



Louisiana Board of Pharmacy

3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700
Telephone 225.925.6496 - E-mail: info@pharmacy.la.gov



Annual Report

Fiscal Year 2025-2026

July 1, 2026

MISSION

Created by the Louisiana Legislature in 1888, the mission of the Louisiana Board of Pharmacy remains unchanged over a century later: to regulate the practice of pharmacy in such a manner as to protect the public health, safety, and welfare of the citizens of Louisiana. Toward that goal, the Louisiana Pharmacy Practice Act specifically authorizes the Board to restrict the practice of pharmacy to qualified persons as well as regulate all persons and sites that sell prescription drugs or devices or provide pharmacy care services to consumers in this state.

LICENSURE

To facilitate the restriction of practice to qualified persons, the Board has established educational, experiential, and examination requirements for the initial credentialing of pharmacists and pharmacy technicians. As authorized by the legislature, the Board has contracted its high-stakes examination procedures with professional testing services.

A. Examinations for Pharmacists

The North American Pharmacist Licensure Examination (NAPLEX) and the Multistate Pharmacy Jurisprudence Examination (MPJE) are administered by the National Association of Boards of Pharmacy (NABP). Initial licensure as a pharmacist requires completion of both tests; a pharmacist licensed elsewhere seeking transfer of licensure to Louisiana need only complete the state-specific MPJE. These examinations utilize computer-adaptive testing and are offered year-round at various testing centers across the state.

B. Examinations for Pharmacy Technicians

The Board has approved two pharmacy technician certification examinations – the Pharmacy Technician Certification Examination (PTCE) administered by the Pharmacy Technician Certification Board (PTCB) and the Examination for Certified Pharmacy Technicians (ExCPT) administered by National Healthcareer Association (NHA). Initial certification as a pharmacy technician requires completion of one of these two tests. Both examinations utilize computer-adaptive testing and are offered year-round at various testing centers across the state.

C. New Credentials

During Fiscal Year 2025-2026, the Board issued 4,806 new credentials in the Pharmacy Program and 2,844 new credentials in the Controlled Dangerous Substances (CDS) Program. Of note within the Pharmacy Program, we issued 472 new pharmacist licenses, 744 new pharmacy technician certificates, and 1,206 new pharmacy technician candidate registrations during the past fiscal year. Of note within the CDS Program, we issued new CDS licenses to 1,639 physicians, interns and residents, as well as 605 advanced practice registered nurses, and 184 dentists.

D. License Transfer (Reciprocity)

Persons already licensed as a pharmacist by any other state who wish to obtain a license in Louisiana must complete the required application form, submit to a criminal background check, and successfully complete the state-specific MPJE test. Of the 472 new

pharmacist licenses issued this past fiscal year, 304 were issued after completion of the reciprocity process.

E. Census Data

At the close of the fiscal year on June 30, 2026, a review of our credential records yielded the following census information:

Pharmacy Program – People	FY2024	FY2025	FY2026
Pharmacist	9,720	9,885	10,051
Pharmacy Intern	920	856	755
Pharmacy Technician	7,166	7,390	7,389
Pharmacy Technician Candidate	1,638	1,784	1,847

Pharmacy Permits	FY2024	FY2025	FY2026
Independent Retail	637	622	635
Retail Chain	541	528	523
Hospital	166	166	163
Hospital Satellite	13	14	16
Institutional	21	20	23
Charitable	9	8	8
Nuclear	10	10	10
Correctional	4	4	4
Telepharmacy	3	3	3
Marijuana	10	0	0
Marijuana Satellite	7	0	0
Nonresident	731	786	814

Pharmacy Equipment Permits	FY2024	FY2025	FY2026
Emergency Drug Kit (EDK)	368	378	392
Automated Medication Systems	172	177	196
Durable Medical Equipment	690	696	714

Pharmacy Special Activity	FY2024	FY2025	FY2026
CDTM Registrations	111	112	116
Special Work Permits	134	135	118
PMP Access Registrations	25,269	26,574	27,710
Pharmacy Benefit Manager	35	55	60
Compounded Sterile Prep	0	206	188

