name 9. Prescriber First Name 10. Prescriber Middle Name 11. Shall include the ability to choose from any field within the ASAP format as needed. <p>The search query criteria must allow one or many of the fields above to be used.</p> <p>View and edit is needed for this information to allow edits of the DEA data in the Practitioner table.</p> <ol style="list-style-type: none"> a. Prescriber first name b. Prescriber middle name c. Prescriber last name d. Mailing name e. Degree f. Status g. Dispensing flag (Y/N) h. Address i. Street j. City k. State abbreviation (drop down) l. Zip m. Phone number n. Email o. DEA number p. Licensed on q. Expiration <p>The search query criteria must allow one or many of the fields above to be used.</p>		
210	BR20.11.0	State Reporting Tool (with access to State PMP	<p>The State Administrator(s) shall have the functionality to generate a pending registration report and the minimum search fields will be:</p> <ol style="list-style-type: none"> a. First name 	Existing functionality	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Data Collection and User Applications Data) Reporting: Registration	<ul style="list-style-type: none"> b. Middle name c. Last name d. Date of birth with ranges e. Organization f. DEA number g. Occupation h. Registration from i. Registration to j. Email address k. User Role <p>The search query criteria must allow one or many of the fields above to be used.</p> <p>Report output must contain the fields offered in search at a minimum.</p>		
211	BR20.11.1	State Reporting Tool (with access to State PMP Data Collection and User Applications Data) Reporting: Registration	<p>The State Administrator(s) shall have the functionality to generate a report for either Approved or Denied registrants and the minimum fields available will be:</p> <ul style="list-style-type: none"> a. First name b. Middle name c. Last name d. Date of birth with ranges e. Organization f. DEA number g. Occupation h. Registration from i. Registration to j. Approved or denied from k. Approved or denied to l. Email address m. User Role <p>The search query criteria must allow one or many of fields above to be used</p> <p>Report Output must contain the fields offered in search at a minimum</p>	Existing functionality	Existing functionality
212	BR20.12.0	State Reporting Tool (with access to State PMP Data Collection	<p>The State Administrator(s) shall have functionality to identify Dispensers who have submitted Zero reports</p> <ul style="list-style-type: none"> a. Minimum search fields are: <ul style="list-style-type: none"> a. Dispenser name b. Dispenser DEA number or 	Enhancement	Existing functionality

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application data) Reporting: Zero Reports	<p style="text-align: center;">Dispenser license number</p> <p style="text-align: center;">c. Time frame</p> <p>The search query criteria must allow one or many of fields above to be used</p> <p>Report Output must contain the fields offered in search at a minimum.</p>		
213	BR20.12.1	State Reporting Tool (with access to State PMP Data Collection and User Applications Data) Reporting: DEA Licensing	<p>The State Administrator(s) shall have the functionality to generate a license/DEA report and the minimum fields available are listed but more fields may be available dependent on Contractor standard offering:</p> <ul style="list-style-type: none"> a. Name b. City c. State abbreviation (drop down) d. DEA number e. License number f. Phone number g. License status/if “unknown flag” <p>The search query criteria must allow one or many of the fields above to be used.</p> <p>Report Output must contain the fields offered in search at a minimum.</p>	Existing functionality	Gap
214	BR20.13.0	State Reporting Tool (with access to State PMP Data Collection and User Applications data) Reporting: Dispenser	<p>The State Administrator(s) shall have the functionality to generate Dispenser report (view only)and the minimum fields available are listed but more fields may be available dependent on Contractor standard offering</p> <ul style="list-style-type: none"> a. Dispenser name b. Status (active , closed, revoked) c. Manager first name d. Manager last name e. Address (care of) f. Street g. City h. State abbreviation (drop down) i. Zip j. Phone number k. Email l. unknown flag m. DEA number n. DEA licensed on o. DEA expires on 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> p. Dispenser license number q. Reporting status of exempt or waiver r. Exempt or waiver issued on s. Exempt or waiver expiration date <p>The search query criteria must allow one or many of the fields above to be used</p> <p>Report Output must contain the fields offered in search at a minimum</p>		
214	BR20.13.1	State Reporting Tool (with access to State PMP Data Collection Application data) Reporting: Delinquent Dispenser	<p>The State Administrator(s) shall have the functionality to generate a delinquent Dispenser report to identify delinquent Dispensers</p> <ul style="list-style-type: none"> a. Dispenser must have reported into PMP at least two times b. Must be able to identify if a pharmacy, animal or human Dispenser <p>Must have functionality to allow an export (.csv or excel) of delinquent Dispensers that can be used to send communication via an external messaging system.</p> <p>The State must have the ability to monitor Dispenser data submission compliance</p>	Existing functionality	Gap
216	BR20.14.0	State Reporting Tool (with access to State PMP User Application Data) Reporting: Threshold Report	<p>The State Administrator(s) shall have the functionality to view a report on CRIs and to choose one or multiple data elements in the search</p> <ul style="list-style-type: none"> a. Patient last name b. Patient first name c. Patient date of birth d. Number of doses or MME if drug has an associated MME number of Dispensers e. Number of Prescribers f. Number of prescriptions g. Select to search if a patient has been identified and had the NAS warning appear on the report and the number of times it has occurred. h. Select to search if a patient has been identified as a TennCare pharmacy lock-in patient on a patient report and the number of times is has occurred. 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> i. Indicator to choose if the reports were ran because of a suspected overdose or poisoning or if the report ran did not have that indication. j. Benzodiazepine/Opioid combination k. Benzodiazepine/Opioid/Soma combination l. Report output must contain the fields offered in search plus fields listed below: Patient date of birth m. The numbers of reports ran, type and number of CRIs for that patient, n. Number and dates the suspected overdose or poisoning was selected. 		
217	BR20.15.0	State Reporting Tool (with access to State PMP User Application Data) Reporting: Drug Summary	<p>The State Administrator(s) shall have the functionality to generate a summary drug report that includes the following data fields:</p> <ul style="list-style-type: none"> a. Ingredient b. Drug schedule c. Product/drug name d. Strength e. Date filled from f. Date filled to form g. Total h. MME i. Prescriber DEA number or Dispenser DEA number j. The search query criteria will allow for one or many of the fields above to be used k. Report Output must contain the fields offered in search plus the fields listed below: <ul style="list-style-type: none"> 1. Product name 2. Form 3. DEA schedule 4. Number of prescriptions 5. Number of doses 6. Total 7. Prescriber DEA number or 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			Dispenser DEA number if chosen or both.		
218	BR20.15.1	State Reporting Tool (with access to State PMP Data Collection Application data) Reporting: Drug Codes	<p>The State Administrator(s) shall have the functionality to generate a drug code summary report to view any data that was reported by any Dispenser</p> <p>Minimum search fields available will be:</p> <ul style="list-style-type: none"> a. Product number b. Product type c. Product name d. DEA Schedule e. Strength f. Form g. Ingredient h. Therapeutic class i. Measure <p>The search query criteria must allow one or many of the fields above to be used</p> <p>Report Output must contain the fields offered in search at a minimum</p>	Existing functionality	Gap
219	BR20.16.0	State Reporting Tool (with access to State PMP Data Collection Application data) Reporting: Dispenser Activity	<p>The State Administrator(s) shall have the functionality to generate a Dispenser file activity report to view data that was reported by any Dispenser</p> <p>Minimum search fields available will be:</p> <ul style="list-style-type: none"> a. File type b. File name c. Upload start date d. Upload end date e. Upload type f. Login g. Email address h. Users first name i. Users last name <p>The search query criteria must allow one or many of the fields above to be used.</p> <p>Report output must contain the fields offered in search at a minimum</p> <ul style="list-style-type: none"> a. File name b. Date uploaded c. Total records d. Total uploaded 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> e. Duplicated f. Outstanding g. Uncorrected errors h. Corrected errors i. Status b. Additional details <ul style="list-style-type: none"> a. File name b. Uploaded by c. Uploaded on date d. Status e. Records in file f. Records uploaded g. Records rejected h. Records deleted i. Corrected errors j. Outstanding errors k. Total warnings l. Ability to display warnings m. Total duplicates 		
220	BR20.17.0	State Reporting Tool (with access to State PMP User Application data) Reporting: User by Role or Specialty	The State Administrator(s) shall have the functionality to filter by Role/profession (such as medical doctor, APRN etc.) and by Specialty (such as Anesthesiologist/Internal Medicine) and by Sub-Specialty where applicable. This filtering process will show the State Administrator(s) how many Users are in each of the Roles, and then provide ability to filter Role by Specialty or Sub-Specialty where applicable. From within the report window, Users shall be able to select an individual record and perform edit functions on their User account	Existing functionality	Gap
221	BR20.17.1	State Reporting Tool (with access to State PMP Data Collection and User Applications data) Reporting: User Profile	The State Administrator(s) shall have the functionality to search User profiles using the following fields: <ul style="list-style-type: none"> a. User Login b. Organization c. Role d. Specialty or DEA Registrant e. Last name f. First name g. User license number h. User DEA number or organization 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>i. Email Address</p> <p>Once the list of Users is presented the State Administrator(s) will be able to select user profile and edit any field in the user profile.</p> <ul style="list-style-type: none"> User Profile data fields identified in the registration portion of the Business Requirements will be the output from this search. 		
222	BR20.18.0	State Reporting Tool (with access to State PMP User and Data Collection Applications data) Reporting: Delegate Supervisor	<p>The State Administrator(s) shall have the functionality to search for all Delegates (APRN/PA/licensed/unlicensed/law enforcement) associated with a Supervisor.</p> <p>The State Administrators shall have the functionality to search for all DEA Dispensers associated with a Central Reporter</p>	Existing functionality	Existing Functionality
223	BR20.19.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Active Sessions Audit	<p>The State Administrator(s) shall have the functionality to audit/view who is currently logged into the State PMP User Application (Active Sessions)</p> <ol style="list-style-type: none"> Search fields: <ol style="list-style-type: none"> Timeframe Report output must contain the fields offered in search plus fields listed below: <ol style="list-style-type: none"> User Login User First Name User Last Name Organization Logged in (Date and time) Last Active (Date and Time) Last Page <p>This allows the State Administrator(s) to monitor and research functionality issues</p>	Existing functionality	Gap
224	BR20.20.0	State Reporting Tool (with access to	The State Administrator(s) shall have the functionality to generate a request history report for requests by time period and the report would provide the number of requests per Role during	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		State PMP User Application data) Reporting: Request Activity Summary	that time period. The report will include the number of reports generated by State PMP Users and the number of reports generated by Users from other states' PMP for each individual state.		
225	BR.20.20.1	State Reporting Tool (with access to State PMP User Application data) Reporting: Request Activity Summary	The State Administrator(s) shall have the functionality to generate a request history report for Requests by time period. It shall provide a detailed report that would contain: <ul style="list-style-type: none"> a. Patient last name, b. Patient first name, c. Patient date of birth, d. Requesting state abbreviation, e. Requesting person last name, f. Requesting person first name, g. Requesting person login, h. Date range the requestor used when generating the report, and i. Date request was created. 	Existing functionality	Gap
226	BR20.21.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Prescriptions by County	The State Administrator(s) shall have the functionality to generate reports based on prescriptions by county, MME by county and ability to group by Prescriber and Dispenser	Existing functionality	Gap
227	BR20.22.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Top X Reports	The State Administrators(s) shall have the functionality to generate reports based on top X Practitioner by MME with the ability to exclude certain types of drugs (e.g. drugs used in medicated assisted therapy) Top X Patients, Prescribers or Dispensers by NDC, class of drugs, buprenorphine product milligrams or therapeutic class or by FIPS codes	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
228	BR20.23.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Prescriptions	<p>The State Administrator(s) shall have the functionality to generate reports based on prescription by:</p> <ol style="list-style-type: none"> 1. Dispenser using Dispenser name or NPI/DEA number in conjunction with a start and end date. The report would contain: <ol style="list-style-type: none"> a. Patient first name b. Patient last name c. Prescription number d. Fill date e. Product f. Strength g. Form h. MME (if applicable to drug) 2. Prescriptions by Practitioner using Practitioner first name, Practitioner last name or DEA/NPI number in conjunction with a start and end date and MME if applicable to drug 	Existing functionality	Existing Functionality
229	BR20.24.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Login Report	<p>The State Administrator(s) shall have the functionality to generate reports based on audit trail of registered User logins to the State PMP User Application</p> <p>Criteria should include:</p> <ol style="list-style-type: none"> 1. User last name 2. User first name 3. User login in conjunction with a start and end date 4. Login status (multiselect option to choose to see only one or multiple types of login status; e.g. valid login, locked, User license expired) 	Existing functionality	Gap
230	BR20.25.0	State Reporting Tool (with access to State PMP User Application data) Reporting: User Compliance	<p>The State Administrator(s) shall have the functionality to generate compliance reports on practitioner activity.</p> <p>Criteria should include:</p> <ol style="list-style-type: none"> 1. State PMP User Application User does not log in (ability to set time range) <p>Configurable option to include Supervisor's Delegates to ensure patient lookups performed by Delegates are identified and attributed to Supervisor. System shall automatically generate a report, on a monthly basis, with the day of report</p>	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>generation set by the State, once report generated the system shall send email to the State Administrator(s) that the report is available for viewing.</p> <ol style="list-style-type: none"> 1. Generate automated letters list that the State Administrator(s) review and select from the list who will receive letters generated from the System 2. New Letter needed for placement into the application for this functionality must be approved by State. 3. Reports shall be provided to the State monthly. 		
231	BR20.25.1	State Reporting Tool (with access to State PMP User Application data) Reporting: User Compliance	<p>The criteria for compliance reports on practitioner activity should include the following enhancement:</p> <ol style="list-style-type: none"> 1. Option to filter benzodiazepines and opioids or combination with flexibility to add additional drugs in the future 2. Configurable field to add an additional criteria of number of prescriptions prescribed and refills count toward that variable. 	Enhancement	Enhancement
232	BR20.26.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Supervisory Relationship Audit	<p>The State Administrator(s) shall have the functionality to run Supervisory relationship report to identify Users in system who are part of a Supervisory relationship.</p> <p>The Contractor shall provide functionality to maintain all audit history of Supervisory relationships regardless of the number of times the relationship changes. The audit trail should contain which party invoked the change, date and time of the change and type of change.</p> <p>Must be able to run the report to identify the history of every Supervisor and Delegate relationship.</p> <p>Minimum search fields</p> <ol style="list-style-type: none"> a. Supervisor, APRN, PA, Delegate or law enforcement b. First name (of any of item listed in a) c. Last name (of any of item listed in a) 	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>d. Time frame</p> <p>Report Output must contain the fields offered in search plus fields listed below:</p> <ul style="list-style-type: none"> a. Supervisory relationship status b. Type of relationship (APRN/PA/Delegate licensed/Delegate unlicensed/law enforcement) c. Role d. Date supervisory relationship became active e. Date supervisory relationship became inactive f. Date of change g. Type of change 		
233	BR20.27.0	<p>State Reporting Tool (with access to State PMP User Application data)</p> <p>Reporting: Clinical Risk Indicator</p>	<p>The State Administrator(s) shall have the functionality to generate CRI reports to identify patients who received CRIs (any type of CRI that exist in the application) or Prescribers who had patients who were identified with a specified CRI</p> <p>Minimum search fields (can choose one or many)</p> <ul style="list-style-type: none"> a. CRI Type (choose one, multiple or all types to generate) b. Time frame c. Patient first name d. Patient last name e. Patient date of birth f. Prescriber first name g. Prescriber last name h. Prescriber DEA number i. Dispenser Name if entity or Dispenser first name and Dispenser last name if Prescribing Dispenser j. Dispenser DEA number <p>Report Output must contain the fields offered in search plus fields listed below:</p> <ul style="list-style-type: none"> a. Date CRI was generated b. Value of CRI if applicable 	Existing functionality	Gap
234	BR20.28.0	<p>State Reporting Tool (with access to State PMP</p>	<p>The State Administrator(s) shall have the functionality to generate State PMP registered User reports to identify Users who have been provided manual override by a State Administrator(s).</p>	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		User Application data) Reporting: Manual Override	Minimum search fields <ul style="list-style-type: none"> a. Time frame Report Output must contain the fields offered in search plus fields listed below: <ul style="list-style-type: none"> a. User Login b. User first name c. User last name d. Expiration date e. Override reason 		
235	BR20.29.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Clinical Risk Indicator Dashboard	The State Administrator(s) shall have the functionality to generate CRI Dashboard reports to identify Users who received CRIs on dashboard and determine if CRI status (read/unread) Minimum search fields <ul style="list-style-type: none"> a. Time frame b. CRI notification category c. Role Report output must contain the fields offered in search plus fields listed below: <ul style="list-style-type: none"> a. Patient first name b. Patient last name c. Patient date of birth d. CRI Value e. Date CRI generated f. Prescriber first name g. Prescriber last name h. Role i. Status (viewed or now) State PMP User Application Administrator(s) shall have the ability to generate an internal message to selected Users to encourage User to view reports on potential at risk patients	Existing functionality	Gap
236	BR20.30.0	State Reporting Tool (with access to State PMP User Application data) Reporting: Excessive Lookup	The State Administrator(s) shall have the functionality to generate excessive patient lookup reports and the report will be configurable by State. The Contractor shall create functionality that if a Delegate or a Supervisor looks up a configurable number of patients the User's account will be automatically deactivated, and a notice will be sent to the State Administrator(s) that contains the name of the registered User who performed the lookups. The State Administrator(s) can then	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>access the State PMP User Application to determine the name of the patient(s) that was looked up and the date and time the look ups were performed</p> <p>The Contractor shall create the functionality to identify when a patient is looked up by a configurable number of registers Users or from PMPi searches to send the State an alert. The alert will display the name of the patient who was looked up, the name of the registered User(s) or PMPi identification reference(s) who performed the look up and the date and time the look up was performed.</p>		
237	BR20.31.0	State Reporting Tool (with access to State PMP Data Collection Application data) Reporting: Dispensation Record Error/Warning	<p>State Administrator(s) shall be able to run a report to determine what records submitted to the State PMP Data Collection Application contain errors or warnings.</p> <ul style="list-style-type: none"> a. Report must contain identifying information of the Dispenser, type of flag, date record was flagged, and date record revised and flag removed if reconciliation has occurred b. When data doesn't validate against this criteria it will be flagged and made available in error reports both to the Dispenser and in the data extract and report submitted to the State (data would be viewable in the User interface). 	Will handle with a change order	Gap
238	BR20.31.0 .1	State Reporting Tool (with access to State PMP Data Collection Application data) Reporting: Error/Warning by DEA Number	State Administrator(s) shall be able to run a report by Dispenser DEA number to identify the number of errors or warnings associated with that DEA number. The functionality must include the ability to choose a timeframe for the report.	Partial Enhancement	Gap
239	BR20.32.0	State Reporting Tool (with access to State PMP Data Collection)	<p>This State PMP Data Collection Application file processing report shall include a metric which calculates the percentage of prescriptions submitted, but not processed within twenty-four (24) hours, as a percentage of total prescriptions in the month.</p> <p>If files not processed report should indicate if file</p>	Enhancement	Enhancement

