

Vol. 5 No. 2

CME Track 3 jointly provided by PDMP Foundation & FMA
Treating Pain and Managing Patients with Substance Use Disorders
July 27, 2025 - 9am-12:30pm

**Pain Management: Prescribing
Pearls for Clinicians**

**Evidence-Based Practices
for Individuals with
Substance Use Disorders**

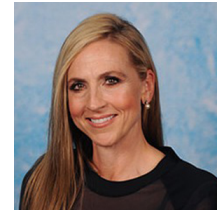
Register now

Panelists:
Marc Kaprow, DO, MHA
Krithika Iyer, MD, DFAPA
John Felton, Program Manager



MESSAGE FROM THE CHAIR

The Florida PDMP Foundation board of directors met via conference call on May 7, 2025, and adopted a fiscal year 2025-2026 operating budget of \$152,350. These funds cover the expense of managing the state PDMP Foundation as a Direct Support Organization to the Florida Department of Health E-FORCSE®, the state's prescription drug monitoring program. The treasurer told the board that the foundation's current assets totaled \$800,404 in checking, savings and brokerage accounts.



In addition to adopting the PDMP Foundation budget the board also approved a budget of \$147,100 for the Center for Disease Control and Prevention Overdose Data to Action Grant (OD2A). The foundation contracts with the Florida Department of Health to provide designated deliverables under the grant. In this year's OD2A grant the PDMP Foundation in cooperation with the Florida Medical Association produced two webinars on topics covering opioid prescribing and diagnosis of substance abuse disorders. These 1.5-hour courses were presented in each grant quarter. On July 27th at the FMA annual meeting the courses will be presented live to attendees.

Beginning in July 2025 the foundation will begin development of a student education seminar series directed at medical, dental, podiatry, pharmacy, nursing and physician assistant students. The program will support a live presentation and a video that will educate the students on the basic regulatory requirements in the operation of the state prescription drug monitoring program.

The PDMP Foundation looks forward to continuing its support for the state of Florida's prescription drug monitoring program. It will be present at most of the state health care association's annual conferences.

[Dr. Lee Ann Brown, DO, FAAPMR, currently serves as Acting Chair of the Florida PDMP Foundation Board of Directors. Dr. Brown received her Doctor of Osteopathic Medicine degree from West Virginia University and completed her residency at Northwestern University. She is certified in physical medicine and pain management with a private practice in Clearwater. She is past president of the Florida Osteopathic Medical Association.]

Executive Director Update

In the second half of the 2024-2025 fiscal year the Florida PDMP Foundation continued to provide outreach and education programs to health care providers throughout the state of Florida. The foundation and E-FORCSE® staffs attended the January Florida Podiatric Medical Association SAM conference and in February the Florida Osteopathic Medical Association annual meeting. In June the staff will be attending the Florida Police Chiefs Association summer conference and then the Florida Dental Convention.



At the start of the 2025-2026 fiscal year the outreach and education program will see staff exhibiting at the Florida Pharmacy Association, Florida Medical Association, Florida Sheriffs Association, Florida Society of Health System Pharmacist, Florida College of Emergency Physicians and Florida Nurse Practitioners Network meetings.

The staff has been heavily involved in coordinating with the Florida Medical Association on the production of the OD2A grant webinars. It is also working on new topics for another set of webinars to be presented in FY 2025-2026.

The foundation's staff collaborates with MultiView, to produce and distribute a quarterly newsletter. This publication reaches over 600,000 licensed health care providers in Florida.

The foundation looks forward to continuing its quarterly newsletter. We welcome any comments you have on the subject matter it covers. Please send any comments to executive.director@fldmpfoundation.com.

[Mr. Macdonald, MS, is a graduate of the University of Tennessee, Knoxville, and received a master's in health planning and policy from the University of Cincinnati. He served as a consumer member of the Florida Board of Nursing and was a director on the staff of the Florida Dental Association.]

Legal Corner with Jason D. Winn, Esq., General Counsel Florida PDMP Foundation



What is a pain management clinic?

