Ohio Administrative Code

Rule 4729:5-5-08 Prospective drug utilization review.

Effective: November 15, 2022

(A) Prior to dispensing any prescription, a pharmacist shall review the patient profile for the purpose of identifying the following:

(1) Over-utilization or under-utilization;

(2) Therapeutic duplication;

(3) Drug-disease state contraindications;

(4) Drug-drug interactions;

(5) Incorrect drug dosage;

(6) Drug-allergy interactions;

(7) Abuse/misuse;

(8) Inappropriate duration of drug treatment; and

(9) Food-nutritional supplements-drug interactions.

(B) Upon identifying any issue listed in paragraph (A) of this rule, a pharmacist, using professional judgment, shall take appropriate steps to avoid or resolve the potential problem. These steps may include, but shall not be limited to, the following:

(1) Requesting and reviewing an OARRS report or another state's prescription drug monitoring report;

(2) Consulting with the prescriber; or

(3) Counseling the patient.

(C) Prospective drug utilization review shall be performed using predetermined standards consistent with, but not limited to, any of the following:

(1) Peer-reviewed medical literature (i.e. scientific, medical, and pharmaceutical publications in which original manuscripts are rejected or published only after having been critically reviewed by unbiased independent experts);

(2) American hospital formulary service drug information; and

(3) United States pharmacopeia drug information.

(D) Prior to dispensing an outpatient prescription for a controlled substance dangerous drug or a drug containing gabapentin, at a minimum, a pharmacist shall request and review an OARRS report covering at least a one year time period in any of the following circumstances:

(1) A patient adds a new or different controlled substance dangerous drug or a drug containing gabapentin to the patient's therapy that was not previously included;

(2) An OARRS report has not been reviewed for that patient during the preceding twelve months, as indicated in the patient profile;

(3) A prescriber is located outside the usual pharmacy geographic area;

(4) A patient is from outside the usual pharmacy geographic area;

(5) A pharmacist has reason to believe the patient has received prescriptions for controlled substance dangerous drugs or a drug containing gabapentin from more than one prescriber in the preceding three months, unless the prescriptions are from prescribers who practice at the same physical location;

(6) Patient is exhibiting signs of potential abuse or diversion. This includes, but is not limited to, over-utilization, early refills, appears overly sedated or intoxicated upon presenting a prescription for a controlled substance dangerous drug, or an unfamiliar patient requesting a reportable drug by specific name, street name, color, or identifying marks.

(E) In the event an OARRS report is not immediately available, the pharmacist shall use professional judgment in determining whether it is appropriate and in the patient's best interest to dispense the prescription prior to reviewing a report.

(F) A pharmacist may use a delegate licensed or registered in accordance with Chapter 4729. of the Revised Code to request an OARRS report.

(G) Based upon information obtained during a prospective drug utilization review, a pharmacist shall use professional judgment when making a determination about the legitimacy of a prescription. A pharmacist shall not dispense a prescription of doubtful, questionable, or suspicious origin.