Pharmacy (PHY) Program	FY2024	FY2025	FY2026
TOTAL PHY CREDENTIALS	48,375	50,409	51,735

CDS Program	FY2024	FY2025	FY2026
Automated Medication System	77	90	92
Adv Practice Reg Nurse (APRN)	5,469	5,898	6,282
APRN via Telehealth	13	18	39
Dentist	2,324	2,378	2,485
Drug Detection K9	4	2	3
Distributor	238	255	250
Podiatrist	174	171	168
Veterinarian	1,356	1,410	1,466
Animal Euth Tech – Certified	4	3	4
Animal Euth Tech – Lead	18	18	17
Hospital	315	312	310
Hospital – Fee Exempt	5	1	2
Medical Intern or Resident	2,063	2,303	2,404
Analytical Laboratory	6	5	6
Analytical Lab – Fee Exempt	5	4	4
Physician	14,067	14,395	14,595
Physician via Telemedicine	37	36	43
Manufacturer	41	40	38
Medical Psychologist	101	108	110
Optometrist	377	377	372
Physician Assistant	1,402	1,520	1,631
Pharmacy – Fee Exempt	26	16	16
Pharmacy	1,235	1,216	1,224
Researcher	107	108	120
Registered Outsourcing Facility	23	22	23
Substance Abuse Clinic	10	11	11
Therapeutic Marijuana Pharm	16	0	0
Third Party Logistics (3-PL)	58	59	64
Withdrawal Management Clinic	7	10	8

CDS Program	FY2024	FY2025	FY2026
TOTAL CDS CREDENTIALS	29,578	30,786	31,787

All Credentials Under Mgmt.	FY2024	FY2025	FY2026
Pharmacy Program	48,375	50,409	51,735
CDS Program	29,578	30,786	31,787
TOTAL	77,953	81,195	83,522

COMPLIANCE

A. Enforcement

To control and regulate the practice of pharmacy in Louisiana, the Board employs seven pharmacist compliance officers to perform routine inspections and special investigations throughout the year in all places under the Board's jurisdiction. In addition to pharmacies, the compliance officers also inspect healthcare facilities to monitor compliance with controlled substance requirements. The compliance officers visited 1,276 pharmacies and other facilities during the year to perform routine inspections, site visits for permit changes, and other calls for assistance. The compliance and administrative officers began the fiscal year with 80 cases from the previous fiscal years, received 335 new cases, and closed 316 cases, leaving 99 cases for the next fiscal year. Of the 316 cases closed during the fiscal year: 6 of the original complaints were withdrawn, 7 resulted from closing previously imposed probationary periods, 135 were determined to be without violation, 12 cases were referred to other agencies, 57 resulted in field corrections, 13 cases were handled administratively, and 86 cases were referred to the Board's committees. Those committees took no action in 2 of their cases, issued non-disciplinary letters of non-compliance in 10 cases, and offered consent agreements for 74 cases. Of the consent agreements offered, all but six accepted the proposal; those six respondents were referred to the Board for formal administrative hearings. The decisions from the formal administrative hearings resulted in suspension and assessments in the six cases.

Compliance officers actively collaborate with a diverse array of investigative entities, including municipal police departments, parish sheriff offices, state regulatory and law enforcement agencies, as well as federal organizations such as the Drug Enforcement Administration (DEA) and the Food and Drug Administration (FDA). While an educational approach remains the preferred strategy for fostering regulatory adherence, specific circumstances necessitate formal intervention by the Board.