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application data) Reporting: Prescription Processing Report	or record contains errors/warnings.		
240	BR20.33.0	State Reporting Tool (with access to State PMP User Application Data) Reporting: State Administrator(s) Ad-hoc Law Enforcement and Drug Courts	State Administrator(s) shall have ad-hoc report capability to audit all data regarding law enforcement and drug court registrations and requests.	Enhancement	Enhancement
241	BR20.33.1	State Reporting Tool (with access to State PMP User Application Data) Reporting: State Administrator(s) Ad-hoc Law Enforcement and Drug Courts	State requires the ability to generate a report to identify all requests generated in a time period by one or many User Roles in the law enforcement or drug courts. <ul style="list-style-type: none"> a. The summary Report Output would at a minimum contain the search criteria used to generate the report, registered User who generated the request, and date report initiated, date report generated. b. The detailed report would have all the fields used to generate the report, registered User who generated the report, Supervisor who approved report if applicable, date report initiated, date report generated. c. Supervisor audit report would contain all the search criteria used to generate the report, registered User who generated the report, Supervisor who approved report if applicable, date report initiated, date report generated and if Supervisor has done required audit. 	Enhancement	Enhancement
242	BR21.0.0	State PMP User	Registered Prescribers shall have access to a User dashboard with a list of patients with CRIs. Registered Prescribers shall have access to a user	Existing functionality	Gap

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		Application Prescriber Dashboard	<p>dashboard with a list of patients with Clinical Risk Indicators. The following list are items that shall appear in the State PMP User Application Dashboard for the User:</p> <ul style="list-style-type: none"> a. Information viewed in the dashboard would provide link to version of the report within the application, PDF or create a new report on the patient identified as have the CRI b. Provide type of CRI notification: Morphine Milligram Equivalents (MME), Multiple Providers, Multiple Pharmacies, Benzodiazepine/Opioid Combo or Benzodiazepine/Opioid Combo plus Soma, Buprenorphine milligrams or TennCare pharmacy lock-in c. State would determine the refresh interval at which the dashboard would contain new information displayed on the home/dashboard page. d. Clinical notification email would occur when new information is placed on the User dashboard. The email notification would be received by the User's Delegate or both if preference chosen by Supervisor. e. Delegate chosen by Supervisor to receive clinical notification email would also create the trigger to populate any CRIs for that Supervisor also on the Delegate's home/dashboard page f. The State would create the text that will be used on the email notification. Currently any changes to these communications are provided to the State without cost. The Contractor will continue to provide this service, without cost, or will provide the State with a secure web portal to make the changes without the Contractor's 		

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>assistance.</p> <p>g. Frequency of clinical email notification generation shall be configurable and the interval for the communication to the Users shall also be configurable</p> <p>h. CRIs will be different colors and have different graphics based on definitions defined by State to represent MME, Multiple Dispensers, Multiple Prescribers, Benzodiazepine/Opioid Combo or Benzodiazepine/Opioid Combo plus Soma, Buprenorphine milligrams and TennCare pharmacy lock-in</p> <p>i. The State and Contractor will determine rules that define what action occurs if a prescription is attributed to wrong DEA number and then revision occurs and that prescription recipient was included in a CRI</p> <p>j. State and Contractor will determine rules to ensure that tracking occurs when a CRI notification is opened by a specific User on a specific patient</p> <p>k. State and Contractor would determine rules/criteria regarding when the patient would appear again on that specific Users' dashboard</p> <p>l. CRI notification for MME will be generated based on patient's prescription data in the application using the CDC MME logic or as directed by the State.</p> <p>m. Text associated with any descriptions of CRI notifications will be determined by the State</p> <p>n. Clinical notification for multiple Prescribers and Dispensers</p> <p>1. X number of Prescribers, X number of MMEs, X of Dispensers in a designated time period of thirty (30), sixty (60),</p>		

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p>ninety (90), one hundred eighty (180), or three hundred sixty-five (365) days. (Need the X's to be variables as there will be a need to change them based on findings from State epidemiologist(s)). Currently changes to the configuration are provided to the State without cost. The Contractor shall continue to provide this service, without cost, or shall provide the State with a secure web portal to make the configuration changes without the Contractor's assistance.</p> <p>2. State will set hierarchy of CRIs</p> <p>o. The Contractor shall provide the functionality for a User to generate a CRI notification report on a specific pre-determined CRI and from that list choose the patient to generate a current patient report or export list (csv or excel) from application in a format to submit a bulk patient request t to the application</p> <p>p. CRI notifications displayed on dashboard shall allow the practitioner to select a specific patient and view information about that patient, this action which would prevent this patient from appearing on that User's dashboard again for that same CRI threshold until that threshold is exceeded.</p> <p>The Contractor will refresh clinical notifications weekly.</p>		
243	BR22.0.0	State Reporting	State PMP User Roles specified in the State PMP User Application configuration by State	Enhancement	Enhancement

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
		<p>Tool (with access to State PMP User Application data) Prescriber Report</p>	<p>Administrator(s) shall have access to a Prescriber report. Following are the minimum requirements but State would have opportunity to include/exclude any Contractor enhancements offered by the Contractor.</p> <p>The timeframe for the report shall be the previous six (6) months of data and have an interface to view previous reports within the CSMD.</p> <p>Prescribers who have multiple DEA numbers shall be grouped and offer individual reports as well as a consolidated report of all DEA numbers provided.</p> <p>The Prescriber report card shall include:</p> <ol style="list-style-type: none"> 1. Name of Prescriber 2. Dates covered in the report 3. Date generated 4. Role 5. Specialty 6. DEA number(s) 7. Number of Prescribers patients receiving opioids (monthly average) 8. Number of prescriptions Prescriber wrote for opioids (monthly average) 9. Prescriptions by MME (full report period) broken into: 0 to 50; 51-90; 91-200 and greater than 200 <ol style="list-style-type: none"> a. Contractor shall use CDC MME Conversion table or as directed by the State. 10. Opioid Treatment Duration by percentage of patients based on full reporting period: less than 7; 7 to 28; 29 to 90; and greater than 90 days. <ul style="list-style-type: none"> • Contractor shall use CDC recommended guidelines or as directed by the State. 11. Prescription volumes (total MME monthly average) by products containing oxycodone, hydrocodone and all other opioids 12. Anxiolytic/Sedative/Hypnotic Prescribing (monthly average number of prescriptions and dosage units) 		

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<ul style="list-style-type: none"> • Each of the categories above will contain these three (3) numbers <ul style="list-style-type: none"> i. Prescriber ii. Number within Prescriber Specialty (same Specialty as Prescriber) iii. Number within similar Prescriber Role (same Role + same Specialty of Prescriber) 13. Top three (3) medications prescribed (full report period) 14. PMP usage (monthly average) <ul style="list-style-type: none"> • PMP requests by Prescriber • PMP requests by Delegates • Specialty field average number of requests • Similar Prescriber number of requests 15. Patient exceeding multiple provider thresholds (full report period). State to set threshold numbers used for report <ul style="list-style-type: none"> • Patient exceeding multiple Prescriber threshold • Patients exceeding multiple Dispenser threshold 16. CRI <ul style="list-style-type: none"> • The State desires to include a section to identify the Prescriber ranking based on number of CRIs compared to those in same Role and Role + Specialty • CRIs metrics included in the Prescriber report will include the following CRIs. Additional CRIs added to the system may be included in the Prescriber reports via a Change Order. <ul style="list-style-type: none"> i. Multiple Providers ii. Multiple Pharmacies iii. MMEs iv. Combo prescriptions for Benzodiazepine/Opioid v. Combo 		

no	ID	Applications/ Group	Definition	Current Platform Strategy	Migration Strategy
			<p style="text-align: center;">Benzodiazepine/Opioid/Ca risoprodol</p> <p>17. Dangerous Combination Therapy</p> <ul style="list-style-type: none"> • Combo prescriptions for opioid/Benzodiazepine in same month • Combo prescriptions for Benzodiazepine/Opioid Combo plus Carisoprodol in same month <ul style="list-style-type: none"> i. Both dangerous combination therapies <ol style="list-style-type: none"> 1. Prescriber 2. Prescriber plus other Prescribers 		

3.2 Operational Requirements

State will request the Contractor for any portal changes/configurations and Contractor shall make the changes within twenty-four (24) hours or within a timeframe that is mutually agreeable for the Contractor and the State.

Support

Appriss Customer Support Services

This section outlines the expectation for Appriss support for State PMP Data Collection and User Applications and shall apply to current use and to corresponding applications in the event of migration.

- a. Contractor shall provide customer support services to all Users for all purchased products and services to the State for the term of the contract via a customer support toll-free number provided by the Contractor that is staffed twenty-four (24) hours per day, seven (7) days per week, three hundred sixty-five (365) days per year (24x7x365) only if migration occurs; otherwise the hours are Monday through Friday from 8 AM EST to 8 PM EST.
- b. The Contractor’s Helpdesk will target the following service level metrics:
 - Calls will be answered in fewer than ninety (90) seconds from when the call is received
 - At least ninety percent (90%) of calls will be successfully resolved or escalated on the caller’s initial attempt
 - Fewer than five percent (5%) of monthly calls will be abandoned by the caller
- c. Contractor shall provide a unique identifier for each support issue and resolution or group of related issues to ensure the Contractor and the State communicate efficiently regarding support issues.
- d. Contractor shall handle all technical related calls including but not limited to:
 - a. Password resets
 - b. System availability or functionality issues (Help desk resources should have appropriate contact in the event validations need to be turned off. Refer to 3.2.1.1 (m) in which State allows Contractor to do this during non-business hours.)
 - c. General technical registration questions
 - d. Assist Users with the following:
 - i. Changes to User profiles
 - ii. Technical guidance and support related to generating patient reports, electronic or manual submission of prescription data
 - iii. Changes to any field in the User profile to keep appropriate communication contact information in the User profile.
- e. All calls related to State statutes, rules, and policies shall be routed to the State Administrator(s). During State business hours, these calls will be transferred to the State Administrator(s) automatically. Outside of State business hours, the Contractor Helpdesk shall inform the User of email and phone number for the State Administrator(s) to send email or leave a voicemail.
- f. Contractor shall correct all service errors in accordance with Addendum 2 including providing defect repair, programming corrections and remedial programming. The Contractor shall correct all service errors and respond to and resolve all support requests in accordance with the required times and other terms and conditions set forth in Addendum 2.
- g. The Contractor shall provide online documentation that will provide assistance for the User to understand the functionality of the applications.

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- h. Contractor shall conduct weekly calls with the State's PMP Director or Delegate(s) to discuss current issues and progress of issues to resolution. At least weekly, a report of sufficient detail to understand any issues and any resolutions shall be provided to the State on all customer support services related calls/emails including how many were resolved and how many were sent to State for resolution that did not involve specific statutory questions
 - i. Contractor shall continuously monitor and manage the applications and operating environment to optimize availability that meets or exceeds the availability requirement as listed in this Contract. This monitoring includes, but is not limited to the following:
 - a. Proactively monitor on a twenty-four (24) hours per day, seven (7) days per week, three hundred sixty-five (365) days per year (24x7x365) basis, all products and services that are used by the State related to this contract, including but not limited to, the applications, servers, databases, firewalls and other components.
 - b. If such monitoring identifies, or the Contractor otherwise becomes aware of any threat to the availability or functionality of the system, the Contractor shall take all necessary and reasonable remedial measures to promptly eliminate such threat and ensure full availability and functionality.
 - j. Contractor shall immediately verify and correct all reported availability issues upon notification from the State or any other source.
 - k. Contractor shall notify the State's PMP Director and State identified resource(s) via email and phone call whenever the system becomes unavailable and provide the trouble ticket number, the issue, time the system became unavailable, expected time of resolution, and any work around being formulated or implemented. If necessary, the Contractor shall contact the internet service provider and any sub-Contractor(s) that may need to be involved in the resolution process. The Contractor, when technically possible, will post a redirect page with a message to alert Users the system is down and Contractor and State are actively working to resolve.
 - l. Contractor shall notify the State when the issue has been fully corrected and the system is fully available, along with any pertinent findings (root cause) or action taken to close the trouble ticket.
 - m. The State will permit the Contractor to turn off login validations when an issue with validations prevents State Users from logging in during non-business hours.
 - n. The State will permit the Contractor to change email addresses in the User profiles when the last four of a Social Security Number, DOB and First and Last Name is used to identify the registered User when the registered User needs assistance in resetting a password but cannot receive the reset link due to an invalid email address in the applications.
 - o. Contractor shall notify the State's PMP Director and State identified resource(s) immediately via email and phone when validations were turned off so the issues can be resolved by the State and the Contractor on the next business day.
 - p. The Contractor shall provide the State with service level reports on a quarterly basis. The service level reports shall provide the category and types of issues, status of each issue (open/closed), time issue reported, severity level, description, acknowledgement time, and resolution time for each incident logged during the reporting period. The reports shall also show actual service level performance as compared to Service level goals based on required response times in Addendum 2.
 - q. Contractor shall provide two (2) alarm monitors to support the professional license and driver's license integrations:
 - r. A monitor that pings the professional license and driver's license web service at a frequency mutually determined by the Contractor and State that will alarm when a connection cannot be made, indicating that the web service is down.
 - s. A monitor of login transactions to the State PMP User Application that will alarm if the percentage of errors exceeds a threshold mutually determined by the Contractor and State, indicating that a web service is down or degraded.

- t. If either alarm monitor is triggered, the driver's license and professional licensing integrations will automatically be disabled and logins will be permitted; a notification will be sent to the Contractor and State.

Support Documentation

The Contractor shall provide at no additional cost to the State, at the beginning of the Contract or prior to any changes in the applications, the following documentation for both State PMP Data Collection and User Applications:

- a. In-system tutorials. The guide tutorials shall provide a reference for casual or infrequent Users that will enable them to quickly access major functions of the system without having to refer to the User Manual.
- b. Administrative/Operations Manual. This manual shall provide complete information and instructions in the technical operation, maintenance, and administration of the system.
- c. User Manual shall provide in-depth descriptions and instructions for use of the system functionality for end Users. The User Manual must address the view of the system required by the State information systems and analytics teams. It must cover all facets of system function and operations, including, but not limited to:
 - i. complete instructions for use of the system
 - ii. system usage scenarios based on real examples drawn for day-to-day usage of typical Users fully describing and explaining features and operation of the system
 - iii. How input data are stored and related between system records or tables
 - iv. Error messages, including a definition and error correction procedures
 - v. processes for entering data and data validation
 - vi. screen layouts and the relations between fields and tables or other system organization showing how fields relate to stored data

The Contractor shall provide at no additional cost to the State, at the beginning of the Contract or prior to any changes in the applications used by the State's Administrator(s) to generate reports on State PMP Data Collection or User Applications data.

State Identified Issue Support

A testing environment will be set up by the Contractor that allows for testing as well as a UAT environment for the State User Acceptance Testing. The changes will be tested by the Contractor and the State. The State must confirm application working as desired before any code is moved to Production.