Florida has regulated pain management clinics since 2010 and defines a pain management clinic in Florida Statute §458.3265 and §459.0137 as any publicly or privately owned facility that either: 1) advertises in any medium for any type of pain-management services; or, 2) where in any month a majority of patients are prescribed [opioids, benzodiazepines, barbiturates, or carisoprodol](#) for the treatment of chronic nonmalignant pain. “Chronic nonmalignant pain” means pain unrelated to cancer which persists beyond the usual course of disease or the injury that is the cause of the pain or more than 90 days after surgery.

So, if you are advertising for any type of pain-management service or during any month you treat a majority of your patients for chronic non-malignant pain by prescribing opioids, benzodiazepines, barbiturates, or carisoprodol, YOU ARE A PAIN-MANAGEMENT CLINIC!

If you are a pain-management clinic you **must** register with the department of health or hold a valid certificate of exemption. First let's address those practitioners that must register with the DOH. As a part of registration, a clinic must designate a physician who is responsible for complying with all requirements related to registration and operation of the clinic in compliance with this section. The designated physician shall have a full, active, and unencumbered license under chapter 458 or 459, F.S., and shall practice at the clinic location for which the physician has assumed responsibility. Failing to have a licensed designated physician practicing at the location of the registered clinic may be the basis for a summary suspension of the clinic registration certificate as described in s. 456.073(8) for a license or s. 120.60(6), F.S. Within 10 days after termination of a designated physician, the clinic must notify the department of the identity of another designated physician for that clinic.

A pain-management clinic that claims an exemption from the registration requirements must apply for a certificate of exemption on a form adopted in rule by the DOH. Clinics claiming an exemption from the registration requirement must apply for a certificate of exemption on Application for Exemption from Pain Management Clinic Registration, form DH-MQA 5031 (6/2020), Rule 64B-7.001, F.A.C., incorporated by reference and available at <https://www.floridahealth.gov/licensing-and-regulation/pain-management-clinics/Exemption-Pain-Management-Clinic-Registration-Application-Current-6-2020.pdf> The following clinics are exempt from the registration requirement of paragraphs (c)-(m) and must apply to the department for a certificate of exemption:

- a. A clinic licensed as a facility pursuant to chapter 395;

- b. A clinic in which the majority of physicians who provide services in the clinic primarily provide surgical services;
- c. A clinic owned by a publicly held corporation whose shares are traded on a national or on the over-the-counter market and whose total assets at the end of the corporation's most recent fiscal quarter exceeded \$50 million;
- d. A clinic affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows;
- e. A clinic that does not prescribe controlled substances for the treatment of pain;
- f. A clinic owned by a corporate entity exempt from federal taxation under 26 U.S.C. s. 501(c)(3);
- g. A clinic wholly owned and operated by one or more board-eligible or board-certified anesthesiologists, physiatrists, rheumatologists, or neurologists; or
- h. A clinic wholly owned and operated by a physician multispecialty practice where one or more board-eligible or board-certified medical specialists, who have also completed fellowships in pain medicine approved by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association or who are also board-certified in pain medicine by the American Board of Pain Medicine or a board approved by the American Board of Medical Specialties, the American Association of Physician Specialists, or the American Osteopathic Association, perform interventional pain procedures of the type routinely billed using surgical codes.

The certificate of exemption must be renewed biennially, except that the department may issue the initial certificates of exemption for up to 3 years to stagger renewal dates. A certificate holder must prominently display the certificate of exemption and make it available to the department or the board upon request. A new certificate of exemption is required for a change of address and is not transferable. A certificate of exemption is valid only for the applicant, qualifying owners, licenses, registrations, certifications, and services provided under a specific statutory exemption and is valid only to the specific exemption claimed and granted. A certificate holder must notify the department at least 60 days before any anticipated relocation or name change of the pain management clinic or a change of ownership. If a pain management clinic no longer qualifies for a certificate of exemption, the certificate holder must notify the department within 3 days after becoming aware that the clinic no longer qualifies for a certificate of exemption and register as a pain management clinic under subsection (1) or cease operations.

