

POLICY STATEMENT

Individual Practitioner US Drug Enforcement Administration (DEA) Registrations

As stated in the attached notice from US DEA, individual practitioners who practice in Federal, state or local hospitals or other institutions are not exempt from DEA controlled substance registration/renewal fees. However, such individual practitioners when performing their official duties for Federal, state or local hospitals or other institutions, may administer, dispense or prescribe controlled substances under the registration of the hospital or other institution responsible for the patient being treated in lieu of being individually registered. The institution responsible for the patient being treated is normally the institution responsible for maintaining the medical record or the patient being treated. Employees of the University of Connecticut Health Center (UCHC)/University of Connecticut Health System (UCHS) providing care to UCHC/UCHS patients may use the John Dempsey Hospital's US DEA Controlled Substance Number outlined in this policy. When a UCHC/UCHS employee is performing official UCHC/UCHS practitioner duties for patients of other institutions (e.g., the other institution is responsible for maintaining the patient's medical record) the UCHC employee may administer, dispense or prescribe controlled substances under that institution's DEA number and a unique identification number assigned by that institution (contact that institution's Pharmacy Office for more details on their local policies). The UCHC/UCHS DEA number cannot be used for patients of other institutions. It is the policy of the UCHC/UCHS that because the above rules allow the use of institutional DEA number by UCHC/UCHS employees that personal US DEA controlled substance registrations are not required. Practitioners electing to continue individual US DEA registrations may use such a registration number for their official duties, but payment of the registration fee would not be reimbursable except in special circumstances authorized by the appropriate Dean or the Medical Director, UCHS.

Please note that: (1) residents who are employees of the Capital Area Health Consortium are not UCHC/UCHS employees and must use the US DEA institutional controlled substance registration number as provided to them by the institution(s) where they are assigned; (2) when the John Dempsey Hospital's DEA number is used by UCHC/UCHS employees it can only be for official Health Center duties when treating UCHC/UCHS patients; (3) US DEA has stated that practitioners allowing their registrations to lapse because of UCHC employment would encounter no special difficulty because of such an action during any future registrations (however, the normal processing time for a new DEA registration is about eight weeks); and (4) practitioners prescribing controlled substances in Connecticut must also have a **CT Controlled Substance Registration for Practitioners** from the Connecticut (CT) Department of Consumer Protection. (Call the Department's Division of Central Licensing at (860) 566-2825 or 566-2834 for the application form. These individual CT registrations and renewals are fee exempt for official UCHC/UCHS duties of UCHC/UCHS employees. On the CT application or renewal form, enter the name of the institution as the University of Connecticut Health Center and state that the application/renewal is fee exempt because you are a CT State employee.

The Hospital's DEA number to be used by UCHC/UCHS employees having the above CT DCP registration and providing health care to UCHC/UCHS patients, is AJ6217461-XXXX. The suffix (XXXX) must be included and is the IDX number assigned to the practitioner by the UCHC. You or your administrative staff can obtain your assigned IDX number by an on-line computer query or by contacting the Admitting Department. It is vital that all such prescriptions also contain the provider's signature and stamped, typed or hand printed full name.

This Policy applies to practitioner registrations only. Contact the Office of Research Safety if controlled substances must be used in research (e.g., for laboratory standards and in animals). US DEA and CT registrations as a researcher may be required.

Leslie S. Cutler, D.D.S., Ph.D.
Chancellor and Provost for Health Affairs

Attachment

(Revised 8/96)

Drug Enforcement Administration

ATTACHMENT

Washington D.C. 20537

LIMITING OF EXEMPTION FROM PAYMENT OF APPLICATION FEE

Section 1301.13 of Title 21, Code of Federal Regulations has been amended to limit the exemption from payment of application fees for registration or reregistration to Federal, state or local government operated hospitals or institutions.

Individual practitioners who practice in Federal, state or local hospitals or other institutions are no longer exempt from the fee requirement. If registration is desired for such activities the fee must be paid.

Individual practitioners who are employees of Federal, state or local hospitals or other institutions may, when engaging in their official duties, administer, dispense or prescribe controlled substances under the registration of the hospital or other institution in lieu of being individually registered.

The effective date of this action was March 28, 1994. A copy of the Final Rule Concerning this amendment is attached.