- a. State Release Management Services (RMS) Team will test in the Test Environment only. Results will be logged by RMS and reported to the State identified resource who will communicate with Contractor and State PMP Director.
- b. Issues found during State User acceptance testing will be logged and reported to the State identified resource who will communicate with Contractor and State PMP Director. The Contractor will resolve and notify the State when issue resolved by Contractor and ready for State to perform user acceptance testing again. Additional testing rounds may be needed.
- c. State UAT will be performed and signed off by the State when the issues have been resolved and test case criteria has been met
- d. A Ticket System shall be used when issues are identified by the State and will be logged into the Contractor ticket system and ticket number will be provided to the State within twenty-four (24) hours of ticket creation
- e. The tickets status will be reported back to the State weekly will include at least the following information
 - Issue
 - Date reported
 - Status
 - Estimated Resolution Date

- Date resolved
- Resolution

Support Communication

This section outlines the expectation for Contractor communications.

- a. The Contractor shall provide to State an email list that includes the following information at the start of the contract and at least quarterly or whenever changes are made to the Contractor organization. The list will include the point of contact for client relationship manager, technical issues, account issues, billing, and other issues.
 - Name
 - Email address
 - Phone number
 - Work hours
- b. The Contractor shall provide a designated point of contact who will communicate to the State PMP team any events. In addition, this point of contact shall be the individual the State will contact in the event the team needs to report a nonfunctioning application and a backup contact shall be identified by the Contractor for urgent support needs.
- c. The point of contact information will be emailed to the State Administrator(s), Director of the State PMP and other resources as identified by the Director of the State PMP

Migration Plan

The elements listed below are minimum requirements. Should the state decide to migrate to new applications, a comprehensive Migration Plan will be developed in accordance with Section E.3. of the Contract.

The migration will be contingent on gaps in functionality being complete prior to migration. State requires timelines for development of all gaps identified in the Business Requirements Document.

The State will perform an analysis to determine which elements from the existing State PMP User Application are necessary to migrate to the new platform. The Contractor shall migrate these elements and provide documentation detailing the mapping between the existing State PMP platform and the new platform. The State will use this documentation to validate the elements are correctly migrated before the new platform shall be put into Production.

The Contractor shall provide a comprehensive, detailed migration plan, including scripts and a validation plan. The migration plan must be approved by the State.

Contractor shall develop a process to prevent duplicates accounts from being created when migration occurs which must be approved by the State, for example a process for State PMP User Application Users to log in the new application using their current username and password. At that time the new application will ask them to provide the email address the User would like to make their User login for the new application. At that time the State PMP User Application User will select a new password. The application will prompt User to enter any missing information from their User profile that is required by the State.

Contractor shall provide the State's information systems team with onsite technical support as required during migration, implementation and production of the new applications for State PMP Data Collection and User Applications and databases. Contractor shall provide daily rate for onsite personnel to assist with migration. Payment to Contractor will be based on the actual days personnel required onsite. The training and support cost and timeline will be included in the migration plan. Onsite personnel will be needed until the State determines the applications are stable.

NEW REGISTRATION for NEW COLLECTION of DATA SUBMISSIONS

The elements listed below are minimum requirements. Should the state decide to migrate to new applications, a comprehensive Migration Plan will be developed in accordance with Section E.3. of the Contract.

Collection of data from Dispensers will require that all Dispensers register with the new application before the scheduled time to migrate to the new application that will be used for Dispensers to submit data.

1. Contractor shall provide to the State all DEA Dispenser information of Dispensers who have submitted at least once in the prior eighteen (18) months. The information from Contractor shall provide all the necessary information needed to send a letter via USPS by the State
2. Contractor and State will draft the letter to send to Dispensers outlining all the required information needed to register in the new State PMP Data Collection Application and provide the new URL for Dispenser to complete the registration
3. Contractor will provide a weekly report on number of Dispensers registered in the new application to inform the go/no go decision of launching the new State PMP Data Collection Application. The report shall include Dispenser identifying information so comparison can be made by State to list provided by Contractor for mailing.

STATE PMP USER APPLICATION USER PROFILE DATA MIGRATION

The elements listed below are minimum requirements. Should the state decide to migrate to new applications, a comprehensive Migration Plan will be developed in accordance with Section E.3. of the Contract.

1. All data currently contained in the State PMP User Application associated with the User profile shall be migrated to the new State PMP User Application. This includes all contact information, locations, Supervisor relationships and Delegate relationships. Note that the history of the User approval and history of Supervisory relationships must be included. All notes associated with User profiles must be migrated.
2. The migration of User profiles will only include active accounts. Access to the inactive accounts will be made available through the Contractor's current reporting tool provided to State for generation of reports on State data.
3. The table(s) containing information on pharmacies/Dispensers and the table(s) containing information on Prescribers in the current application would be analyzed and only the DEA numbers and associated information would be migrated into the new application if a prescription in the State PMP User Application that is migrated is associated to the DEA number of the Prescriber or Dispenser in those tables. All remaining information would be archived and available to State from the Contractor reporting tool.

CLINICAL NOTIFICATION HISTORY MIGRATION

The elements listed below are minimum requirements. Should the state decide to migrate to new applications, a comprehensive Migration Plan will be developed in accordance with Section E.3. of the Contract.

When the migration occurs, the previous five (5) weeks of clinical notification history shall be migrated to the new application.

System Availability

The State PMP Data Collection and State PMP User Applications shall be available and performing all services at least 99.9% of the year, except for scheduled maintenance. Availability means the application is accessible and operable by State and registrants over the internet in material conformity with the specifications. The application is not considered available in the event of a material performance degradation or inoperability of the application, in whole or in part.

General Performance

The State PMP Data Collection Application database must permit unlimited Users to upload or manually submit dispensation data at the same time without interruption or time out errors. The State PMP User Application must allow unlimited Users to be on the application/system at the same time to perform functionality without interruption or time out errors.

Functionality of the State PMP Data Collection Application and the State PMP User Application in addition to any reporting tools provided by the Contractor shall perform without internal exception errors or time out errors. If any of these errors occur when a State Administrator(s) is running reports the Contractor shall resolve the issue(s) within five (5) business days or find alternative methods to provide the requested reports to the State.

Software Maintenance

Software Maintenance and Upgrades

Contractor shall provide all necessary software maintenance and upgrades including bug fixes, repairs, modifications, enhancements, new releases, new versions and other improvements for the software which are made generally available to its customers at no cost, at no additional charge to the state.

The Contractor shall provide the State four environments Test, UAT, Training and Production. The Test Environment shall have duplicate functionality to the Production Environment, available via a secure web connection, for the State to perform UAT initially of migration from current State PMP User Application to Contractor's new offering of State PMP User Application. All four environments provided to the State shall be on the same version of the database software.

Test will be used by State RMS to test migration, maintenance and upgrade changes before pushing to State UAT where the business will test.

The Contractor shall communicate all scheduled maintenance to the State at least thirty (30) days before code is moved into the Test Environment. Communication shall be sent via email to the State's contact as outlined in the Communication and Contacts section of this Contract. The email shall include the area(s) that will be affected and expected length of downtime.

Upgrades developed at the State's request may be validated by State personnel in the Contractor provided test and UAT environments at the State's discretion. The State will provide feedback to the Contractor's email notification of maintenance and upgrade(s) to be placed in the State's Test Environment within ten (10) days of email notification receipt to inform the Contractor if the State will test the listed maintenance or upgrade(s). Those items tested by State personnel must be accepted and approved by the State, prior to implementing changes to the State's Production Environment.

The Contractor shall provide release notes for all maintenance and upgrades within ten (10) business days in advance of releasing to Production but no later than two (2) business days prior to release into Production by the Contractor. Release notes must describe, in a user-friendly manner, the corrections, changes, or enhancements of each update or upgrade. . The release document must provide at a minimum.

- 1.1.1. Release date
- 1.1.2. New Features: Describe any new features
- 1.1.3. Enhancements: Describe enhancements to existing functionality
- 1.1.4. Bug Fixes: Describe fixes to currently existing features
- 1.1.5. Known Issues

The Contractor shall provide a Point-of-Contact (POC) to resolve any issues for the immediate forty-eight (48) hours after maintenance releases or upgrades have been implemented into the Production Environment.

The Contractor shall provide a Point of Contact (POC) to resolve any migration issues after State migrates to new State PMP Data Collection and User Applications.

The Contractor shall correct all service errors related to all maintenance releases or upgrades and respond to and resolve all support requests in accordance with the required times and other terms and conditions set forth in the support section of this document and as described in Addendum 2

If two or more Priority Level 1 service errors occur (as defined in Addendum 2 within a thirty (30) day period after the release of any maintenance or upgrade, the Contractor shall promptly investigate the root causes of the service error(s) and provide a detailed report and corrective action plan to the State within five (5) business days. The corrective action plan must include, but is not limited to, the following: issue, root cause, plan of resolution, and estimated time to accomplish (ETA). There will be no additional charge to the State for error resolution.

At no additional cost to the State, the Contractor shall ensure that any new version of the software provided to the State shall contain any and all modifications and enhancements that were developed for the State.

Third Party Software and Databases

Both the actual database software and the database structure:

1. The Contractor shall ensure that the State’s software environment, including Contractor provided software, operating systems, databases, and all other third party software, always runs at stable, supported, and secure software release levels, contingent upon:
 - o Compatibility with the existing hosting infrastructure
 - o Compatibility with existing State content, applications, and third party software
 - o State approval to implement into the Test, UAT and Production Environments.
2. The Contractor shall perform routine database maintenance as needed to maintain optimum database performance. Maintenance includes applying vendor/publisher/manufacturer released patches, updates, upgrades and any other tasks to enhance the databases.
3. The Contractor shall apply all patches for critical vulnerabilities for Contractor provided software, operating systems, databases, and all other third party software as they are released by the vendor/publisher/manufacturer within thirty (30) calendar days after release.

Constraints

All changes to any IP address that will impact any of the State’s applications covered under this Contract shall be communicated via email from Contractor to State no later than forty-five (45) days prior to the change being placed in Production. In addition, Contractor shall communicate electronically with all State data submitters of any IP address changes that would impact the ability to submit data.

Project Milestones

1. The Contractor and State will identify and assemble a team of key stakeholders and program sponsors, which shall minimally include project managers and analyst resources from both Contractor and the State. This group of identified individuals shall form a steering committee to guide, track, and monitor all aspects of this project.
2. The State will present the overall goals of the program and the parties shall develop key performance indicators (KPIs) for the current application and project milestones for gaps, enhancements, and all migrations.
3. The Contractor shall conduct a detailed review of the project plan, work breakdown structure, testing plan, and include time for user acceptance testing by State and key milestones. Both the State and the Contractor shall ensure dedicated resources are available to accomplish all project milestones.

5.1 Training

The Contractor shall provide onsite training on all applications to the State. The training shall be conducted at least ten (10) days before the applications are launched. The Contractor shall also provide onsite training and support until application is stable.

All Manuals for training must be specific to the State and specific cases tailored to the State.

5.2 Gateway

Contractor shall not use State information in the Gateway system.

5.3 Data Usage

No data collected for the State by the Contractor can be shared or released or used by the Contractor for data analytics without the prior express written permission of the State Commissioner of Health.

5.4 Data Transmission

The Contractor shall send data to the State at least daily and have logging in place to verify file sent successfully.

The contractor shall establish a process to alert the State when transmission of log files to the State have failed in the current process. The process shall be documented and provided to the State.

The elements listed below are minimum requirements. Should the state decide to migrate to new applications, a comprehensive migration plan will be developed in accordance with Section E.3. of the Contract.

The State will have full read access to the State PMP User Production database with full extract capabilities.

The Contractor shall provide full access to the State the Prescriber Consolidation ID that the Contractor creates and stores in the database that identifies grouped patients.

The Contractor shall provide full access to the State the field(s) that identifies any Prescribers with multiple DEA numbers who have a Prescriber Consolidation ID.

5.5 Data Dictionary

These elements listed below are minimum requirements and additional detailing will occur in accordance to Section E.3.

The Contractor shall provide to the State an up to date data dictionary, relevant mapping documentation and documentation for the associated metadata for the State PMP, State PMP Data Collection Application with every application or system update. Changes to the data dictionary should be communicated to the State within twenty-four (24) hours of making the change. The data dictionary shall include the following information at a minimum:

- Referential integrity
- All columns of all the tables of the database
- Data type
- Null values
- Description- if abbreviated make it clear and should include value sets
- Database constraints
- Key constraints (foreign and primary)
- Indexes
- Default constraint
- Ordinal position

5.6 Mapping for Data Migration

The elements listed below are minimum requirements. Should the State decide to migrate to new applications, a comprehensive Migration Plan will be developed in accordance with Section E.3. of the Contract.

For the purposes of data migration and mapping data from the old State PMP database to the new Contractor State PMP database, the following information is required:

Identification of what field in the old State PMP database is mapped to aa field in the new Contractor State PMP database and any data translations that are applied

5.7 Database Access

Contractor shall continue the log shipping process to the State to ensure that State’s reporting database is kept in sync with the Production database maintained by the Contractor.

The Contractor shall provide the State a comprehensive Entity Relationship Diagram (ERD) of State PMP database. The Contractor shall support indexing requests by the State on this database within three business days at no additional charge.

The State shall have access to **all** data collected by the Contractor for the State at all times.

The elements listed below are minimum requirements. Should the state decide to migrate to new applications, a comprehensive Migration Plan will be developed in accordance with Section E.3. of the Contract.

- The Contractor shall provide a database containing all State PMP User Application Production data which is relationally modelled in third normal form and enforces data integrity through database constraints.
- The State shall be granted full read access to this database and it shall be accessible by the State 99.9% of the time. The database must be updated at least daily.
- The Contractor shall provide the State with read access to the entire State PMP database, with the ability to pull data out of the system at any time. The Contractor shall provide consultation and support as needed to ensure access to the data.
- The Contractor shall provide the ability to extract the data that State needs from the State PMP database. If the tools provided by the Contractor do not meet the needs of the State then the Contractor shall provide options to extract the data or provide the necessary data in an agreeable format within twenty-four (24) hours, at no additional cost to a target location and format that is acceptable by the State.
- Contractor shall create a separate, correctly modeled (in third normal form), reporting database for State to access for operational audits and to perform public health analytics when migration occurs.

Addendums

6.1 Addendum 1: Zero Report Requirements

Zero Report

If a Dispenser does not dispense any schedule II-V prescriptions during a reporting period, a “zero” report shall be submitted. The term “zero” refers to the number of prescriptions dispensed during that reporting period. Please reference the State PMP Data Collection Application manual or the asap.net specification for additional details

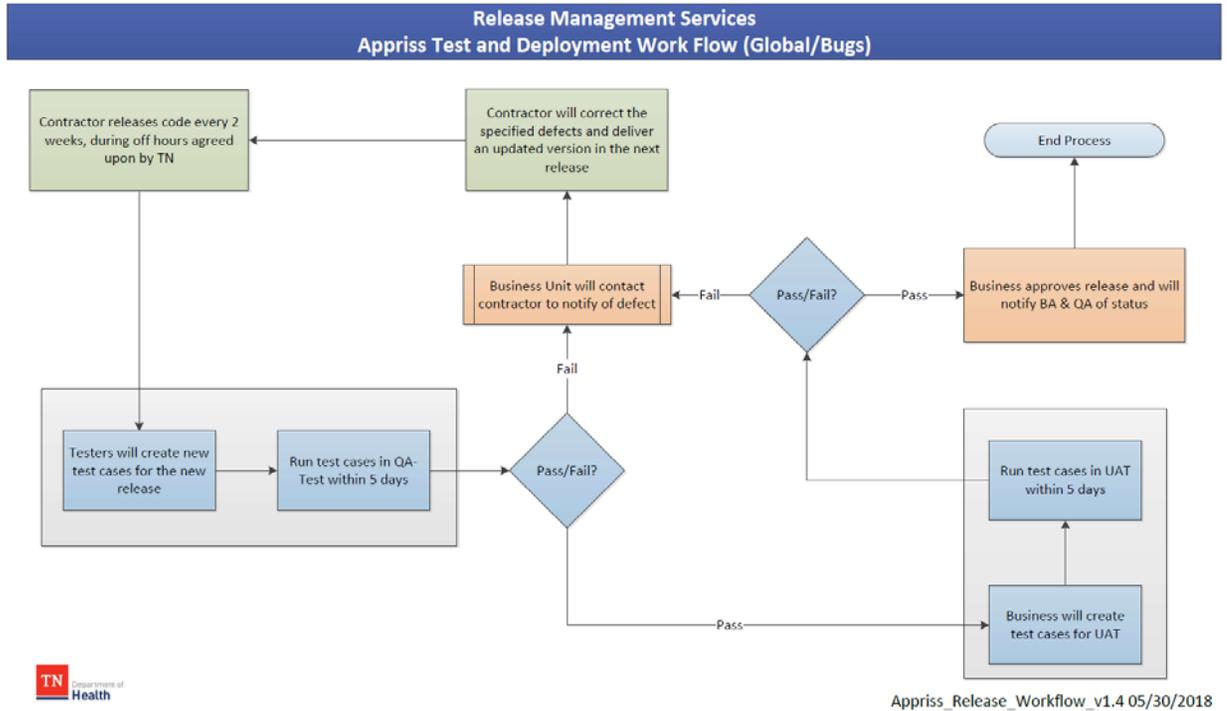
6.2 ADDENDUM 2: SERVICE LEVEL STANDARDS FOR SUPPORT

P r i o r i t y L e v el	Description	Response Time* Target (Business Hours from creation of service ticket by the Helpdesk)
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1	The State PMP User Application or the State PMP Data Collection Application is non-operational or Users cannot access the system, or the functionality is significantly decreased or back up or other security of data can no longer be performed. The defect affects mission critical functions or information in the Production Environment and may include, but not be limited to, data loss or corruption, system crash or missing major functionality. This may include any defect related to system availability, overall data integrity, or ability to serve the User.	1
2	The State PMP User Application or the State PMP Data Collection Application is operational with functional limitations or restrictions but there is minimal business impact. Under a Priority 2, the defect will have a large impact on the functionality of the application, but does not require immediate release into the Production Environment. This defect allows continued use of the application, but there is a known compatibility or operability disruptions with no known User acceptable work-around or missing minor functionality.	2
3	The State PMP User Application or the State PMP Data Collection Application is operational with functional limitations or restrictions that are not critical to the overall system operation, and the defect has a moderate impact on the functionality of the application. However, the application remains usable by all groups. A functional error exists for which there is a Subscriber acceptable workaround. Failures assigned this priority level cause no delays in production.	8
4	The State PMP User Application or the State PMP Data Collection Application is operational with problems or errors, which have little impact on system operations. Priority 4 shall include, but are not be limited to, documentation errors. Priority 4 defects have a minor or cosmetic error in the functionality of the application in a Production Environment. The defect has no impact on the ability to execute a Production application however. Failures assigned this priority level cause no delays in Production.	24

6.3 ADDENDUM 3: RELEASE MANAGEMENT PROCESS FLOW

The following process will be followed for all configurable changes and all enhancements purchased by the State. The Contractor will retain the ability to release fixes and non-configurable changes to Production during scheduled releases that are required to support the applications. The State will be notified in advance of changes included in all releases.



