



ALABAMA BOARD OF MEDICAL EXAMINERS

Qualified Alabama Controlled Substances Certificate (QACSC) (Schedules III-V) Prescribing Protocol

1. A Physician Assistant (PA), Certified Registered Nurse Practitioner (CRNP), or Certified Nurse Midwife (CNM) holding a Qualified Alabama Controlled Substances Certificate ("QACSC holder") may initiate therapy with a controlled substance listed in Schedule III, IIIN (non-narcotic), IV, or V by prescribing a 30-day supply with up to two (2) refills, not to exceed a total of 90 days. Alternatively, an initial 90-day supply may be prescribed with prior approval from the supervising or collaborating physician and must be documented in the medical record.
2. If a prescription for a controlled substance in Schedule III, IIIN, IV, and/or V is initiated by the approved supervising, collaborating or covering physician AND the patient is well maintained on the medication, the QACSC holder may prescribe no more than 30 days with two (2) refills or ninety (90) days total. A ninety (90) day supply is permissible for reissue if established on a ninety (90) day supply from the physician.
3. The decision to continue therapy after ninety (90) days must be made in collaboration with the approved supervising or collaborating physician following the physician's evaluation of the patient and consultation with the QACSC holder. The medical decision-making, evaluation, and consultation must be documented in the medical record. If approved by the supervising or collaborating physician, the QACSC holder may issue subsequent prescriptions in compliance with this protocol.
4. The QACSC holder may have on site a more restrictive prescribing protocol which is specific to the individual practice, but it may not be more permissive than this stated protocol.
5. A QACSC holder may make a verbal order for a controlled substance in Schedules III-V under the circumstances stated in this protocol.
6. The physician must conduct an in-person evaluation of any patient receiving ongoing treatment with controlled substances at least once every twelve (12) months. This evaluation is required to ensure that all prescriptions are issued for a legitimate medical purpose and within the usual course of professional practice. At the time of the evaluation, any controlled substance prescriptions must be reissued or refilled exclusively by the physician, using their own Alabama Controlled Substances Certificate (ACSC) and Drug Enforcement Administration (DEA) registration.
7. As part of the approved registration or collaborative practice agreement, the supervising, collaborating, or covering physician shall conduct and document a quarterly quality assurance review of the QACSC holder's controlled substance prescribing practices. This review may include an evaluation of the My RX report through the Alabama Department of Public Health's Prescription Drug Monitoring Program (PDMP).



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8. A QACSC holder is not authorized to dispense controlled substances in any Schedule. For the purposes of this protocol, "dispense" is defined as ordering a controlled substance to be dispensed or distributed from a dispensary located in the facility where the QACSC holder practices to a patient for off-premises consumption or administration.
9. The QACSC holder may sign for samples of those controlled substances in Schedules III-V approved in the QACSC holder's Formulary for office use as is normal and customary for that practice specialty.
10. The prescribing of controlled substances for the purpose of weight reduction is addressed in Administrative Rule 540-X-17.

Authority: Ala. Code § 20-2-61(c); 20-2-50, et. seq. Approved for PA: November 18, 2009 Revised: March 10, 2010

Revised: August 17, 2011

Revised: March 21, 2012

Approved for CRNP/CNM: Sept. 8, 2013

Revised: April 16, 2015

Revised: July 21, 2021

Revised: August 21, 2025



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Limited Purpose Schedule II (LPSP) Prescribing Protocol

1. A Physician Assistant (PA), Certified Registered Nurse Practitioner (CRNP), or Certified Nurse Midwife (CNM) who holds an LPSP ("LPSP holder") is limited to prescribing only those specific controlled substances in Schedule II or IIN (non-narcotic) which have been requested on the LPSP application and approved by the Board of Medical Examiners.
2. **For long-acting Schedule II controlled substances, the initial dose and any subsequent escalation of the dose must be written by the physician with CRNP/ CNM/ PA writing maintenance doses only. Long-acting Schedule II medications may only be prescribed for patients in Hospice/Palliative Care; Nursing Home/ Rehabilitation Facilities; or Oncology.**
3. The quantity of an approved **short-acting** Schedule II or **any** IIN controlled substance initially prescribed by an LPSP holder shall be limited to a thirty (30) day supply. The LPSP holder may prescribe two (2) reissues. The collaborating, supervising, or covering physician must see the patient before prescribing additional reissues.
4. If a prescription for an approved Schedule II / IIN controlled substance is initiated by the approved collaborating, supervising, or covering physician, the LPSP holder may prescribe two (2) reissues . The collaborating, supervising or covering physician must see the patient before prescribing additional reissues.
5. The physician must conduct an in-person evaluation of any patient receiving ongoing treatment with controlled substances at least once every twelve (12) months. This evaluation is required to ensure that all prescriptions are issued for a legitimate medical purpose and within the usual course of professional practice. At the time of the evaluation, any controlled substance prescriptions must be reissued or refilled exclusively by the physician, using their own Alabama Controlled Substances Certificate (ACSC) and Drug Enforcement Administration (DEA) registration.
6. Any escalation of a previously prescribed Schedule II or IIN controlled substance must be through collaboration with the approved collaborating, supervising, or covering physician and documented in the medical record.
7. The LPSP holder may have on site a more restrictive prescribing protocol which is specific to the individual practice, but it may not be more permissive than this stated protocol.



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8. As part of the approved registration or collaborative practice agreement, the supervising, collaborating, or covering physician shall conduct and document a quarterly quality assurance review of the LPSP holder's controlled substance prescribing practices. This review may include an evaluation of the My RX report through the Alabama Department of Public Health's Prescription Drug Monitoring Program (PDMP).

9. An LPSP holder is not authorized to dispense controlled substances in any Schedule. For the purposes of this protocol, "dispense" is defined as ordering a controlled substance to be dispensed or distributed from a dispensary located in the facility where the LPSP holder practices to a patient for off-premises consumption or administration.

Authority: Ala. Code § 20-2-260

Approved: April 16, 2015

Revised: June 21, 201

Revised: July 21, 2021

Revised: August 21, 2025