[Federal Register: February 24, 1994]

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

21 CFR Part 1301

Amendment of the Fee Exemption for Federal, State and Local Government Employees agency: Drug Enforcement Administration (DEA), Justice action: Final rule.

summary: This final rule limits the **exemption** from payment of application fees for registration or reregistration to Federal, state, or local government operated hospitals or institutions. This will eliminate the need for DEA to dedicate manpower or other resources to controlling abuse of the **fee** exempt status.

effective date: March 28, 1994.

for further information contact: G. Thomas Gitchel, Chief, Liaison and Policy Section, Office of Diversion Control, Drug Enforcement Administration, Washington, DC 20537, Telephone (202) 307-7297.

supplementary information: On June 1, 1993, a notice of proposed rulemaking was published in the Federal Register (58 FR 31180). DEA proposed to limit the **exemption** from payment of registration or reregistration application fees to Federal, state or local government operated hospital/clinics.

A total of three comments were received, all opposed to the proposed changes. Two of the comments concerned state certified euthanasia technicians. The commenters objected to the changes on the grounds that the change would impose a financial burden on the euthanasia technicians and the animal shelters at which they work, due to the extremely high turnover rate the industry experiences. This will not be the case. The euthanasia technicians are employees of animal control facilities or shelters. They may not engage in their activities other than as employees of the facilities or shelters. Under such circumstances, DEA has traditionally issued the registrations for such activities under the facility or shelter name with the euthanasia technician's name appearing thereafter. It is appropriate under such circumstances for the Federal, state or local government facility or shelter to request and receive the **exemption** from the **fee**. In light of the fact that DEA registers these activities as other than a hospital or clinic, the original language of the proposal with respect to Federal, state or local hospitals or clinics has been changed to Federal, state or local hospitals or other institutions.

The third commenter objected to the changes on the grounds that the proposed changes, if implemented, would prevent public sector employees from using their exempt status to obtain registrations for use in private practice. That is the exact intent of the proposal. Any individual who engages in private practice utilizing a DEA registration must pay the required **fee** for that registration. Individuals who engage in public practice as agents or employees of Federal, state or local hospitals or institutions would not be required to obtain a registration; they would conduct their controlled substances activities under the registration of the hospital or institution. Although this has been a longstanding policy, DEA will clarify the provisions for such activities in light of the impact that the limiting of the **fee exemption** will have. A proposal to amend Sec. 1301.24 has been drafted to clarify the **exemption** from the registration requirement of individual practitioners who act as agents or employees of other individual practitioners and of hospitals or other institutions. That proposal will be published in the Federal Register in the near future.

There are approximately 44,000 active DEA registrations which were issued under the **fee** exempt status. Over 35,000 of the registrations are for practitioners and the remainder are for Federal, state or local hospitals or institutions. By restricting the **fee** exempt status to the hospitals or institutions and allowing the practitioners to carry out their official duties under the hospital or institution registrations, DEA will eliminate the need to dedicate manpower or other resources to controlling the misuse of the **fee** exempt status.

The limiting of the **fee exemption** will not affect those law enforcement analytical laboratories which are described in Sec. 1301.26.

The Deputy Assistant Administrator, office of Diversion Control, hereby certifies that this final rule will have no significant impact upon entities whose interests must be considered under the Regulatory Flexibility Act, 5 U.S.C. 601 et seq. Any financial or regulatory burdens that practitioners may experience are existing burdens which the practitioners have heretofore avoided by inappropriate use of the **fee exemption**.

This final rule is not a significant regulatory action and therefore has not been reviewed by the office of Management and Budget pursuant to Executive Order 12866.

This action has been analyzed in accordance with the principles and criteria in Executive Order 12612, and it has been determined that the final rule does not have sufficient federalism implications to warrant the preparation of a Federalism Assessment.

List of Subjects in 21 CFR Part 1301

Administrative practice and procedure, Drug traffic control, security measures. For reasons set out above, 21 CFR part 1301 is amended as follows:

PART 1301--[AMENDED]

1. The authority citation for part 1301 continues to read as follows: Authority: 21 U.S.C. 821, 822, 823, 824, 871(b), 875, 877.

2. Section 1301.13 is amended by revising paragraphs (a) and (b) to read as follows: Sec. 1301.13 Persons exempt from **fee**.

(a) The Administrator shall exempt from payment of an application **fee** for registration or reregistration any hospital or other institution which is operated by an agency of the United States (including the U.S. Army, Navy, Marine Corps, Air Force, and Coast Guard), of any State, or any political subdivision or agency thereof.

(b) In order to claim **exemption** from payment of a registration or reregistration application **fee**, the registrant shall have completed the certification on the appropriate application form, wherein the registrant's officer certifies to the status and address of the registrant.

Dated: February 14, 1994.

Gene R. Haislip, Deputy Assistant Administrator, office of Diversion Control.

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