This sheet represents the current configuration as of 8/6/2018
Enhancements are under way that are not reflected on this snapshot in time

Attachment 3

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
1	User Type	Badge Number	First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation	License Type	Issuing State	License Number	Email Address	Organization	DEA for this Location (Y/N)	DEA Number	Specialty Care	Address Care of
2	Practitioner		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation				Email Address	Organization	DEA for this Location (Y/N)	DEA Number	Specialty Care	Address Care of
3	APRN		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation				Email Address	Organization	DEA for this Location (Y/N)	DEA Number	Specialty Care	Address Care of
4	PA		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation				Email Address	Organization	DEA for this Location (Y/N)	DEA Number	Specialty Care	Address Care of
5	Resident / Fellow		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation				Email Address	Organization	DEA for this Location (Y/N)	DEA Number	Specialty Care	Address Care of
6	Veterans Affairs		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation				Email Address	Organization	DEA for this Location (Y/N)	DEA Number	Specialty Care	Address Care of
7	HCE - Practitioner		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number		License Type	Issuing State	License Number	Email Address	Organization				Address Care of

Attachment 3

	A	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN
1	User Type	Street	City	State	Zip	Work Phone	Ext	Fax Number	Supervisor's DL Number	Supervisor's DL Issuing State	DEA Number	NPI Number	DEA Suffix	Professional Lic #	Issuing State	Clinical Notification Preference (Myself, HCE or Both)	Dispense (Y/N)	Security Questions	Reason for Registration (Notes Section)	Verification Code (CAPSHA)
2	Practitioner	Street	City	State	Zip	Work Phone	Ext	Fax Number			DEA Number			Professional Lic #	Issuing State	Clinical Notification Preference (Myself, HCE or Both)	Dispense (Y/N)	3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
3	APRN	Street	City	State	Zip	Work Phone	Ext	Fax Number	Supervisor's DL Number	Supervisor's DL Issuing State	DEA Number			Professional Lic #	Issuing State	Clinical Notification Preference (Myself, HCE or Both)	Dispense (Y/N)	3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
4	PA	Street	City	State	Zip	Work Phone	Ext	Fax Number	Supervisor's DL Number	Supervisor's DL Issuing State	DEA Number			Professional Lic #	Issuing State	Clinical Notification Preference (Myself, HCE or Both)	Dispense (Y/N)	3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
5	Resident / Fellow	Street	City	State	Zip	Work Phone	Ext	Fax Number				NPI Number	DEA Suffix				Dispense (Y/N)	3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
6	Veterans Affairs	Street	City	State	Zip	Work Phone	Ext	Fax Number				NPI Number	DEA Suffix	Professional Lic #	Issuing State		Dispense (Y/N)	3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
7	HCE - Practitioner	Street	City	State	Zip	Work Phone	Ext	Fax Number	Supervisor's DL Number	Supervisor's DL Issuing State								3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)

Attachment 3

Tennessee CSMD Registration Functionality and Fields in Current Platform

	A	AO	Tennessee CSMD Registration Functionality and Fields in Current Platform
1	User Type	I certify statement	Multiple Practice Locations Options
2	Practitioner	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	<p>Must support multiple practice locations that may or may not have a separate DEA Validation on DEA, Prof Lic and DL required Must support the ability to connect to supervisees (APN/PA/Delegates) Bypass License Validation on Login</p>
3	APRN	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	<p>Validation on DEA, Prof Lic and DL required Must support multiple practice locations that may or may not have a separate DEA and each location requires a supervising physician who must be an MD or DO and support multiple supervisors for same practice location Bypass License Validation on Login</p>
4	PA	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	<p>Validation on DEA, Prof Lic and DL required Must support multiple practice locations that may or may not have a separate DEA and each location requires a supervising physician who must be an MD or DO and support multiple supervisors for same practice location Bypass License Validation on Login</p>
5	Resident / Fellow	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	<p>Manual approval Residents can only have one location currently as there is one institution liable for their actions Bypass License Validation on Login</p>
6	Veterans Affairs	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	<p>Manual approval Veteran Affairs practitioners could practice at more than one Veteran Affairs location within the state or across into other states. Bypass License Validation on Login</p>
7	HCE - Practitioner	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	<p>Validate DL on personal information as we rely on the supervisor as the true validator that this individual is who they say they are. HCE-Practitioners can have multiple locations and single or multiple supervisors for each location. Bypass License Validation on Login</p>

Attachment 3

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
1	User Type	Badge Number	First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation	License Type	Issuing State	License Number	Email Address	Organization	DEA for this Location (Y/N)	DEA Number	Specialty Care	Address Care of
8	Pharmacist		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number	Occupation				Email Address	Organization	Pharmacy DEA Number	Pharmacy Professional Lic Number	Are you PIC (Y/N)	Address Care of
9	HCE - Pharmacist		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number		License Type	Issuing State	License Number	Email Address	Organization				Address Care of
10	Investigator - Independent	Badge Number	First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number					Email Address	Organization				Address Care of
11	Investigator - Supervisor	Badge Number	First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number					Email Address	Organization				Address Care of
12	Investigator - Delegate	Badge Number	First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number					Email Address	Organization				Address Care of
13	CSMD Admin		First Name	Middle Name	Last Name	Date of Birth	Home Phone	Cell Phone	SSN - last 4 digits	DL Issuing State	DL Number					Email Address	Organization				Address Care of

Attachment 3

	A	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN
1	User Type	Street	City	State	Zip	Work Phone	Ext	Fax Number	Supervisor's DL Number	Supervisor's DL Issuing State	DEA Number	NPI Number	DEA Suffix	Professional Lic #	Issuing State	Clinical Notification Preference (Myself, HCE or Both)	Dispense (Y/N)	Security Questions	Reason for Registration (Notes Section)	Verification Code (CAPSHA)
8	Pharmacist	Street	City	State	Zip	Work Phone	Ext	Fax Number						Professional Lic #	Issuing State			3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
9	HCE - Pharmacist	Street	City	State	Zip	Work Phone	Ext	Fax Number	Supervisor's DL Number	Supervisor's DL Issuing State								3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
10	Investigator - Independent	Street	City	State	Zip	Work Phone	Ext	Fax Number						Professional Lic #	Issuing State			3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
11	Investigator - Supervisor	Street	City	State	Zip	Work Phone	Ext	Fax Number						Professional Lic #	Issuing State			3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
12	Investigator - Delegate	Street	City	State	Zip	Work Phone	Ext	Fax Number						Professional Lic #	Issuing State			3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)
13	CSMD Admin	Street	City	State	Zip	Work Phone	Ext	Fax Number										3 Security Questions Required from list of several choices)	Reason for Registration	Verification Code (CAPSHA)

Attachment 3

Tennessee CSMD Registration Functionality and Fields in Current Platform

	A	AO	Tennessee CSMD Registration
1	User Type	I certify statement	Multiple Practice Locations Options
8	Pharmacist	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	Validation on Prof Lic and DL required for auto registration Must support multiple practice locations Bypass License Validation on Login
9	HCE - Pharmacist	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	Validate DL on personal information as we rely on the supervisor as the true validator that this individual is who they say they are. HCE-Pharmacist can have multiple locations and single or multiple supervisors for each location. (Found issue in production) Bypass License Validation on Login
10	Investigator - Independent	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	Manual approval Only one location supported as this is supposed to be for Medical Examiners Bypass License Validation on Login
11	Investigator - Supervisor	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	Only one location supported (This is OIG TennCare Fraud Unit Supervisors) Bypass License Validation on Login
12	Investigator - Delegate	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	Manual approval Only one location supported (This is OIG TennCare Fraud Unit Delegates) Each request made must be approved by a Investigator Supervisor When a delegate is registered Appriss has to manually associate them with supervisors (primary and a backup to approve requests) Bypass License Validation on Login
13	CSMD Admin	I certify that the information obtained from the CSMD will not be misused based on laws and regulations. I certify that I have reviewed the CSMD PMP policy and agree to abide by all terms of the policy.	Manual approval One Only location is supported and these are manual registrations performed by another CSMD Admin Bypass License Validation on Login

Registration Functionality and Processes to Auto Register, Sent to Pending, Deny and Manual Creation of User Accounts

User Type	How registration is handled: Auto Register, Sent to Pending, Manual Creation	1. Validation Process and Process Path	2. Validation Process and Process Path	3. Validation Process and Process Path
Practitioner	Auto register with validation on DEA, Prof Lic and DL	If any validation on DEA or Prof lic fail registration denied	If DL validation fails or if out of state DL it goes to pending registration	
APN	Auto register with validation on DEA, Prof Lic and DL	Additional requirement - at least one supervisor for every location (supervisor add functionality based on Supervisor Driver License number to identify) - no supervisor enter not able to submit registration	If any validation on DEA or Prof lic fail registration denied	If DL validation fails or if out of state DL it goes to pending registration
PA Resident / Fellow Veterans Affairs	Auto register with validation on DEA, Prof Lic and DL All registrations go to pending for manual approval All registrations go to pending for manual approval	Additional requirement - at least one supervisor for every location (supervisor add functionality based on Supervisor Driver License number to identify) - no supervisor enter not able to submit registration	If any validation on DEA or Prof lic fail registration denied	If DL validation fails or if out of state DL it goes to pending registration
HCE - Practitioner	Validation on DL and a supervisor is required	Additional requirement - at least one supervisor for every location (supervisor add functionality based on Supervisor Driver License number to identify) - no supervisor enter not able to submit registration	If DL validation fails or if out of state DL it goes to pending registration	
Pharmacist	Validation on Prof Lic and DL	If validation on Prof Lic fails registration denied		
HCE - Pharmacist	Validation on DL and a supervisor is required	Additional requirement - at least one supervisor for every location (supervisor add functionality based on Supervisor Driver License number to identify) - no supervisor enter not able to submit registration		
Investigator - Independent Investigator - Supervisor Investigaor - Delegate CSMD Admin	Registration can be filled out but sent to Pending and requires manual approval CSMD Admin must create this account CSMD Admin must create this account CSMD Admin must create this account			
Pending Registration Search Functionality	FN, MN, LN, DOB From, DOB To, Org, DEA#, Occupation, Registration From, Registration To, Email Address, User Job	Capture of Date Registered and sent to Pending is Critical and has been effect since last quarter of 2012		
Denied Registration Search Functionality	FN, MN, LN, DOB From, DOB To, Org, DEA#, Occupation, Email Address, User Job	Capture of Denial Date is Critical and has been effect since last quarter of 2012	Would like to have Denied From and Denied To added to search elements	
Approved Registration Search Functionality	FN, MN, LN, DOB From, DOB To, Org, DEA#, Occupation, Registration From, Registration To, Approved From, Approved to, Email Address, User Job	Capture of Approval Date is Critical and has been effect since last quarter of 2012		

Request Tab Functionality

User Type	Request - New Request Patient	Request - View Request for Self	Request - View Request Delegates	Request - View Request ALL	Request - Easy Request	Practitioner Self Lookup (Self)	Practitioner Self-Lookup (Look up Others)	Practitioner Vs. Peer
Practitioner	y	y	y	N	Y	Y	N	Y
APN	y	y	y	N	Y	Y	N	Y
PA	y	y	y	N	Y	Y	N	Y
Resident / Fellow	y	y	y	N	Y	N	N	N
Veterans Affairs	y	y	y	N	Y	N	N	N
HCE - Practitioner	y	y	N	N	Y	N	N	N
Pharmacist	Y	Y	Y	N	Y	N	N	N
HCE - Pharmacist	y	y	N	N	Y	N	N	N
Investigator - Independent	y	y	N	N	Y	N	Y	N
Investigator - Supervisor	y	y	Y	N	Y	N	Y	N
Investigaor - Delegate	y	y	N	N	Y	N	Y	N
CSMD Admin	y	y	Y	Y	Y	N	Y	N
CRNA	Y	Y	N	N	Y	N	N	N
Medical Exiaminer	Y	Y	N	N	Y	N	N	N

(The ones with N do not have DEA numbers)

View Request

First Name: <input type="text"/>	Last Name: <input type="text"/>	Requested Type: <input type="text" value=""/>
Submitted date From: <input type="text" value="07/03/2016"/>	Submitted date To: <input type="text"/>	Request Status: <input type="text" value=""/>
Submitted By: <input type="text"/>	IPAddress: <input type="text"/>	Email Address: <input type="text"/>
DEA Num: <input type="text"/>	Pharmacy Name: <input type="text"/>	

Export to Excel
Search
Clear

Showing 1-10 of 526515

Name	Type	Submitted By	Submitted On	Status
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Request Tab Functionality

View Request	First Name	Last Name	Request Type	Submitted From	Submitted To	Request Statue	Submitted By	IP Address	Email Address	DEA #	Pharmacy Name	Date Filled From (Default 12 months)	Date Filled To (Default 12 months)	Reason for Request: Suspected OD or Poisoning selection from dropdown (optional)

Request Patient

Patient Details

Last Name: First Name: Middle Name:

Birth Date: Gender:

Contact Details

Street: City: State: Zip:

Aliases

Prescription Range

Set default to last 12 months date range Date Filled From: Date Filled To:

Options

Format: Reason For Request:

I certify that I am authorized to access this database pursuant to Tenn. Code Ann. § 53-10-306 and view all confidential information obtained during this session. Unauthorized access, unauthorized searches, or improper use or disclosure of the information contained in this database is a violation of state law and subject to criminal prosecution.

Excel template provided that allows user to upload many patients and have the reports generated and waiting to be picked up. If more than one patient identified a "plus sign" appears for user to click and pick list appears for user to choose what patients to include in the report.

Easy Request

Easy Request - View Request

Area for Searching	Last Name	First Name	DOB	Request Typ	Date Filled F	Date Filled To
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Easy Request

Multiple Report Submission Manual Entry File Upload

Last Name: First Name: Birth Date: Gender:

Set default to last 12 months date range Date Filled From: Date Filled To:

Report Format:

I certify that I am authorized to access this database pursuant to Tenn. Code Ann. § 53-10-306 and view all confidential information obtained during this session. Unauthorized access, unauthorized searches, or improper use or disclosure of the information contained in this database is a violation of state law and subject to criminal prosecution.

