IOWA PMP WEB CENTER ACCEPTABLE USE POLICY
Prescriber and Pharmacist (Practitioner)

The Iowa Prescription Monitoring Program (PMP) is designed to provide patient specific prescription data to individuals authorized by Iowa Code (IC) section 124.553(1)(a) and 657 Iowa Administrative Code (IAC) Chapter 37.

A prescriber or pharmacist is authorized to request a Patient Rx History Report on an individual **only if**:

a. The request is for the purpose of providing medical treatment or pharmaceutical services and
b. The prescriber or pharmacist has a current practitioner-patient relationship, or is initiating a practitioner-patient relationship, with the individual named in the request.

By using the Iowa PMP Web Center, I agree to the following terms:

1. I will not share my User Name and Password with anyone else. I understand that these credentials have been authorized for me personally, not for my office, my pharmacy, or my employer.
2. I will only request a PMP Report on a person who is currently my patient or a person who is seeking medical treatment or pharmaceutical services as a new patient. A patient includes a person who has made an appointment for an initial office visit, a person who has been referred to my medical practice, or a patient who has presented or requested that a prescription be filled. I will not request a PMP Report on a member of my staff, prospective staff, or anyone else who does not have a chart, medical record, or patient profile in my office or pharmacy. I understand that I do not have a healthcare relationship with a person who is deceased unless I am the coroner.
3. I will only use this Protected Health Information to practice medicine or pharmacy. This information may be one factor in my assessment of the patient but will not be the only factor. I may contact other health care providers listed on the PMP Report to discuss information contained in the PMP Report concerning our mutual patient.
4. The information in the PMP Report is Protected Health Information and is NOT a public record. I will not disclose the PMP Report or provide a copy of the PMP Report to anyone except other practitioners who are using the same patient chart, medical record, or patient profile.
5. I will not provide a copy of the PMP Report to anyone else, even if the person could have requested his or her own PMP Report or is not registered with the Iowa PMP Web Center. This includes the patient. If another person wishes to have a copy of the PMP Report, that person must request his or her own PMP Report through the Iowa PMP Web Center or by contacting an Iowa PMP administrator for assistance. I may provide the Iowa PMP telephone number (515-281-5944) or website (www.iowa.gov/ibpe/pmp.html).
6. I will not use an Iowa PMP Report for pre-employment screening, to investigate a drug loss, or any other nontreatment purpose.
7. I will not use anyone else's User Name and Password to access the Iowa PMP Web Center.
8. I may authorize no more than three (3) health care professionals, as defined in 657 IAC 37.2(124), to request PMP Reports on my behalf if I employ or directly supervise those persons and the persons are registered with the Iowa PMP Web Center as my agents. I understand that each delegate will receive his or her own User Name and Password. For security reasons, I will not allow anyone else to use my practitioner's User Name and Password. I am responsible for every PMP Report requested using my credentials or my practitioner's agent's credentials. As a practitioner, I may view all PMP Reports requested by any of my agents.
9. When I need to terminate an agent's authority to obtain a PMP Report on my behalf, I will notify the Iowa PMP administrator.
10. I will comply with all provisions of this Iowa PMP Web Center Acceptable Use Policy.