Alright, now that you have registered at your pain-management clinic, what's next? A physician may not practice medicine in a pain-management clinic, as described in subsection (5), if the pain-management clinic is not registered with the department as required by this section. Any physician who qualifies to practice medicine in a pain-management clinic pursuant to rules adopted by the Board of Medicine or Board of Osteopathic Medicine as of July 1, 2012, may continue to practice medicine in a pain-management clinic as long as the physician continues to meet the qualifications set forth

in the board rules. A physician who violates this paragraph is subject to disciplinary action by his or her appropriate medical regulatory board.

Only a physician licensed under chapter 458 or chapter 459 may dispense medication or prescribe a controlled substance regulated under chapter 893 on the premises of a registered pain-management clinic.

A physician, a physician assistant, or an advanced practice registered nurse must perform a physical examination of a patient on the same day that the physician prescribes a controlled substance to a patient at a pain-management clinic. If the physician prescribes more than a 72-hour dose of controlled substances for the treatment of chronic nonmalignant pain, the physician must document in the patient's record the reason for prescribing that quantity.

A physician authorized to prescribe controlled substances who practices at a pain-management clinic is responsible for maintaining the control and security of his or her prescription blanks or electronic prescribing software used for prescribing controlled substance pain medication. A physician who issues written prescriptions shall comply with the requirements for counterfeit-resistant prescription blanks in s. 893.065 and the rules adopted pursuant to that section. A physician shall notify, in writing, the department within 24 hours after any theft or loss of a prescription blank or breach of his or her electronic prescribing software used for prescribing pain medication.

The designated physician of a pain-management clinic shall notify the applicable board in writing of the date of termination of employment within 10 days after terminating his or her employment with a pain-management clinic that is required to be registered under subsection (1). Each physician practicing in a pain-management clinic shall advise the Board of Medicine, in writing, within 10 calendar days after beginning or ending his or her practice at a pain-management clinic.

Finally, the inspection by the DOH.

The department shall inspect the pain-management clinic annually, including a review of the patient records, to ensure that it complies with this section and the rules of the Board of Osteopathic Medicine adopted pursuant to subsection (5) unless the clinic is accredited by a nationally recognized accrediting agency approved by the Board of Medicine or Osteopathic Medicine. During an onsite inspection, the department shall make a reasonable attempt to discuss each violation with the owner or designated physician of the pain-management clinic before issuing a formal written notification. Any action taken to correct a violation shall be documented in writing by the owner or designated physician of the pain-management clinic and verified by follow up visits by departmental personnel. Failing to abide by the requirements of registration, exemption, physician responsibilities or inspections, may result in administrative action against the licensee. The department may impose an administrative fine on the clinic of up to \$5,000 per violation for violating the requirements of this section; chapter 499, the Florida Drug and Cosmetic Act; 21 U.S.C. ss. 301-392, the Federal Food, Drug, and Cosmetic Act; 21 U.S.C. ss. 821 et seq.,

the Comprehensive Drug Abuse Prevention and Control Act; chapter 893, the Florida Comprehensive Drug Abuse Prevention and Control Act; or the rules of the department. The licensed practitioner can face up to a \$1,000 fine for failing to submit data or failing to report the theft of prescription pads from the clinic.

In determining whether a penalty is to be imposed, and in fixing the amount of the fine, the department shall consider the following factors:

1. The gravity of the violation, including the probability that death or serious physical or emotional harm to a patient has resulted, or could have resulted, from the pain-management clinic's actions or the actions of the osteopathic physician, the severity of the action or potential harm, and the extent to which the provisions of the applicable laws or rules were violated.
2. What actions, if any, the owner or designated osteopathic physician took to correct the violations.
3. Whether there were any previous violations at the pain-management clinic.
4. The financial benefits that the pain-management clinic derived from committing or continuing to commit the violation.

Each day a violation continues after the date fixed for termination of the violation as ordered by the department constitutes an additional, separate, and distinct violation. The department may impose a fine and, in the case of an owner-operated pain-management clinic, revoke or deny a pain-management clinic's registration, if the clinic's designated osteopathic physician knowingly and intentionally misrepresents actions taken to correct a violation. An owner or designated osteopathic physician of a pain-management clinic who concurrently operates an unregistered pain-management clinic is subject to an administrative fine of \$5,000 per day. If the owner of a pain-management clinic that requires registration fails to apply to register the clinic upon a change of ownership and operates the clinic under the new ownership, the owner is subject to a fine of \$5,000.