[Add More Patient Request](#)

View Request

Last Name: First Name: Birth Date: Requested Type:

Date Filled From: Date Filled To:

[Search](#) [Clear](#)

Showing 1-10 of 565

Name	Type	Submitted By	Submitted On	Status

Practitioner Self-
Lookup DEA# First Name Middle Name Last Name Rx Written Date Rx Written to Date Patient First Name Patient Last Name Patient DOB Street City State Zip

In practitioner self lookup they can look up themselves or themselves and their delegates (APN/PA/HCE)

Prescription by Practitioner

DEA Number:

First Name: Middle Name: Last Name: Practitioner Mailing Name:

Rx Written From Date: Rx Written To Date: Patient First Name: Patient Last Name: Patient DOB:

Street: City: State: Zip:

[View Report](#)

Practitioner Vs
Peers DEA # Rx Written From Rx Written To

Practitioner Vs Peers

DEA Number:

Rx Written From: Rx Written To:

[View Report](#)

Notification Tab Funtionality

Notification Messages	Inbox	Outbox	Results Returned
	Subject	Notified From	Message Subject
	Create Date From	Notified To	Create Date
	Create Date To	Subject	Created By
	Created By		Status
	Status		Delete

Search, Clear, Create New, Delete Selected Messages

Search, Clear, Create New, Delete Selected Messages

This page allows the creation of new notifications, the ability to delete messages in Inbox or Outbox

Report Issue
 Subject
 Category
 Status
 Note Field

Portal Exception Messages
 Created By
 Subject
 Type
 View Status
 Create Date From
 Status
 Search, Clear

The Creation of Portal Messages allows the selection of the roles the notification is to be sent or you can select individuals. It allows for attachments, contains a subject line and an area for a text message. Screen shot following.

DATA MANAGEMENT

Pharmacy Maintenance	<p>Search</p> <ul style="list-style-type: none"> Pharmacy Name Phone Number Status DEA Number check box for "unknown" Add New, Search 	<p>View</p> <ul style="list-style-type: none"> NABP Num DEA Num Pharmacy Name City Phone Num Status Unknown
Practitioner Maintenance	<p>Search</p> <ul style="list-style-type: none"> Mailing Name Last Name Specialization Status DEA Number Check box - Dispensing and Unknown Add New, Search 	<p>View</p> <ul style="list-style-type: none"> DEA Num NPI Num Mailing Name Specialization City Status Unknown
Drug Code Maintenance	<p>Search</p> <ul style="list-style-type: none"> Product Number Product Type (NDC, UPC, HRI, UP) Product Name Ingredient DEA Schedule check box "unknown" 	<p>View</p> <ul style="list-style-type: none"> Product Number Product Name Ingredient DEA Schedule Unknown
Query Window	<p>You can add one or more of these data fields</p>	<p>Operator</p>
Group Maintenance	<ul style="list-style-type: none"> Address Customer ID DOB First Name Last Name Zip 	<p>=, >, <, less than or equal, greater than or equal, contains, begins, ends" You can use "or" or "and" in this area</p>
Resolve Dispensers	<p>DEA</p> <p>Allows ability to check rows to change the dispenser DEA number to a different number OR ALL rows with a certain DEA number to a different DEA number</p>	<p>Has checkbox to list all unknown dispensers</p>
Resolve Practitioner	<p>DEA</p> <p>Allows ability to check rows to change the Practitioner DEA number to a different number OR ALL rows with a certain DEA number to a different DEA number</p>	<p>Has checkbox to list all unknown practitioners</p>
Resolve NDC	<p>Product Number</p> <p>Product Code</p> <p>Allows ability to check rows to change the NDC number to a different number OR ALL rows with a certain NDC number to a different NDC number</p>	<p>Check box to list all unknown drug codes</p>
Prescription Maintenance	<ul style="list-style-type: none"> Rx Number Pharmacy DEA Number Prescriber DEA Number Date Filled From Date Filled To Pharmacy Name Patient Last Name Patient First Name Patient Middle Name <p>Ability to search by any of the above fields</p> <p>Rows identified in search can be deleted or you can add click to add a new Rx and it takes you to the RX Manual Entry screen</p>	

Pharmacy Maintenance

Pharmacy Name: Phone Number: Status:

DEA Number: Unknown Add New Search

Showing 1-10 of 92905

NABP Num | DEA Num | Pharmacy Name | City | Phone Num | Status | Unknown

Practitioner Maintenance

Mailing Name: Last Name: Specialization: Status:

DEA Number: Dispensing? Unknown Add New Search

Showing 1-10 of 1747041

DEA Num | NPI Num | Mailing Name | Specialization | City | Status | Unknown

Drug Code List

Product Number: Product Type: Product Name:

Ingredient: DEA Schedule: Unknown Add New Search

Showing 1-10 of 449563

Product Number | Product Name | Ingredient | DEA Schedule | Unknown

Group Maintenance

Add Criteria Save Query Power Search Search Clear Search

Where: (Element: Operator: Value:)

Resolve Dispensers

DEA Number: Search List All Unknown Dispensers

List of Prescriptions

Resolve Practitioner

DEA Number: Search List All Unknown Practitioners

List of Prescriptions

Resolve Drug Code

Product Number: Product Code: Search List All Unknown Drug Codes

List of Prescriptions

Prescription List

Rx Number: Pharmacy DEA Number: Prescriber DEA Number: Date Filled From: Date Filled To:

Pharmacy Name: Patient Last Name: Patient First Name: Patient Middle Name: Search Clear

Add New Prescription Delete Selected

Admin File Upload	Function to upload file	
	Function to View Uploaded Files	
Test Run & View Prescription File	Function to upload a test prescription file	
	Function to View Test Run Prescription Files Uploaded	
File Upload	Function to Upload File	
	Function to View Uploaded Files	
Upload Pharmacy Diskettes	Upload Pharmacy Diskette Files	Need to see if this function is currently used by any TN Customers
	View Uploaded Pharmacy Diskette Files	
Upload Pharmacy Zero Report Data Fields	Function to enter pharmacy information	
	Pharmacy Name	
	DEA #	
	From Report Period	
	To Report Period	
	Function to View Submitted Zero Reports	
Manual Entry	Data Fields to manually enter Rx Dispenser Details	NABP# NPI# DEA# Pharmacy Name Contact Last Name Contact First Name Chain Site# Contact Number Address (Care of) Street City State Zip
	Patient Details	Last Name First Name Middle Name DOB Gender Street Street2 City State Zip Contact Number ID Type ID# ID Issuing State Species Code Location
	Prescriber Details	Prescriber DEA# Prescriber NPI# State License# DEA Suffix Prescriber Last Name Prescriber First Name Prescriber Middle Name
	Prescription Details	Reporting Status Rx Number Date Written Auth Refills Date Filled Refill No ID Qual Product # Qty Days Supply Drug Dosage Unit Rx Origin Code Partial Fill Payment Method Electronic Ref#
	Additional Information Reporting	State Issuing Rx No State Issued Rx No
Delinquent Pharmacy	View and Generate Pharmacy Delinquent List	
	Delinquent Pharmacy - Generate & Notify	
Data Fields	From Date	
	To Date	
	You can choose one of these options:	Delinquent Pharmacies Delinquent Pharmacies - Attempted Upload Delinquent Pharmacies - Did Not Upload

Pinpoint:	StateID:	City:	State_City:	Contact Number:				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
ID Type:	ID #:	ID Issuing State:	Specimen Code:	Location:				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
Prescriber Details								
Prescriber DEA #:	Prescriber NPI #:	State License #:	DEA Suffix:					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>					
Prescriber Last Name:	Prescriber First Name:	Prescriber Middle Name:						
<input type="text"/>	<input type="text"/>	<input type="text"/>						
Prescription Details								
Reporting Status:	<input type="text"/>							
Rx Number:	Date Written:	Auth Refills:	Date Filled:	Refill No:	ID Qual:	Product #:	Qty:	Days Supply:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Drug Change Unit:	Rx Origin Code:	Partial Fill:	Payment Method:	Electronic Ref #:				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
Additional Information Reporting								
State Issued Rx No:	State Issued Rx No:							
<input type="text"/>	<input type="text"/>							
<input type="checkbox"/> I hereby certify that the information I have entered above is accurate and complete.								
<input type="button" value="Save"/> <input type="button" value="Clear"/>								

View And Generate Pharmacy Delinquent List	
Delinquent Pharmacy - Generate & Notify Delinquent Pharmacy - Notify	
From Date:	To Date:
<input type="text" value="07/04/2016"/>	<input type="text" value="09/04/2016"/>
<input type="button" value="Search"/> <input type="button" value="Clear"/>	

Prescription Analysis Tab

Threshold Search

- Add Criteria
- Save Query
- Run Background
- Search
- Clear Search
- Show Result

Enter Value

Add Criteria options
(Can use "And" and "Or" criteria on any
chosen data fields)

- First Name
- Last Name
- No. of Doses
- No. of Pharmacies
- No. of Practitioners
- No. of Prescriptions

Operators

"="

>

>=

<

<=

<>

Contains

Begins

Ends

- Date Filled From
- Date Filled To

Patient Search

- Add Criteria
- Save Query
- Power Search
- Search
- Clear Search

Add Criteria Options

- City
- Customer ID
- DOB
- Drug Ingredients
- First Name
- Gender
- Last Name
- Middle Name
- Pharmacy DEA Num
- Pharmacy Status
- Phone Number
- Practitioner DEA Num
- Practitioner Status
- Product Name
- State
- Street
- Zip

Operators

"="

>

>=

<

<=

<>

Contains

Begins

Ends

Enter Value

- Date Filled From
- Date Filled To

Practitioner Search

- Add Criteria
- Save Query
- Power Search
- Search
- Clear Search

Prescription Analysis Tab

Add Criteria Options

	Operators	Enter Value
Care of	"="	
City	"="	
DEA Number	>	
Email	>=	
First Name	<	
Last Name	<=	
Mailing Name	<>	
Middle Name	Contains	
Phone Number	Begins	
Specialization	Ends	
State		
Street		
Zip		
Date Filled From		
Date Filled To		

Prescription Search

- Add Criteria
- Save Query
- Power Search
- Search
- Clear Search

	Operators	Enter Value
Date Filled	"="	
Date Prescribed	"="	
Days Supply	>	
Ingredient	>=	
Patient Address	<	
Patient DOB	<=	
Patient First Name	<>	
Patient Last Name	Contains	
Pharmacy DEA	Begins	
Practitioner DEA	Ends	
Product		
Quantity		
Rx Number		
Strength		
Upload File Name		
Date Filled From		
Date Filled To		

Pharmacy Search

- Add Criteria
- Save Query
- Power Search
- Search
- Clear Search

	Operators	Enter Value
DEA Number	"="	
Email	"="	
Fax Number	>	
NABP Number	>=	
Pharmacy Name	<	
Phone #	<=	

Prescription Analysis Tab

Prof License Number	<>
Statue	Contains
Street	Begins
Zip	Ends
Date Filled From	
Date Filled To	

System Management Tab

Job Type Maintenance	Job Types	User Type	Description	Account Type
		Law Enforcement Other	Law Enforcement Other	Law Enforcement Others Pharmacy Practitioner Admin
		Pharmacy	Pharmacy	
		Practitioner Admin	Practitioner Admin	

Functionality to change, save or delete job type name, description and account type

Job Maintenance	Job Name	Job Type	Job Status	Requires Supervision	Available to Public
	Admin	Admin	Independent	No	No
	Practitioner	Practitioner	Supervisor	No	Yes
	Pharmacist	Pharmacy	Supervisor	No	Yes
	Investigator-Delegate	Law Enforcement	Delegate	Yes	No
	Investigator-Supervisor	Law Enforcement	Supervisor	No	No
	Investigator-Independent	Law Enforcement	Independent	No	Yes
	Resident/Fellow Health Care Extender - Practitioner	Practitioner	Supervisor	No	Yes
	Health Care Extender - Practitioner	Practitioner	Delegate	No	Yes
	Health Care Extender - Pharmacist	Pharmacy	Delegate	No	Yes
	Advanced Practice Nurse	Practitioner	Supervisor Delegate	No	Yes
	Physician Assistant	Practitioner	Supervisor Delegate	No	Yes
	System	Admin	Independent	No	No
	System Test	Other	Independent	No	No
	Veterans Affairs Practitioner	Practitioner	Supervisor	No	Yes
	CRNA	Practitioner	Supervisor	No	Yes
	Medical Examiner	Practitioner	Independent	No	Yes

Job Details Check boxes for these Available to Public for Registration

System Management Tab

Case Details Mandatory (On Request Page)
 Do not pre-populate Organization details on Registration
 Auto Approve
 Requires Supervision

Status (check boxes)
 Independent
 Supervisor
 Delegate
 SupervisorDelegate

Verify on Approval

License Type	Required	Optional	Not Used
DEA Number			
NABP Number			
NCPDP Number			
NPI Number			
State Number			
Bade #			
Drivers License #			
Professional License #			
Badge Number			
ORI Number			
DEA Suffix Number			

Security Questions Mapping for Job

No. of Security Questions that should be asked on Registration Page for this Job	Dropdown list with number selection
--	-------------------------------------

Question Selection	What is your Mothers Maiden Name? What is your Pets Name? In what city were you born? What is your oldest sibling's birthday month and year? (e.g., January 1900) What school di you attend sixth grade? What is your maternal grandmother's maiden name? What is your oldest cousin's first and last name? In what city does your nearest sibling live? What was your childhood nickname? What is the name of your favorite childhood friend? What was the last name of your third grade teacher?
--------------------	--

System Management Tab

What is the middle name of your oldest child?
In what city or town was your first job?

You can make changes and save or delete security questions

Security Maintenance

Security Profile

Job	Job Type	No of Users
Admin	Admin	
Practitioner	Practitioner	
Pharmacist	Pharmacy	
Investigator-Delegate	Law-Enforcement	
Investigator-Supervis	Law-Enforcement	
Investigator-Indepenc	Law-Enforcement	
Resident/Fellow	Practitioner	
Health Care Extender	Practitioner	
Health Care Extender	Pharmacy	
Advanced Practice Nu	Practitioner	
Physician Assistant	Practitioner	
System	Admin	
System Test	Other	
Veterans Affairs Pract	Practitioner	

Each Job has underlying functionality: Portal Functions, Portal Reports and Assigned Users

Portal Functions

Function	Action	Allow or Deny
AdHoc Reports	Default	
Admin File Upload	Upload Files Search Others	
Admin View Pharmacy Uploads	Default	
Alert Edit	Submit Post	
Alert Search	Default All Regions	
Alert View	Default	
Allow Rx re-extraction	Default	
Archive Prescriptions	Default	
Archive Reports	Default	
Auto Response Maintenance	Default	
Broadcast Documents	Broadcast	
Clinical Notification Letter	Default Generate List & Notify	
Clinical Notification	View	
Data Collection - Research Data	Download Research Data	
Delinquent Pharmacy View	Default Generate List & Notify	

System Management Tab

Error Notification	Default	
Frequently Asked Questions	View	
	Insert	
	Update	
	Delete	
FTP Pharmacy		
File Upload	Default	
Group		
Maintenance	Manage Patient Groups	
	Manage Practitioner Groups	
InfoCenter	View	
	PublishPrivate	
	PublishPublic	
	Delete	
Job Maintenance	Maintain Jobs	
	Edit	
	Delete	
Job Type		
Maintenance	Default	
	Edit	
	Delete	
Manual Entry	Default	
Message Center	View	
	Create	
My Account	View	
	Update	
	Change Password	
	Enable Email	
NDC Code View	Default	
	Edit	
Notified		
Document	View Notification Errors	
Patient Details	View Details	
Patient Threshold		
Search	Search	
	Search Others	
	Search Others	
Patient Search	Default	
Pharmacies	View	
	Edit	
Pharmacy File		
Upload	Default	
	Search Others	
	Realtime Upload	
Pharmacy Search	Default	
	Generate Excel Search	
Pharmacy Zero		
Report	Default	
	Submit Others	
Portal Broadcast	Default	
Portal		
Maintenance	Default	
	View User Password	
Portal Message	User to User	
	User to Role	
	User to Region	NOTE: Would like this turned off
Power Search for		
Patient	Default	
Practitioner		
Search	Default	
Practitioners	View	
	Edit	

System Management Tab

Prescription	
Maintenance	View
	Edit
	Delete
	View - Others
Prescription	
Search	Default
Received Portal	
Message	Default
Registration -	
Approved	
Registrations	Default
Registraion -	
Denied	
Registrations	Default
Registration -	
Pending	
Registrations	Edit
	Default
	Auto Suggest Username Password
Related Link	View
Replace	
Supervisor	Modify Relationships
Report Format	Excel
	PDF
	XML
	CSV
	TIFF
	Word
Report Issue	Default
Request - Easy	
Request	Submit Easy Request
Request -	
Manage AutoFill	
List	Manage AutoFill List
Request - New	
Request	Patient
	Practitioner
	Any Practitioner
	Auto Fulfil Patient Request
	Relax Mandatory Request Fields Constraint
	Auto Fulfill Practitioner Request
	Auto Suggest - Me
	Auto Suggest - Others
	User Led Unsolicited Request
	InterState Request
	Pharmacy
	Any Pharmacy
	Submit Request on Behalf of Supervisor
	Relax Supervisor Selection
	Assign Request to Supervisor Hieracrhy
Request -	
Pharmacy Self	
Look-up	Self
	Others
Request -	
Practitioner Self	
Look-up	Self
	Others
Request -	
Practitioner Vs	
Peers	Self
	Others
Request - Send	
Unsolicited	View Sent Unsolicited
	Generate & Send Request
Request -	
Unsolicited	
Received	Default
Request - View	
Request	Default

