## DEA Electronic Commerce PKI Initiatives

Health Care PKI Working Group January 22, 2002



### Agenda

- DEA E-Commerce Initiatives
- Objectives & Anticipated Benefits
- PKI Architecture
- Key Policy Provisions
- Status
- Questions



#### Two "Key" E-Commerce Initiatives

- Electronic Prescriptions for Controlled Substances (EPCS)
  - Over 1M DEA Registered Practitioners
    - Over 600M Controlled Prescriptions
- Controlled Substance Ordering System (CSOS)
  - Over 300K Registrants



## **EPCS - Objectives**

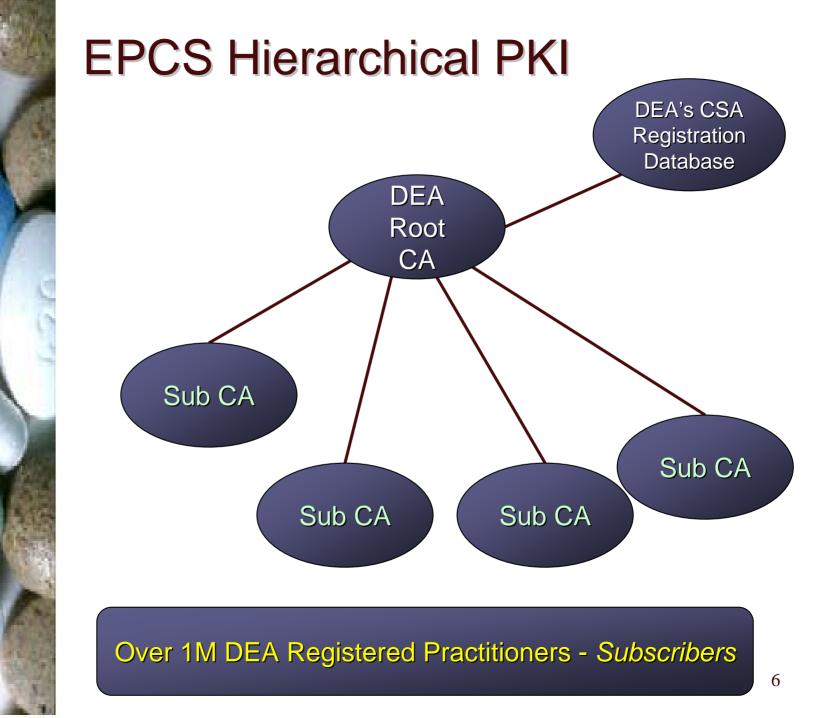
To design a system that would support the secure electronic transmission of controlled substance prescriptions.

To allow the continued use of commercially designed, implemented systems with minimal impact.

Allow DEA certificates to be used for other health care related transactions



**EPCS** - Anticipated Benefits Improved health care efficiency Reduced medical mistakes Reduced prescription forgeries Reduced overall costs •An allowance, NOT a requirement





#### **Root Certification Authority Establishes FBCA-interoperable trust** framework Maintains PKI oversight responsibility Issues certificates to Approved Subordinate CAs Ensures trust interoperability between Subordinate CAs Provides a mechanism for recourse against a Subordinate Certification **Authority**



## Root CA

Establishes Certificate Policy that defines obligations and standards for participants...

- Sub CAs
- Practitioners (subscribers)
- Pharmacies (relying parties)
- E-Rx System Vendors

**Defines Certificate Profile** 



Subordinate CA Obligations Operate in accordance with EPCS CP **Issue Certificates to DEA registrants** Perform revocations as required; publish revocation information every four hours Undergo annual audit for "approved" status Audit performed by outside organization



## **Core Policy Provisions**

| 3.0<br>Ident. &<br>Authent. | <ul> <li>3.1.9 Authent. of Individual Identity</li> <li>3.1.8 Authentication of Org. Identity</li> </ul> | [Gov. Photo ID,<br>+ DEA Registration,<br>+ Notary, DEA DB,]<br>[Indiiv. + Empl. letter] |
|-----------------------------|--|--|
| 4.0                         | •4.4.4 Revocation Grace period   | [6 hours]  |
| Operational<br>Req.         | •4.4.9 CRL Issuance Frequency  | [4 hours]  |
|                             | •4.4.10 CRL Checking Requirements  | [YES]  |
| 5.0 Physical                | Currently surveying locations for CA facility  |  |
| 6.0                         | •6.2.1 Std. for cryptographic modules  | [140-1,2 Level 1, HW]  |
| Technical                   | •6.2.7 Method of Activating priv. key  | [biometric]  |
| Security<br>Controls        | •6.3.2 Usage Period for Private Key  | [3 years]  |
| 7.0                         | Extensions for :   |  |
| Certificate                 | [Name, business address, DEA registration #, auth. schedules]  |  |
| Profile                     |  | 10   |



# **EPCS** is Application Neutral

EPCS does not mandate the use of a particular EDI standard.