[Jason Winn is a Senior Attorney and registered lobbyist at Lewis Longman & Walker practicing in the areas of administrative, civil, legislative, and governmental affairs. An accomplished speaker, Winn frequently lectures across Florida on the laws and rules impacting health care practitioners.

He has served as general counsel for the Florida Prescription Drug Monitoring Program, Florida Osteopathic Medical Association, Florida Podiatric Medical Association, the Sheriff's Offices in Gadsden and Wakulla, and the Florida Hearing Society of which he is also the Executive Director.]

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HEALTH EDUCATOR REPORT

PDMP Foundation CE Programs

In response to the Overdose Data to Action in States (OD2A-S) for grant year 2024-2025, the PDMP Foundation developed four Continuing Education (CE) webinars and hybrid on the *CDC Guidelines for Prescribing Opioids for Chronic Pain — United States, 2020*. The programs were developed and helped through collaboration with the Florida Medical Association and the Florida PDMP. The March CEs were presented recently in a webinar format with live questions and answers and had a total of over 300 in attendance.



The first three CE programs, each have been well received and attended, and offered positive feedback, which will be incorporated in future CE program offerings. The Foundation will present the remaining of the four programs in-person at the FMA Annual Meeting on July 20th.

As mentioned by the Executive Director, the Foundation is developing and planning the two CE programs for the upcoming grant year 2025-2026.

Student Health Seminar

The Foundation has in place an implementation plan for the Student Health Seminars. We have preliminary agreements from two different programs and are contacting the deans of each health care program to offer these seminars to their students at the recommended semesters. We are working with the Foundation educational committee and gathering feedback on which professional year this program would be best offered to healthcare students.

The Foundation is pleased to announce that the Student Health Seminar (2025-2026) will be presented by Becki Poston, who previously served as program manager with the PDMP, since its infancy and brings a wealth of knowledge to the seminars. The presentation will be made into a video for distribution to the deans of all Florida health care education programs to provide to students who didn't attend the live lectures.


[Dr. Kelli W. Ferrell currently serves as the Health Educator for the Florida Prescription Drug Monitoring Program Foundation (PDMPF). Kelli has a vast knowledge and over 20 years of experience in clinical pharmacy practice, managed care and administrative pharmacy, and health outcomes research. Dr. Ferrell earned her Bachelor of Science in Pharmacy and Pharmaceutical Sciences from Florida A&M University (FAMU). She also has a Master of Science and a Doctor of Philosophy in Pharmaceutical Sciences with concentrations in Pharmacoeconomics and Health Outcomes Research, both from FAMU.]

DID YOU KNOW?


Update from The Florida PDMP (E-Forcse)


We are pleased to inform everyone about an upcoming enhancement to the Florida Prescription Monitoring Program (E-FORCSE) reports that will provide valuable insights into Non-Fatal Overdose Events (NFOD). With a release date targeting mid-June 2025, Florida practitioners will notice a new state indicator on patient reports within the E-FORCSE system.


State Indicators (1)

 Patient has experienced a non-fatal overdose event. A history of drug overdose is not reflected in the Overdose Risk Score.

[Details](#)