System Management Tab

	All Regions
	Revoke Request Report
	Process Request
	Generate Excel Request
	View Request Submitted on Behalf of Supervisor
Request Report	View Expired
Resolve Groups	Resolve Patients
	Resolve Practitioners
Resolve NDC	
Codes	View
	Update
Resolve	
Dispensers	View
	Update
Resolve	
Practitioner	Default
Saved Query List	View
Search and	
Summarize Drugs	Search and Summarize Drugs
Security Profile	
Maintenance	Default
System Codes	View
	Insert
	Update
Test Run Upload	Default
	Search Others
Upload Diskettes	Default
	Search Others
User Directory	Default
User	
Maintenance	Default
View Broadcasted	
Documents List	View
View	
Relationships	View Relationships
View Uploaded	
Diskettes	View
View Uploaded	
Files	Default
Welcome Screen	Default

PORTAL REPORTS

Function	Action	Allow/Deny
Additional		
Reports	Top X Practitioners By Therapeutic Class	
	Prescriptions By ZipCode By TherapeuticClass	
	Prescriptions By County By TherapeuticClass	
Alerts	Execute	
Analytical	Default	
	Performance Metrics	
	Prescription by Year	
	Prescription by County	
Archive Data	View	
Audit Reports	Default	
Clinical		
Notification		
Report	Clinical Notification Report	
Exempt Waiver		
Status Report	Exempt Waiver Status Report	
Extender Audit		
Report	Extender Audit Report	
File Upload Error		
Report	Default	
	View - Others	

System Management Tab

Manual Override Report	Manual Override Report
Practitioner Who Dispense Report	Practitioners Who Dispense Report
Prescription Analysis Reports	<ul style="list-style-type: none"> Default Prescription by Product Report Prescription by Pharmacy Report Prescription by Practitioner Report Top X Practitioners By Exc Prescriptions Top X Patients by NDC Code Topy X Prescriptions by NDC Code Prescription of Product by Pharmacies Prescriptions by Patient County Counties Having Drugs Dispensed Over Threshold Pharmacies Dispensing Over Threshold Pharmacies Dispensing Over Threshold by Location Top X Filling Pharmacies
Prescription Report	<ul style="list-style-type: none"> View Patient Details Vie Prescriber Details View Pharmacy Details View Prescription Details
Prescriptions by Month For Pharmacy Requests Stastiscal System Admin Reports	<ul style="list-style-type: none"> Execute Execute Default Default

ASSIGNED Users Login Clicking on a user allows you to edit the user account
 First Name
 Last Name

USER MAINTENANCE User Login Clicking on a user allows you to edit the user account
 Organization
 Job
 Job Type
 Last Name
 First Name

User
 License/Identifier
 Email Address
 Show Deleted
 Users Only This is a check box

REPLACE SUPERVISOR Supervisor Allows you to select a user that is currently under one supervisor and move them to another supervisor.

Created separate tab for this functionality as there are 547 lines of different items

PORTAL MAINTENANCE
 AUTO RESPONSE MAINTENANCE
 Patient Mandatory Request Field Configuration

City You click on what will be the mandatory fields and you can save settings or discard changes
 Last Name
 Prescription Date
 To
 Street
 DOB
 Prescription Date
 From
 State
 Zip

System Management Tab

	First name	
Practitioner Mandatory Request Field Configuration	City Last Name Prescription Date To Street DEA# Prescription Date From State Zip First Name	
PORTAL BROADCAST NEWS	Title Posted From Posted To Expires From Expires To	You can search or clear fields or create "new"
USER DIRECTORY	User Login Organization Last Name First Name Email Address	You can search using any element
When you Search it brings up all the	<p>USER DETAILS</p> <p>Username Profile Information</p> <p>Contact Information</p>	<p>When you click into the User Details it is a View ONLY and cannot be edited</p> <p>Job Organization Occupation DEA Number Specialty Care First Name Middle Name Last Name Date of Birth Name Prefix Name Suffix</p> <p>Address (Care of) Street City State Zip Home Phone Cell Phone Fax Number Work Phone Extension Pager Number Email Address (Must be a private and confidential email address) Region Notification Method</p>

Reports Tab

Statistical Reports

Alerts

Alert Type
Region
Submit Date From
Submit Date To
Generate Report

Click

Requests

Request Type
Request Submit From Date
Request Submit To Date
Job
Requestor
IP Address
Patient Last Name
Patient First Name
Reason for Request: Suspected
Overdose or Poisoning
Exact Match
Generate Report

checkbox

Click

Analytical Reports

Performance Metric

From Date
To Date

Click

Generate Report

This report does not
currently work so no
idea what it would

Prescriptions by Year Report

From Year
To Year
Generate Report
Report shows a graphical
representation of the number of Rx's
submitted
Exportable formats

Click

XML
CSV
PDF
MHTML
Excel
TIFF
Word

Request by Year

From Year
To Year
Generate Report

Click

Report shows graphical
representation with break down by
Practitioner, Pharmacy, Others, Law
Enforcement
Exportable Formats

XML

Reports Tab

CSV
PDF
MHTML
Excel
TIFF
Word

Prescriptions by County

Click

From Date
To Date
Generate Report
Report shows graphical
representation of the state of TN by
number of prescriptions
Exportable Formats

XML
CSV
PDF
MHTML
Excel
TIFF
Word

Top X Practitioner Report by Exceeding
Prescriptions

No longer as
valuable as it is by
prescriptions and not
MME

Top X Patients By Exceeding
Prescriptions Report

No longer as
valuable as it is by
prescriptions and not
MME

To X Patients by NDC Code

No longer as
valuable as it does
not group NDC codes
of similar products

Prescription By Pharmacy

Click

Pharmacy Name
NPI#/DEA#
Start Date
End Date
View Report
Report Shows

Exportable Formats

Patient
Rx Number
Fill Date
Product, Str, Form
XML
CSV
PDF
MHTML
Excel

Reports Tab

		TIFF Word
Prescription by Practitioner	Practitioner Last Name DEA Number Start Date End Date	
Click	View Report	Patient DOB Fill Date Written Product Qty Rx# Pharmacy
	Exportable Formats	XML CSV PDF MHTML Excel TIFF Word
Prescription by Product		As needs have changed this has become less useful
Prescription Trend Analysis Report		Not as relevant as it is based on number of prescriptions
Prescriptions of Products by Pharmacies	Pharmacy DEA# From Date To Date	
Click	View Report	Product Name (under each product it list these fields) Patient Name Rx Number Refill Code Date Filled Quantity Days Supply Prescriber
	Exportable Formats	Pay XML CSV

Reports Tab

PDF
MHTML
Excel
TIFF
Word

Not as relevant as
based on number of
prescriptions

Top X Filling Pharmacies Report

ARCHIVE REPORTS

Prescription By Pharmacy

Click

Pharmacy Name
NPI#/DEA#
Start Date
End Date
View Report
Report Shows

Exportable Formats

Patient
Rx Number
Fill Date
Product, Str, Form
XML
CSV
PDF
MHTML
Excel
TIFF
Word

Prescription by Practitioner

Click

Practitioner Last Name
DEA Number
Start Date
End Date
View Report

Exportable Formats

Patient
DOB
Fill Date
Written
Product
Qty
Rx#
Pharmacy
XML
CSV
PDF
MHTML
Excel
TIFF
Word

Patient Search

Search Elements
City
Customer ID

Operators
"='
>

Enter Value

Reports Tab

DOB	>=
Drug Ingredients	<
First Name	<=
Gender	<>
Last Name	Contains
Middle Name	Begins
Pharmacy DEA	Ends
Pharmacy Status	
Phone Number	
Practitioner DEA	
Practitioner Status	
Product Name	
State	
Street	
Zip	

Date Filled From
Date Filled To

These reports are not as relevant
since they are based on number of
prescriptions.

ADDITIONAL REPORTS

Top X Practitioners By Therapeutic Class
Prescriptions by Zip Code by
Therapeutic Class
Prescriptions by County by Therapeutic
Class

AUDIT REPORT Login Audit Reports

You can search on any or multiples
of these data elements

Last Name
First Name
Login Name
From Date
To Date
IP Address

Login Status (dropdown selection)	All
	Valid Login
	Invalid Login
	Invalid Password
	Logout
	Password Expired
	Tutorial Required
	Tutorial Taken
	Unauthorized Login Attempt
	Session Already Exist

Reports Tab

		Locked	
		User License Expired	
		User Account	
		Expired	
		Supervisor Approval	
		Pending	
		Revoked	
Checkbox	Exact Match		
Click	Generate Report		
	Report Shows	Last Name	
		First Name	
		Login Name	
		Login Date/Time	
		Login Status	
		IP Address	
	Exportable Formats	XML	
		CSV	
		PDF	
		MHTML	
		Excel	
		TIFF	
		Word	
Exempt/Waiver Status Report	Notification Status (dropdown)	ALL	
		Exempt	
		Waiver	
	Exempt/Waiver Effective Date From		
	Exempt/Waiver Effective Date To		
	Pharmacy Name		
	Pharmacy DEA#		
Click	Generate Report		
		Pharmacy Name,	
		Pharmacy DEA,	
		Effective Date From,	
	Report Fields	Effective Date To	
	Exportable Formats	XML	
		CSV	
		PDF	
		MHTML	
		Excel	
		TIFF	
		Word	
PRACTITIONER DISPENSE REPORT	Practitioner Who Dispenses Reprot	Chose one	Dispenses Report
	Practitioner First Name		Delinquent Report

Reports Tab

Click	Practitioner Last Name Practitioner DEA View Report Report View		
EXTENDER AUDIT REPORT	Supervisor First Name Supervisor Last Name Supervisor Login Name Supervisor Email Supervisor Type (dropdown)	All Practitioner Pharmacist Investigator- Supervisor Resident/Fellow Advance Practice Nurse	
	Delegate Status (dropdown)	Physician Assistant Veterans Affairs Practitioner All Active Supervisor Review Pending Supervisor Denied Supervisor Initiated Revoke	
		Supervisor Location Inactivated Delegate Location Inactivated	
Click	Generate Report Report View	Supervisor Information	Name (LN, FN) User Type Login Work Location Total Number of Licensed Extenders Total Number of Non- Licensed Extenders
		Delegate Information Information User Type License Type Status	Name (LN, FN) Login User Type Status

Reports Tab

Update Date

Exportable Formats

XML
CSV
PDF
MHTML
Excel
TIFF
Word

CLINICAL NOTIFICATION REPORT

Clinical Notification Report

Notification Category (dropdown)

All
Morphine
Equivalents
Excessive Lookups
Multiple
Practitioners

Multiple Pharmacies

Notification Generated From
Notificaiton Generated To
Notificaiton Generated For
(dropdown)

All
Patient
Practitioner
Pharmacy

MANUAL OVERRIDE REPORT

Does the manual override stop when it goes past expiry date??

From Date

To Date

Report View

Username
Name (LN, FN)
Expiry Date
Manual Override
Reason

CLINICAL NOTIFICATION LETTER

Lookup Delinquent - Generate & Notify

From Date

To Date

This report is not working - need to check that it will work once Clinical Notifications are back on the dashboard.

Reports Tab

Lookup Delinquent Notified

From Date
To Date

This report is not working - need to check that it will work once Clinical Notifications are back on the dashboard.

Portal Maintenance Tab

PORTAL MESSAGES

Page	Short Description	Message	Allows you to Search or create a new message
Page	Short Description		
Admin File Upload	File Successfully Uploaded Message		
AdvancedSearch	NoSearchCriteriaSelected		
AdvancedSearch	Power Search Enabled		
Alert	Post To User Roles Message		
Alert	Rejected		
Alert	SelectRegionOrJobType		
Alert	Submitted		
Alert	Success		
All	Access Denied		
All	Access Denied Exception		
All	Background Complete		
All	Background Error		
All	Background InProgress		
All	Background Pending		
All	Background Submitted		
All	Can not map your account		
All	CompatibilityViewOn		
All	ContactUsLink		
All	ContactUsToolTip		
All	File not found		
All	Generic Exception Message		
	CRNA	No	Yes
	Medical Examiner	No	Yes
All	In Valid Request Exception		
All	InvalidDEA		
All	PharmacyDoesNotExist		
All	PopupStatusMessage		
All	PractitionerDoesNotExist		
Auto Response	Success Message		
Change Password	Auto Email Password		
Change Password	Auto Generated Password		
Change Password	Mail Successful Change Password		
Change Password	Success Message		
ChangePassword	CannotDecrypt		
ChangePassword	PasswordRequirement		
ClinicalNotification	Cover letter for Lookup Delinquent		
ClinicalNotification	Notify User For UnRead Clinical Notifications		
DeleteNDCCode	NDCCodeWithRx		
DeletePharmacy	PharmacyWithRx		
DeletePractitioner	PractitionerWithRx		
Delinquent Letter	Cover letter for Delinquent Pharmacies		
DrugThresholdReport	InvalidValueForQuantityField		
DrugThresholdReport	InvalidValueForRxField		
Email	Signature		
File Upload	DuplicateErrorMessage		
File Upload	File name is too long		
File Upload	File Successfully Uploaded Message		
FileUpload	ASAPTransactions Processed Successfully Notification		
FileUpload	DataUploadErrorReportCDIErrorMessage		
FileUpload	DeletesNotAllowed		
FileUpload	DuplicatePrescription		
FileUpload	Empty FTP Pharmacy DataFile Notification		
FileUpload	Empty FTP Pharmacy DataFile Notification to Uploader		
FileUpload	File Abnormally Terminated Notification		

FileUpload	File Processed Successfully Notification
FileUpload	File Rejected Notification
FileUpload	FTP File Abnormally Terminated Notification
FileUpload	FTP File Processed Successfully Notification
FileUpload	FTP File Rejected Notification
FileUpload	FTP Root Directory Does Not Exist Notification
FileUpload	General Database Exception
FileUpload	Invalid File Extension In Uploaded File Notification
FileUpload	Invalid File Extension In Uploaded File Notification to Uploader
FileUpload	Invalid Pharmacy User Trying To Upload Files Notification
FileUpload	InvalidCharactersInPharmacyDEANumber
FileUpload	InvalidCharactersInPrescriberDEANumber
FileUpload	InvalidDEA
FileUpload	InvalidPharmacyDEANumber
FileUpload	InvalidPrescriberDEANumber
FileUpload	More than one Patients Found For Previous Submissions Of Same Prescription
FileUpload	More than one Prescribers Found For Previous Submissions Of Same Prescription
FileUpload	MoreThanOneLicensesForPrescriber
FileUpload	Patient And Prescriber Details Not Matching with Previous Submissions Of Same Prescription
FileUpload	Patient Details Not Matching with Previous Submissions Of Same Prescription
FileUpload	PHA_CHAINSITEID_LENGTHEXCEEDED
FileUpload	PHA_CHAINSITEID_NOTUSED DATASET
FileUpload	PHA_CHAINSITEID_REGEXPRESSIONFAILED
FileUpload	PHA_CHAINSITEID_REQUIRED
FileUpload	PHA_CITY_LENGTHEXCEEDED
FileUpload	PHA_CITY_NOTUSED DATASET
FileUpload	PHA_CITY_REGEXPRESSIONFAILED
FileUpload	PHA_CITY_REQUIRED
FileUpload	PHA_DEANUM_LENGTHEXCEEDED
FileUpload	PHA_DEANUM_NOTUSED DATASET
FileUpload	PHA_DEANUM_REGEXPRESSIONFAILED
FileUpload	PHA_DEANUM_REQUIRED
FileUpload	PHA_MANAGERLASTNAME_LENGTHEXCEEDED
FileUpload	PHA_MANAGERLASTNAME_NOTUSED DATASET
FileUpload	PHA_MANAGERLASTNAME_REGEXPRESSIONFAILED
FileUpload	PHA_MANAGERLASTNAME_REQUIRED
FileUpload	PHA_NABPNUM_LENGTHEXCEEDED
FileUpload	PHA_NABPNUM_NOTUSED DATASET
FileUpload	PHA_NABPNUM_REGEXPRESSIONFAILED
FileUpload	PHA_NABPNUM_REQUIRED
FileUpload	PHA_NPINUM_LENGTHEXCEEDED
FileUpload	PHA_NPINUM_NOTUSED DATASET
FileUpload	PHA_NPINUM_REGEXPRESSIONFAILED
FileUpload	PHA_NPINUM_REQUIRED