- NCPDP SCRIPT
- HL7

Efforts are underway by standards organizations to PKI-enable these EDI transactions

E-prescription must be digitally signed by practitioner, and validated by pharmacy



#### Required Prescription Content Remains the Same

#### Date

Patient name and address

Drug name, strength, dosage form, quantity prescribed, and directions for use

Practitioner's name, address, and DEA registration number

Data in archive must be readily retrievable in an electronic form 12



## **Application Compliance Auditing**

Initial compliance audit required for all EPCS-enabled applications

Follow-up audits required upon major application revisions

Pharmacy required to ensure that their software complies with DEA regulations

FIPS 140-1,-2 approved crypto

Not a site specific audit !



## **Pharmacy Obligations**

 Pharmacies/Pharmacist will not require EPCS certificates (will require a certificate for electronic orders)

•Prescription validity based upon validity of certificate at time of signing

•Refills based on validity of original prescription.

•Re-verification at time of refill is unnecessary.

### **Pharmacy Checks**

#### Check Certificate Status, Is it valid?

- Or Check Practitioner's Certificate, Has it expired?
- › Check Issuing CA's Certificate, Has it expired?
- Has either been revoked?
- Check the institution's certificate in case of agents

Check prescription integrity, Has it been altered?

Leverage trusted certificate to check:

- Does practitioner have authority to prescribe specific substance listed?
- > Is the practitioner an agent of an institution?5



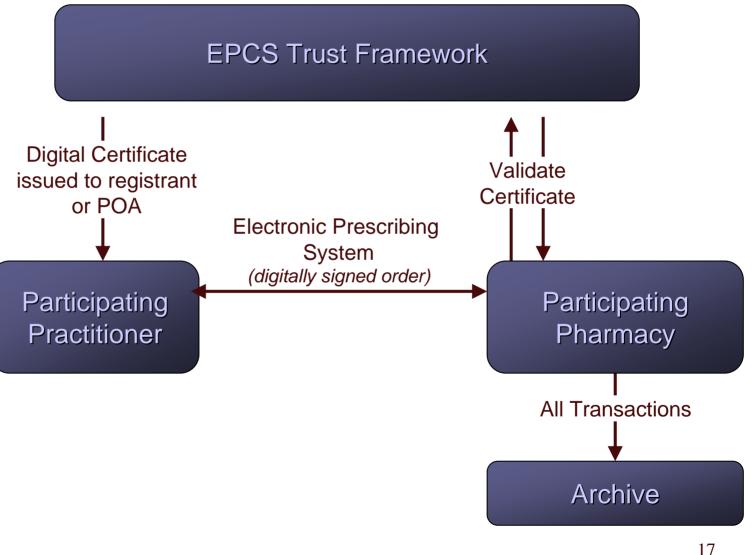
### **Pharmacy Record Keeping**

Pharmacist must electronically sign the prescription

E-signature performed as a separate act Access code/PIN is an acceptable solution Maintain electronic archive for two years Software audit for DEA compliance, NOT a site audit



#### **EPCS Trust Framework**





## **DEA Efforts to Date**

- •Security Requirements Analysis
- •Review of existing industry IT infrastructure
- Interop. testing & product review
- Concept of Operations
- •System Architecture
- CP, CPS, Certificate Profile



# **Ongoing Efforts**

- •Current regulations do not permit electronic prescriptions for controlled substances...
- •Developing new regulations and modifications to existing regulations
- •Implementing EPCS Root CA
- •Pilot Program conducted in concert with the Department of Veterans Affairs (Outpatient Pharmacies)



## Stakeholder Coordination

Continued solicitation of industry input & comments

- Practitioner Working Group (2/2002)
- Pharmacy Working Group
- State Regulatory Working Group (NABP/NASCSA)

Others...



#### Questions

