

Listing of Forms

18 VAC 76-20-10 et seq. Regulations Governing the Prescription Monitoring Program

Regulations of the Department of Health Professions

Request for Waiver of Reporting Requirements for Prescription Monitoring Program (eff. 3/03).

Request to Register as an Authorized Agent to Receive Information from the Virginia Prescription Monitoring Program (eff. 3/03).

Request for Disclosure of Information from Prescription Monitoring Program (eff. ~~3/03~~ 7/03).

Recipient Request for Discretionary Disclosure of Information from Prescription Monitoring Program (eff. 7/03).

Prescriber Request for Discretionary Disclosure of Information from Prescription Monitoring Program (eff. 7/03).

Regulatory Authority Request for Discretionary Disclosure of Information from Prescription Monitoring Program (eff. 7/03).

Investigation under Virginia Medicaid Program; Request for Discretionary Disclosure of Information from Prescription Monitoring Program (eff. 7/03).