

CURES 2.0 Mandatory Use

Beginning October 2, 2018, the Controlled Substance Utilization Review and Evaluation System (CURES) must be consulted prior to prescribing, ordering, administering, or furnishing a Schedule II-IV controlled substance.¹

When must CURES be consulted?

- The first time a patient is prescribed, ordered, administered, or furnished a Schedule II-IV controlled substance, unless an exemption applies

“First time” is defined as the initial occurrence in which a health care practitioner intends to prescribe, order, administer, or furnish a controlled substance to a patient and has not previously prescribed a controlled substance to the patient – Health and Safety Code (HSC), § 11165.4(a)(1)(B)

- Within the 24 hour period, or the previous business day, before prescribing, ordering, administering, or furnishing a Schedule II-IV controlled substance, unless an exemption applies
- Before subsequently prescribing a Schedule II-IV controlled substance, if previously exempt
- At least once every 4 months if the Schedule II-IV controlled substance remains a part of the patient’s treatment plan

Who is required to consult CURES?

- Dentist, physician, naturopathic doctor, optometrist, osteopathic doctor, physician assistant, podiatrist
- Registered certified nurse midwife or registered nurse practitioner who furnish

Note: This requirement does not apply to veterinarians or pharmacists

What circumstances exempt a health care practitioner from consulting CURES?

- While the patient is admitted to, or during an emergency transfer between a licensed clinic, outpatient setting, health facility, county medical facility
- In the emergency department of a general acute care hospital, and the Schedule II-IV controlled substance does not exceed a non-refillable 7-day supply
- As part of a patient’s treatment for a surgical procedure, and the Schedule II-IV controlled substance does not exceed a non-refillable 5-day supply when a surgical procedure is performed at a licensed clinic, outpatient setting, health facility, county medical facility, or place of practice (*defined as a Dental Office pursuant to Business and Professions Code § 1658*)
- The patient is receiving hospice care

If it is not reasonable for a health care practitioner to access information in CURES in a timely manner and another individual with CURES access is not available, a 5-day supply of Schedule II-IV controlled substance can be prescribed, ordered, administered, or furnished as long as there is no refill allowed. In addition, the prescriber must document in the patient’s medical records the reason for not consulting CURES.

Health care practitioners who fail to consult CURES will be referred to their state professional licensing board for administrative sanctions. There is no private cause of action for a prescriber’s failure to consult CURES.

For complete information on the mandatory requirement, please read HSC § 11165.4 or visit www.mbc.ca.gov/CURES for detailed information about CURES 2.0 and its mandatory use.

Reference

1. *CURES 2.0 Mandatory Use Begins October 2, 2018* [Flyer]. Medical Board of California, May 2018. Available at: http://www.mbc.ca.gov/Licensees/Prescribing/CURES/CURES_Mandatory_Flyer.pdf. Accessed 6/5/2018.

The CalOptima Approved Drug List is available on our website: www.caloptima.org
and for PDA download at www.epocrates.com