FileUpload	PHA_PHAMACYNAME_LENGTHEXCEEDED
FileUpload	PHA_PHAMACYNAME_NOTUSED DATASET
FileUpload	PHA_PHAMACYNAME_REGEXPRESSIONFAILED
FileUpload	PHA_PHAMACYNAME_REQUIRED
FileUpload	PHA_PHONENUM_LENGTHEXCEEDED
FileUpload	PHA_PHONENUM_NOTUSED DATASET
FileUpload	PHA_PHONENUM_REGEXPRESSIONFAILED
FileUpload	PHA_PHONENUM_REQUIRED
FileUpload	PHA_STATE_LENGTHEXCEEDED
FileUpload	PHA_STATE_NOTUSED DATASET
FileUpload	PHA_STATE_REGEXPRESSIONFAILED
FileUpload	PHA_STATE_REQUIRED
FileUpload	PHA_STREET_LENGTHEXCEEDED
FileUpload	PHA_STREET_NOTUSED DATASET
FileUpload	PHA_STREET_REGEXPRESSIONFAILED
FileUpload	PHA_STREET_REQUIRED
FileUpload	PHA_STREET2_LENGTHEXCEEDED
FileUpload	PHA_STREET2_NOTUSED DATASET
FileUpload	PHA_STREET2_REGEXPRESSIONFAILED
FileUpload	PHA_STREET2_REQUIRED
FileUpload	PHA_ZIP_LENGTHEXCEEDED
FileUpload	PHA_ZIP_NOTUSED DATASET
FileUpload	PHA_ZIP_REGEXPRESSIONFAILED
FileUpload	PHA_ZIP_REQUIRED
FileUpload	Pharmacy Directory Does Not Exist Notification
FileUpload	Pharmacy Does Not Have FTP Upload Permission Notification
FileUpload	Prescriber Details Not Matching with Previous Submissions Of Same Prescription
FileUpload	PrescriptionDoesNotExist
FileUpload	Prescriptions Available for Revalidation
FileUpload	Rx Marked as Cancel but does not exist in system
FileUpload	Rx Marked as Purged but does not exist in system
FileUpload	Rx Marked as Void but does not exist in system
FileUpload	RxDateFilledRequired
FileUpload	RxDaysSupplyRequired
FileUpload	RxNumberRequired
FileUpload	RxProductIDQualifierRequired
FileUpload	RxProductIDRequired
FileUpload	RxQuantityDispensedRequired
FileUpload	RxRefillNumberRequired
FileUpload	Undo Upload Data File Notification
FileUpload	Unknown NDCCode
FileUpload	Unknown Pharmacy
FileUpload	Unknown Practitioner
FileUpload	UpdatesNotAllowed
ForgotUsername	EmailDoesNotMatch
ForgotUsername	EmailGeneralInformation
ForgotUsername	EmailMatchesMoreThanOneUsername
ForgotUsername	IncorrectAnswers
ForgotUsername	Mail Successful Forgot Username
ForgotUsername	NameDOBDoesNotMatch
ForgotUsername	NoRegisteredEmail
ForgotUsername	NoSecurityQuestion
ForgotUsername	ResetAttemptsExceeded
ForgotUsername	SuccessMessage

Portal Maintenance Tab

ForgotUsername	UserDeleted
InvestigationManagement	SuccessfullySaved
Job	CantDeleteJobAsDependencyExists
JobType	Added
JobType	AlreadyExists
JobType	CannotAddBlank
JobType	CannotDelete
JobType	DeleteJob
JobType	Dependency
JobType	Saved
Login	DelegateAccessNotAllowed
Login	DelegateInactivated
Login	DelegatesApprovalPendingPopupText
Login	DelegatesReactivationPendingPopupText
Login	DOB Required
Login	Important Notice
Login	InActiveSupervisor
Login	IncompleteSupervisorData
Login	IncompleteUserData
Login	Invalid LastName and Date of Birth (DOB)
Login	InvalidDEA
Login	InvalidDriverLicense
Login	InvalidLicenseDetails
Login	InvalidLogin
Login	InvalidSupervisorLicense
Login	Lastname required
Login	Locked
Login	login or Iname and dob req
Login	LoginHeader
Login	LoginValidationPopupTitle
Login	LostPassword
Login	MoreThanOneResultsFound
Login	MoreThanOneResultsFoundForLNAAndDOB
Login	NewUserMessage
Login	NoActiveSupervisorLocationFoundPopupText
Login	NoResultsFound
Login	PortalLocked
Login	RegistrationQuestions
Login	Revoked
Login	SupervisorApprovalPending
Login	TextForgotPassword
Login	TextForgotUsername
Login	UserAccountExpired
Login	UserAuthenticationFailed
Login	UserLicenseExpired
Login	UserProfileMissingDetailsPopupText
Login	UserProfileMissingDetailsPopupTitle
Login	UserSessionAlreadyExists
Login	WSLoginDenyMessage
Manual Entry	Authorization
Manual Entry	DateFilledEarlierThanAllowedThreshold
Manual Entry	DateRxWrittenEarlierThanAllowedThreshold
Manual Entry	EnterValidDEA
Manual Entry	InternalException
Manual Entry	No Discrepancy Error Found
Manual Entry	Patient City not populated based on address
Manual Entry	PatientDOBEarlierThanAllowedThreshold
Manual Entry	PatientDOBInvalid

Portal Maintenance Tab

Manual Entry	Prescription Date Filled Invalid
Manual Entry	Prescription Date Rx Written Invalid
Manual Entry	PrescriptionDeleted
ManualEntry	CannotSaveAsDeleteSelected
ManualEntry	ConfirmSave
ManualEntry	MoreThanOnePharmacyMatches
ManualEntry	MoreThanOneRxFound
ManualEntry	PharmacyMismatch
ManualEntry	PractitionerMismatch
ManualEntry	PrescriptionDoesNotExist
ManualEntry	RxRemovedSuccessfully
ManualEntry	SuccessfullySaved
ManualEntry	Unknown NDCCode
ManualEntry	Unknown Pharmacy
ManualEntry	Unknown Practitioner
My Account	Delegate Approved For Location Successfully
My Account	Delegate Approved Successfully
My Account	Delegate Revoked From Location Successfully
My Account	Delegate Revoked Successfully
My Account	Mail Successful Save
My Account	MaxAllowedDelegatesReached
My Account	MaxAllowedNonLicensedDelegatesReached
My Account	No Active Supervisors For Location
My Account	Success Message
My Account	SupervisorLocationResubmittedForApproval
MyAccount	Notice
MyAccount	SupervisorRelationshipsSaveNote
Notification	EmailBatchFailure
Notification	EmailBatchSuccess
Password Reset	Success Message
PasswordReset	FirstTimeLogin
PasswordReset	IncorrectAnswers
PasswordReset	NoSecQues
PasswordReset	NoSecQuesAndPwdExpired
PasswordReset	NotValidSecurityQuestions
PasswordReset	PasswordExpired
PasswordReset	PwdCannotBeSameAsPrevious
PasswordReset	ResetAttemptsExceeded
Pharmacy Detail	Duplicate License
Pharmacy Detail	Enter License
Pharmacy Detail	Success Message
Pharmacy Diskette File Upload	File Successfully Uploaded Message
Pharmacy Diskette File Upload	No Matching User Profile Found
Pharmacy Self-LookUp	Pharmacy
Pharmacy Self-LookUp	RxFilledDateRangeExceedingAYear
PharmacyDetail	SameLicenses
PharmacyMaintenance	EnterDEA
PharmacyMaintenance	EnterExemptionPeriod
PharmacyMaintenance	EnterNABP
PharmacyMaintenance	EnterNPI
PharmacyMaintenance	EnterProfLicNo
PharmacyMaintenance	EnterWaiverPeriod
PharmacySelfLookup	Acknowledgement
PharmacyZeroReport	DefaultPharmacyNotSet
PharmacyZeroReport	InvalidDateRange
PharmacyZeroReport	InvalidReportDateFrom
PharmacyZeroReport	InvalidReportDateTo
PharmacyZeroReport	LicenseNumberCannotBeEmpty
PharmacyZeroReport	LicenseNumberRequired
PharmacyZeroReport	NoAccessToOtherPharmacies
PharmacyZeroReport	NotValidLicenseNumber
PharmacyZeroReport	NotValidPharmacy

Portal Maintenance Tab

PharmacyZeroReport	ReportAlreadySubmitted
PharmacyZeroReport	ReportDateFromEmptyMessage
PharmacyZeroReport	ReportDateToEmptyMessage
PharmacyZeroReport	SelectAtleastOneCriteria
PharmacyZeroReport	SuccessMessage
PlaceholderTest	PlaceholderTest
PMP Registration Report	Instructions
PMPUser	DelegateUserLicenseAlreadyExists
PMPUser	PractitionerLicenseExists
PMPUser	UserLicenseAlreadyExists
Portal Message	Delete Message
Portal Message	NoRecipients
PortalBroadcast	Successful Delete Message
PortalBroadcast	Successful Save Message
PortalExceptionMessage	MessageSent
PortalFAQ	Delete
PortalFAQ	Save
PortalMessage	CreateDateFromInvalid
PortalMessage	CreateDateToInvalid
PortalMessage	DeletedSuccessfully
PortalMessage	MessageSent
PortalMessage	NotifiedFromDateInvalid
PortalMessage	NotifiedToDateInvalid
PortalMessage	SelectAtleastOneMessage
PortalMessage	UserIdentificationMessage
PortalSetting	CacheItem Reloaded
PortalSetting	PortalLocked
PortalSetting	PortalUnlocked
PortalSetting	SelectCacheItemToReload
PortalSetting	SelectImage
PortalSetting	SelectUser
PortalSetting	UsersDisconnected
PortalSystemMessage	AlreadyExists
PortalSystemMessage	MessageSaved
Practitioner Detail	Duplicate License
Practitioner Detail	Enter License
Practitioner Detail	Success Message
Practitioner Self-LookUp	Practitioner
Practitioner Self-LookUp	PractitionerSelfLookupDateRangeInDays
Practitioner Self-LookUp	PractitionerSelfLookupDateRangeInDaysRequired
Practitioner Self-LookUp	RxWrittenDateRangeExceedingAYear
PractitionerMaintenance	EnterDEA
PractitionerMaintenance	EnterNABP
PractitionerMaintenance	EnterNPI
PractitionerMaintenance	EnterProfLicNo
PractitionerMaintenance	SameLicenses
PractitionerSelfLookup	Acknowledgement
PractitionerVsPeers	DEANumInCompleteProfile
PractitionerVsPeers	DEANumNoProfile
PractitionerVsPeers	InCompleteProfile
PractitionerVsPeers	NotAPractitioner
Prescription	SerialNoAndERefNotSuppliedForElectronicRx
Prescription	SerialNoInvalid
Prescription	SerialNoNotSuppliedForNonElectronicRx
PrescriptionMaintenance	NotAssociatedToPharmacy
PrescriptionMaintenance	PrescriptionDeleted
PrescriptionReport	Disclaimer
PrescriptionReport	Notice
PrescriptionReport	Record Restricted Access Denied
PrescriptionReport	ReportFooter
PrescriptionReport	ReportHeader
Prescriptions By Pharmacy	License Number

PrescriptionsByZipCodeByTherapeuticClass	XDigitCategoryMissing
PSEManualEntry	Duplicate PSE
PSEManualEntry	SuccesfullyAdded
RealTimeUpload	UserAuthenticationFailed
RealTimeUpload	UserNotAuthorized
Registration	Account Approved By Supervisor
Registration	Account Revoked By Supervisor
Registration	Add Supervisor For APN And PA Failed
Registration	AlreadyRegistered
Registration	AutoApprove User Verification Failed
Registration	AutoDenyRegistration
Registration	CoverLetter
Registration	CoverLetterInstruction
Registration	Delegate Added Under Supervisor Location
Registration	Delegate Approved By Supervisor For Location
Registration	Delegate Pending Supervisor Location Approval For LicenseType Update
Registration	Delegate Registered Under Supervisor Locations
Registration	Delegate Registration Approved
Registration	Delegate Removed From Supervisor Location
Registration	Delegate Revoked By Supervisor From Location
Registration	DelegateRegistrationLicenseDuplicate
Registration	DenialEmail
Registration	DenialReasonRequired
Registration	Disclaimer
Registration	Duplicate Pharmacy DEANumber
Registration	DuplicateLicense
Registration	DuplicateUserNamewithPharmacyLocations
Registration	GeneralError
Registration	GeneralInformation
Registration	IncompleteSupervisorData
Registration	InvalidDEA
Registration	InvalidDEANumber
Registration	InvalidDriverLicense
Registration	InvalidLicenseDetails
Registration	InvalidSupervisorLicense
Registration	LetterAttachment
Registration	LetterSent
Registration	LicenseDuplicate
Registration	LicenseNumberRequiredWhileAddingSupervisor
Registration	LicenseTypeRequiredWhileAddingSupervisor
Registration	Login Details
Registration	MaxNoOfDelegates
Registration	MissingLocationDetails
Registration	NotAPilotUser
Registration	NotValidPharmacy
Registration	NotValidPractitioner
Registration	OnlyOneSupervisorAllowedForDelegates
Registration	OutOfStateBoardLicenseNotAllowed
Registration	OutOfStateRegistrationNotAllowed
Registration	PharmacistApprovedForLocation
Registration	PharmacistApprovedForLocation1
Registration	PharmacistDeniedForLocation
Registration	PharmacistDeniedForLocation1
Registration	ProfessionalLicenseNumberFieldToolTip

Portal Maintenance Tab

Registration	Registration Approved
Registration	Registration Created
Registration	Registration Denied
Registration	Registration is Already Approved
Registration	Registration is Already Denied
Registration	Registration Submitted By Delegate
Registration	RegistrationConfirmationText
Registration	RegistrationConfirmationTitle
Registration	RegistrationLicenseDuplicate
Registration	ReqOrganization
Registration	ReqPharmacyID
Registration	ReqPractitionerID
Registration	SelectAtleastOneLocationForApprovalForPharmacist
Registration	SelectJob
Registration	SupervisorDuplicateLocation
Registration	SupervisorNote
Registration	SupervisorRequiredForDelegateRegistration
Registration	Thank You Email
Registration	Thank You Message
Registration	The Verification Code was not entered properly. Please try again.
Registration	UnderReview
Registration	You must enter verification code.
Registration Report	Authorization
Registration Report	Instructions
Registration Report	Notary
Registraion	SelectAtleastOneLocationForApprovalForPharmacist
ReplaceSupervisor	CannotAssignDelegate
ReplaceSupervisor	MaxAllowedDelegatesReached
ReplaceSupervisor	SuccessfullyReplaced
Report	First Name Required
Report	Last Name Required
Request	Admin AuthorizationText
Request	AliasLabel
Request	AutoProcessFailed
Request	AutoProcessNoPatientsSelected
Request	AutoResponseExceedingThreshold
Request	Easy Request - File Upload Message
Request	Expire
Request	File Processed Successfully Notification
Request	InvalidPatientDateDiff
Request	InvalidPractitionerDateDiff
Request	Law-Enforcement AuthorizationText
Request	Manage AutoFill List - Re-Activate Records For AutoFill List
Request	Manage AutoFill List - Remove From AutoFill List
Request	MoreThanOnePractitionersFound
Request	NoPowerSearch
Request	NoResultsFound
Request	NotValidFromDate
Request	NotValidPharmacy
Request	NotValidPractitioner
Request	NotValidToDate
Request	Other AuthorizationText
Request	PatientDOBExceedingThreshold
Request	Pharmacy AuthorizationText
Request	Practitioner Disciplinary Action
Request	Practitioner AuthorizationText
Request	PractitionerDoesNotExist
Request	PractitionerNotFound
Request	Process Request

Portal Maintenance Tab

Request	Process Request Email
Request	Request Approved By Manager
Request	Request Approved By Manager Email
Request	Request Denied By Manager
Request	Request Denied By Manager Email
Request	Request Revoke
Request	Request Submitted to Admin
Request	Request Submitted to Admin Email
Request	Request Submitted to Manager
Request	Request Submitted to Manager Email
Request	RequestProcessedAutomatically
Request	RequestProcessedAutomaticallyWithNeares tResults
Request	RequestProcessedAutomaticallyWithoutPow erSearch
Request	RequestProcessedAutomaticallyWithoutPo werSearch
Request	Response Added to Request Email
Request	Response From InterState
Request	Response From InterState - No Results Found
Request	Response From InterState - Results Exceeding Threshold
Request	SelectAtleastOnePatient
Request	SelectPatientMessage
Request	Timeout
Request	User Led Unsolicited Request Email
Request Submit	Not Authorized To Submit
Request View	Not Authorized To View
RequestReportDisclaimer	ChildBearingWarningText
RequestReportDisclaimer	ReportHeaderDisclaimer
RequestSummaryReport	RequestorRequired
Reset Password	Security Questions Not Set
Reset Password	User does test
Resolve DrugCode	BlankDrugNumber
Resolve DrugCode	BlankOrigDrugNumber
Resolve DrugCode	NewDrugCodeRequired
Resolve DrugCode	NewDrugNumberDoesNotExist
Resolve DrugCode	NewDrugNumberRequired
Resolve DrugCode	NoRowsSelected
Resolve DrugCode	OrigDrugCodeRequired
Resolve DrugCode	OrigDrugNumberDoesNotExist
Resolve DrugCode	OrigDrugNumberRequired
Resolve DrugCode	ProductCodeOrNumberRequiredForSearch
Resolve DrugCode	UpdateSuccessful
Resolve Pharmacy	BlankLicenseNumber
Resolve Pharmacy	BlankOrigLicenseNumber
Resolve Pharmacy	LicenseDoesNotExist
Resolve Pharmacy	NewPharmacyDoesNotExist
Resolve Pharmacy	NoRowsSelected
Resolve Pharmacy	OriginalPharmacyDoesNotExist
Resolve Pharmacy	PharmacyDoesNotExist
Resolve Pharmacy	UpdateSuccessful
Resolve Practitioner	BlankLicenseNumber
Resolve Practitioner	BlankOrigLicenseNumber
Resolve Practitioner	LicenseDoesNotExist
Resolve Practitioner	NewPractitionerDoesNotExist
Resolve Practitioner	NoRowsSelected
Resolve Practitioner	OriginalPractitionerDoesNotExist
Resolve Practitioner	PharmacyDoesNotExist
Resolve Practitioner	UpdateSuccessful
Security Profile	Success Message
Security Profile Details	Confirmation Button
Security Profile Details	Conflict In Security Profile For Relax Supervisor Selection