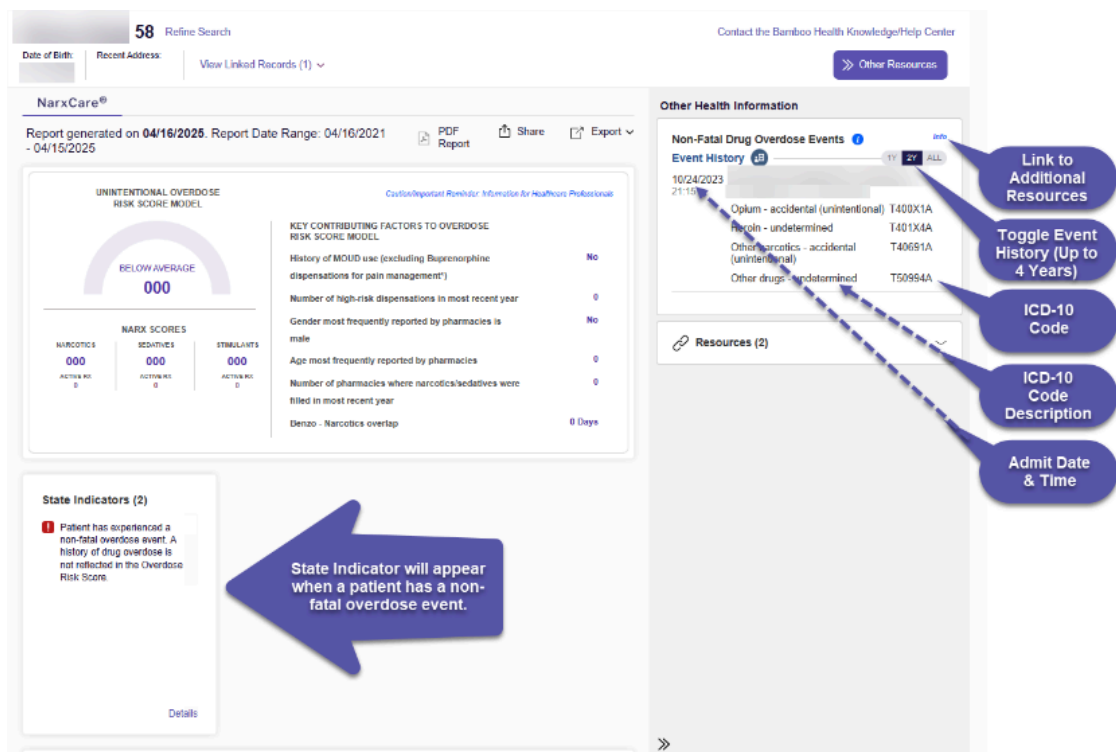
Non-Fatal Drug Overdose Events  [Info](#)

Event History  1Y 2Y **ALL**

10/24/2023 21:15 

Opium - accidental (unintentional)	T400X1A
Heroin - undetermined	T401X4A
Other narcotics - accidental (unintentional)	T40691A
Other drugs - undetermined	T50994A

Additionally, there will be a new tile on the patient report labeled "Other Health Information" via PMP AWARE and PMP Gateway, where you can access detailed information regarding NFOD events



The non-fatal overdose information included in the E-FORCSE report is sourced from the Florida Health Information Exchange. The NFOD event details that will be displayed in the E-FORCSE reports via the "Other Health Information" tile includes:

- Admit Date
- Facility Name
- Facility City
- Zip code
- ICD-10 code
- ICD-10 description

We believe that this enhancement will significantly contribute to the state of Florida patient care and management efforts by providing comprehensive information on NFOD events.

The non-fatal drug overdose event indicator is intended to aid, not replace, medical decision making. The information should not be used as the sole justification for providing or not providing medications. For more information about the indicator, please visit to review the quick reference guide: [OD Insights - Non-Fatal Overdose Indicator](#) .

FOUNDATION ANNUAL GIVING PROGRAM CONTINUES

The Florida PDMP Foundation Annual Giving Program seeks yearly charitable contributions from supporters to help fund upgrades and enhancements for outreach and educational programs for the state PDMP. Tax-deductible contributions can be made directly to the Foundation on its website at: www.flpdmpfoundation.com/donations/.

Contributions can be made by credit card or by sending a check to: The Florida PDMP Foundation, Inc., 10801 Starkey Rd., #104-221, Seminole, FL 33777.

PDMP Foundation E-NEWS Contact Information:

If you have questions about any information that appears in this newsletter or the Foundation's activities in support of E-FORCSE[®], please contact Bob Macdonald, Executive Director, at executive.director@fldmpfoundation.com.

E-FORCSE[®] Contact Information:

For technical assistance, please call [1-877-719-3120](tel:1-877-719-3120). If you have questions specific to state policy, you may contact E-FORCSE[®] at [850-245-4797](tel:850-245-4797) or by e-mail at e-forcse@flhealth.gov.

To create an E-FORCSE[®] account, navigate to <https://florida.pmpaware.net> and click "Create an Account."



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