

Request for Exemption from Reporting

I request an exemption from reporting to the Minnesota Prescription Monitoring Program (MN PMP) - *Required field

I certify that: (Select ONLY ONE) *

- I represent an Opioid Treatment Program pharmacy or facility and therefore am exempt from reporting due to certain federal regulations regarding release of data.
- I represent a licensed hospital pharmacy that distributes controlled substances (schedules II-V, butalbital, and gabapentin), as defined in [Minnesota Statutes 152.126](#), for inpatient hospital care only.
- I represent a pharmacy or facility that solely distributes drugs to individuals through the use of an automated drug distribution system in accordance with [Minnesota Statutes 151.58](#).
- I represent a pharmacy or facility that never dispenses a prescription for a controlled substance (schedules II-V, butalbital, and gabapentin) as defined in [Minnesota Statutes 152.126](#) into the State of Minnesota.

Additional Comments: (please limit to 30 characters, including spaces)

Facility Information

MN Pharmacy License Number*

DEA Number or NPI if no DEA Number

Facility Name*

Phone Number*

Facility Street Address*

City*

State*

Zip*

Email Address (for return of Exemption Letter, upon approval)

[Click here to receive a letter by MAIL ONLY](#)

Submitter Information

Your Name*

Title*

eSignature*

- *I further certify that by electronically signing and submitting this document, information is true, additionally if this pharmacy or facility begins to dispense controlled substances (schedules II-V, butalbital and gabapentin) prescriptions that qualify for reporting under the provisions of Minnesota Statutes 152.126, I will immediately notify the MN PMP and commence reporting immediately.

submit via email

print for your records or
print and fax or mail

Click to submit to the MN PMP via email (minnesota.pmp@state.mn.us)
or print and send to (651) 215-0948 or 335 Randolph Ave. Suite 230, St. Paul, MN 55102