Portal Maintenance Tab

Security Profile Details	Conflict In Security Profile For Require Supervision
Security Profile Details	Remove User Confirmation
Security Profile Details	Successful deletion
Security Questions	Mail Success Message
Security Questions	Success Message
TestRunUpload	InvalidFileFormat
ThresholdSearch	SaveForUnsolicitedRequest
ThresholdSearch	SelectRecord
TopXPractitionerByTherapeuticClass	InvalidValueForTopXField
TopXPractitionerByTherapeuticClass	TherapeuticClassCodeMissing
TopXPractitionerByTherapeuticClass	TopXValueMissing
TopXReport	RegExceedingPrescriptions
TopXReport	RegTopXPatients
TopXReport	RegTopXPractitioner
TopXReport	ReqExceedingPrescriptions
TopXReport	RegNDCCode
TopXReport	RegTopXPatients
TopXReport	ReqTopXPractitioner
Tutorial	TutorialCompletionCertificate
UnsolicitedRequest	DeleteUnsolicitedRequest
UnsolicitedRequest	EmailNotice
UnsolicitedRequest	PharmacyCoverLetter
UnsolicitedRequest	PractitionerCoverLetter
UnsolicitedRequest	SelectAtleastOnePracOrPharmacy
UnsolicitedRequest	UnregisteredPhaPreSelected
UnsolicitedRequest	UnsolicitedRequestSent
User	LicenseExists
User Details	Delegate License Type Changed
User Details	Duplicate License
User Details	Expire Password
User Details	InternalException
User Details	Locked Account
User Details	Successful Add Message
User Details	Successful Save Message
User Details	Unlocked Account
User Maintenance	New User Account
User Maintenance	Success Save Email
User Maintenance	User Account Updates
UserDetails	CannotChangeJob
UserDetails	DeletedUser
UserDetails	UndeletedUser
UserDetails	UserAlreadyExists
UserDetails	UserIsDeleted

**Portal Maintenance Tab
Portal Settings**

Portal Settings
 Portal Logo - function to upload an image
 Portal Configuration

Option to edit or delete
 At end of page you can add new

Name	Value		
MaxLoginAttempts	10	Edit	Delete
MessageCenterCapacity	100	Edit	Delete
NumberPasswordsStored	1	Edit	Delete
PasswordExpireDays	360	Edit	Delete
SessionTimeoutMinutes	20	Edit	Delete
RequestsExpireInDays	3	Edit	Delete
AlertsExpireInDays	30	Edit	Delete
RequireVerifyOfOffenseDrugEtc	TRUE	Edit	Delete
RequireAuthOfPatientRequest	TRUE	Edit	Delete
RequireAuthOfPractitionerRequest	TRUE	Edit	Delete
ArchiveDatabasePath	PMPArchive.PMP_Repository_Archive.dbo	Edit	Delete
ArchivePrescriptionBefore (In Years)	5	Edit	Delete
RegistrationInstructions	Your registration has been submitted to the administrator for verification of your access. You will receive an e-mail with your user name and password once approved.	Edit	Delete
DefaultState	Tennessee	Edit	Delete
FTPRootFolderPath	\\odc-cls1-web-09\DataFiles\UploadedFiles\FTPFiles\	Edit	Delete
AutoResponseRecordThreshold	9999	Edit	Delete
AutoResponsePageThreshold	10	Edit	Delete
TestRunPurgeInterval	30	Edit	Delete
AgencyName	BOARD OF PHARMACY - DEPARTMENT OF HEALTH	Edit	Delete
PatientDOBRange	100	Edit	Delete
PractitionerDOBRange	3	Edit	Delete
AutoCreateRegistrationUsernamePassword	TRUE	Edit	Delete
AutoRegister	TRUE	Edit	Delete
AutoSuggestLoginPassword	TRUE	Edit	Delete
Portal	CSMD	Edit	Delete
NotificationInterval	1260000	Edit	Delete
PHADEANum	TRUE	Edit	Delete
PHANPINum	TRUE	Edit	Delete
PHANABPNum	TRUE	Edit	Delete
PRADEANum	TRUE	Edit	Delete
PRANPINum	TRUE	Edit	Delete
PRASStateLicNum	TRUE	Edit	Delete
HomePageRefreshInterval	50000	Edit	Delete
HomePageTopNRecords	4	Edit	Delete
ReportHeader	TENNESSEE CONTROLLED SUBSTANCE MONITORING PROGRAM: BOARD OF PHARMACY - DEPARTMENT OF HEALTH	Edit	Delete
FaxNum	(615) 253-8782	Edit	Delete
PhoneNum	(615) 253-1305	Edit	Delete
Address	665 MAINSTREAM DRIVE NASHVILLE, TENNESSEE 37243	Edit	Delete
Email	CSMD.admin@tn.gov	Edit	Delete
AdminJobIDs	113	Edit	Delete
RequestFooter	The Board of Pharmacy does not warrant the above information to be accurate or complete. The Report is based on the search criteria entered and the data entered by the dispensing pharmacy. For more information about any prescription, please contact the dispensing pharmacy or the prescriber	Edit	Delete
CPDNDCNum	9999999	Edit	Delete
AllowLockedLogin	0,157952	Edit	Delete
PMPAdministrator	Tennessee	Edit	Delete
PatientDateRangeInMonths	90	Edit	Delete
PractitionerDateRangeInMonths	90	Edit	Delete
PortalType	PMP	Edit	Delete
ShowReportSectionInHomePage	TRUE	Edit	Delete
CanChangePrescriptions	TRUE	Edit	Delete
CanDeletePrescriptions	TRUE	Edit	Delete
SelectAliasCheckboxByDefault	TRUE	Edit	Delete
AlertExpirationInDays	30	Edit	Delete
AlertDefaultJobType	Practitioner	Edit	Delete
Harold Rogers Report Dispensers JobTypeIDs	3	Edit	Delete
Harold Rogers Report Investigator JobTypeIDs	1,6	Edit	Delete
Harold Rogers Report Prescribers JobTypeIDs	4	Edit	Delete

**Portal Maintenance Tab
Portal Settings**

PMIXRequestorRole	OtherLawEnforcement	Edit	Delete
PMIXPatientDrugUtilizationReportRequest	TNInterStatePatientDrugUtilizationReportRequest	Edit	Delete
DisplaySSN	FALSE	Edit	Delete
AllowedImageTypes	.jpg,.png,.gif,.tif,.jpeg,.pbm,.psp,.ico,.bmp	Edit	Delete
SQLServerAgentJobName	TNProcessSavedQuery	Edit	Delete
FileUploadFaultTolerancePercentage	50	Edit	Delete
AllowedASAPFormat	2009	Edit	Delete
FileUploadPath	\\odc-cls1-web-09\DataFiles\UploadedFiles\	Edit	Delete
FileArchivalPath	\\odc-cls1-web-09\DataFiles\ArchivedFiles\	Edit	Delete
RegistrationReportName	TNRegistrationForms	Edit	Delete
ShowJobLicNoForRegistration	TRUE	Edit	Delete
RequiresSSN	TRUE	Edit	Delete
PatientDrugUtilizationReportName	TNPatientDrugUtilizationReportRequest	Edit	Delete
ShowRelatedAlerts	TRUE	Edit	Delete
PrescriberRxHistoryReport	TNPrescriberRxHistoryReport	Edit	Delete
DisplayNASPERStatus	TRUE	Edit	Delete
PractitionerDrugUtilizationReportName	TNPractitionerDrugUtilizationReportRequest	Edit	Delete
PHAPrimaryLicNum	DEANum	Edit	Delete
FTPRootArchivalFolderPath	\\odc-cls1-web-09\DataFiles\ArchivedFiles\FTPArchival\	Edit	Delete
UserLedUnsolicitedRequestPharmacyThreshold	0	Edit	Delete
UserLedUnsolicitedRequestPractitionerThreshold	0	Edit	Delete
PurgeTestRunDataFileInDays	90	Edit	Delete
PurgePortalExceptionMessageInDays	1	Edit	Delete
DefaultManualEntryFormat	2009	Edit	Delete
PMIXErrorReportName	Error.txt	Edit	Delete
MultipleLicenseNoLabel	DEA #	Edit	Delete
MultipleLicenseType	DEANum	Edit	Delete
PRAPrimaryLicNum	DEANum	Edit	Delete
ValidateOrganizationLicenseOnRegistration	TRUE	Edit	Delete
DelinquentPharmacyReportName	TNDelinquentReport	Edit	Delete
FTPRootFolderPathForMiscUploads	\\odc-cls1-web-09\DataFiles\UploadedFiles\MISCDEAUplod\	Edit	Delete
FTPRootArchivalPathForMiscUploads	\\odc-cls1-web-09\DataFiles\ArchivedFiles\MISCDEAUplod\	Edit	Delete
AllowDuplicateRegistration	FALSE	Edit	Delete
FileUploadPatientDOBThresholdRange	0	Edit	Delete
FileUploadDateRxWrittenDateFilleddRange	0	Edit	Delete
FileUploadDateWrittenThresholdInMonths	0	Edit	Delete
FileUploadDateFilledThresholdInMonths	0	Edit	Delete
FileUploadAcceptOnlyKnownPharmacies	FALSE	Edit	Delete
ValidateTriplicateSerial	FALSE	Edit	Delete
UnsolicitedRequestCoverLetter	TNCoverLetter	Edit	Delete
SendAlertEmailsOnPost	FALSE	Edit	Delete
PrescriptionRevalidationEnabled	FALSE	Edit	Delete
ManualEntryASAP1995ValidateCity	FALSE	Edit	Delete
PopulatePatientCountyInFileUpload	FALSE	Edit	Delete
ValidateRxDetailsOnRefills	FALSE	Edit	Delete
ShowProgramGuideSectionInHomePage	TRUE	Edit	Delete
ProfessionCode_Practitioner	1108	Edit	Delete
ProfessionCode_Pharmacist	9901	Edit	Delete
RxByPatientCountyReportName	TNPrescriptionsByPatientCounty	Edit	Delete
ShowPatientListBeforeAutoProcessingRequest	TRUE	Edit	Delete
PractitionerSelfLookupReportName	TNPractitionerSelfLookup	Edit	Delete
PopulatePractitionerCountyInFileUpload	TRUE	Edit	Delete
PopulatePharmacyCountyInFileUpload	TRUE	Edit	Delete
ValidateDEANumberOnRegistration	FALSE	Edit	Delete
CustomPMP	TNCSMD	Edit	Delete
PrescriptionMarijuanaDontProcessCustomerID	TRUE	Edit	Delete

**Portal Maintenance Tab
Portal Settings**

TNDLValidStatuses	CAN:Cancelled RR:Revoked/Restricted RTR:Revoked/Temp Restrict RHO:Revoked/Habitual Offender REV:Revoked SR:Suspended/Restricted STR:Suspended/Temp Restrict SUS:Suspended TRE:Temp Restricted ELG:Eligible Reissue w/Interlock ELG:Eligible for Reissue VAL:Valid With Interlock VAL:Valid EXP:Expired NON:None NOT:Not Eligible ELG:Eligible LIC:Licensed	Edit	Delete
TNDLInvalidStatuses	DEC:Deceased DEN:Denied ELG:Eligible in Another State MOV:Licensed in Another State RPD:Reported Deceased	Edit	Delete
TNDelegateLoginCutOffDays	360	Edit	Delete
FileUploadAcceptOnlyKnownPractitioners	FALSE	Edit	Delete
FileUploadAcceptOnlyKnownNDCCodes	FALSE	Edit	Delete
FileUploadReProcessUnknowns	FALSE	Edit	Delete
DataFileReProcessJobName	DataFileReProcessJob	Edit	Delete
Harold Rogers Report By Therapeutic Class	TRUE	Edit	Delete
FileUploadPrintErrorReportShowOnlyErrors	FALSE	Edit	Delete
FileUploadDetailsShowDownLoadErrorReportLink	FALSE	Edit	Delete
PatientSearchArchived_DateRange	01/01/2007 - 12/31/2009	Edit	Delete
ShowCustomRegistrationForm	FALSE	Edit	Delete
NotifyUserForProfileUpdate	FALSE	Edit	Delete
ShowDoNotExpirePasswordOption	FALSE	Edit	Delete
IncludeInterStateResponseInShowPatientList	TRUE	Edit	Delete
RequestLogExceptionInRequestException	TRUE	Edit	Delete
DefaultStateAbbreviation	TN	Edit	Delete
LogCacheErrors	TRUE	Edit	Delete
IncludeUserIdentificationInPortalMessage	TRUE	Edit	Delete
ShowPharmacyReportingStatus	TRUE	Edit	Delete
MenuItemsToBeShownHorizontalJobID	109,110	Edit	Delete
SkipDelegateReactivationThresholdForLastOneYear	2	Edit	Delete
ShowBypassLicenseValidationOnLoginOption	TRUE	Edit	Delete
PractitionerSelfLookupDateRangeInDays	0	Edit	Delete
AlertShowPostToUserRolesMessage	TRUE	Edit	Delete
ShowForgotUsernameLinkOnLoginPage	TRUE	Edit	Delete
ShowCommonAuthorizationScreen	TRUE	Edit	Delete
ExcessiveLookupThreshold	150	Edit	Delete
ExcessiveLookupClinicalNotificationPeriod	2	Edit	Delete
MultiplePractitionersClinicalNotificationPeriod	90	Edit	Delete
MultiplePharmaciesClinicalNotificationPeriod	90	Edit	Delete
MorphineEquivalentsThresholdForRed	120	Edit	Delete
MorphineEquivalentsThresholdForYellow	90	Edit	Delete
MultiplePractitionersThresholdForRed	5	Edit	Delete
MultiplePractitionersThresholdForYellow	4	Edit	Delete
MultiplePharmaciesThresholdForRed	5	Edit	Delete
MultiplePharmaciesThresholdForYellow	4	Edit	Delete
ShowClinicalNotificationSectionInHomePage	TRUE	Edit	Delete
ClinicalNotificationExpirationInDays	7	Edit	Delete
MorphineEquivalentsClinicalNotificationPeriod	180	Edit	Delete
ShowChildBearingWarningOnReport	TRUE	Edit	Delete
ClinicalNotificationReminderPeriod	7	Edit	Delete
SupervisorApprovalRequiredForDelegates	TRUE	Edit	Delete
ASAP1995CompoundValue	2	Edit	Delete
ASAP1995NonCompoundValue	1	Edit	Delete
AllowedReportExportFormats	PDF,EXCEL	Edit	Delete
DisableRequiredSupervisorValidationForAPNAndPA	FALSE	Edit	Delete
PractitionerTypeJobIDs	4,106,107,111,112,110	Edit	Delete
PharmacyTypeJobIDs	46,108	Edit	Delete
LawEnforcementTypeJobIDs	86,87,88	Edit	Delete

Portal Maintenance Tab
Portal Settings

APNJobIDs	111	Edit	Delete
PAJobIDs	112	Edit	Delete
ResidentJobIDs	106,115	Edit	Delete
HCEPractitionerJobIDs	107	Edit	Delete
HCEPharmacistJobIDs	108	Edit	Delete
SupervisorApprovalExceptionJobIDs	86	Edit	Delete
PMPiVersion	4	Edit	Delete
Name Required.	Value Required.	Add New	

Portal Settings
Portal Maintenance

Portal Maintenance

Active Session

User Name

You can select and Disconnet one or all users

Agency Name

Logged In

Last Active

Last Page

Portal Status

Ability to "Lock" the portal with one click

Fiscal Review Committee Redaction Cover Sheet

Contract Number: RFS 318.65-00450 TennCare (Aon Consulting, Inc. - amd 1)

 X No redactions required
 Redactions applied

Contractor/Service Provider Identity *(this includes addresses, phone numbers, service provider contact or officer information, and other information that could be used to identify the contractor or service provider)*

 Federal Employee Identification Number (FEIN)
 Contractor/Vendor Name

Purpose for Contractor/Vendor Name Redaction (if applicable)

Technology Details *(this includes database, operating system, development code, and any other information that would identify an area of weakness or an attack vector)*

 Product Name
 Associated Technology
 Other

Other Description: _____