B. Adjudications

During the past fiscal year, the Board conducted six formal administrative hearings and levied formal disciplinary action against several credentials. A summary of all the Board's disciplinary decisions is presented here:

Sanction	Pharmacist	Pharmacy Intern	Technician	Technician Candidate	Pharmacy	DME	PBM
Letter of Warning with Assessment	1	0	0	0	1	0	0
Letter of Reprimand with Assessment	7	0	18	1	1	1	0
Probation (May or May Not Include Assessment)	7	0	0	0	2	0	0
Fine plus Costs (No Other Sanction)	2	0	0	0	4	0	4
Revocation	0	0	3	0	1	0	0
Suspension (May or May Not Include Assessment)	0	0	3	3	0	0	0

C. Disciplinary Restrictions

From time to time, the Board imposes disciplinary restrictions on various credentials, including probation, suspension, and other practice restrictions. Probationary periods are typically imposed for defined periods of time, whereas suspensions may be imposed for defined or indefinite periods of time. As of July 1, 2026, the following credentials were subject to probationary status: 31 pharmacist licenses, 5 pharmacy technician certificates, and 2 pharmacy permits. The total number of credentials currently under active suspension includes: 106 pharmacist licenses, 4 pharmacy intern registrations, 126 pharmacy technician certificates, 42 pharmacy technician candidate registrations, 3 special work permits, 13 pharmacy permits, and 9 controlled substance licenses issued to pharmacies.

D. Practitioner Recovery Program

The Board established its program in 1988 to assist practitioners to obtain treatment for their impairment, maintain their recovery, and assist their re-entry into professional practice. As of July 1, 2026, there were 23 pharmacists and 4 pharmacy technicians actively engaged in the recovery program.

BOARD ACTIVITY

A. Legislative

During the 2026 Regular Session of the Louisiana Legislature, the Board collaborated with the Louisiana State Police Crime Lab to sponsor House Bill 152, which became Act 58, effective August 1, 2026. The Act adds certain substances to the Uniform Controlled Dangerous Substances Law. Thirteen substances were added to Schedule I - Opiates.

B. Regulatory

The Board's Regulation Revision Committee is tasked with the continuous review of the Board's rules and their recommendation for revision as appropriate. The Board completed 10 regulatory projects during the fiscal year:

1. *Project 2025-03 – Pharmacy Technician Certificate Qualifications* – the Board amended Section 905 of its rules relative to pharmacy technician certificate qualifications. In response to Act 253 of the 2024 Louisiana Legislature, the amended rule removed the practice requirement placed upon a pharmacy technician applicant from another state and recognizes the exception provided by the Act regarding the examination requirement. This rule became effective on October 20, 2025.
2. *Project 2025-05 – Nonresident Pharmacy* – the Board amended Section 2301 and Section 2307 of its rules relative to Nonresident Pharmacy. The amended rule removed language in Section 2301(A) which was confusing and unnecessary when compared to the language in Section 2309. The rule change in Section 2307 reduced the minimum experience requirement for a pharmacist to qualify for a Pharmacist-in-Charge (PIC) privilege from two years of active pharmacy practice to one year to align with the PIC requirements in Chapter 11. This rule became effective on October 20, 2025.

3. *Project 2025-06 – Practitioner CDS License* – the Board amended Section 2705 of its rules relative to Practitioner CDS Licenses. The rule change is pursuant to Act 444 of the 2022 Regular Session of the Louisiana Legislature which expanded the authority to issue recommendations for medical marijuana to “authorized clinicians,” defined to include physicians, advanced practice registered nurses with prescriptive authority, and medical psychologists. The amended rule in Section 2705.C.4 permits “authorized clinicians” as identified in R.S. 40:1046(B) to apply for and be issued a CDS license to authorize the prescription or recommendation of certain substances classified in Schedule I. This rule became effective on October 20, 2025.
4. *Project 2025-07 – Prescription Drug Delivery* – the Board amended Section 2501 of its rules to address delivery of prescription drugs to patients. The amended rule adds Section 2501.A.4, requiring pharmacies to implement safeguards to protect medication integrity when delivering prescriptions to patients or their authorized agents. The rule addresses standards, notification, packaging, and temperature control for prescription drug delivery, as well as possession and control of the prescription drug whether the pharmacy uses a common or contract carrier or a pharmacy employee. The rule also requires pharmacies to replace any prescription drug that is compromised in any way during delivery. This rule became effective on March 20, 2026.
5. *Project 2025-08 – Centralized Prescription Dispensing* - the Board amended Section 1141 of its rules relative to Centralized Prescription Dispensing. The rule clarifies the existing requirements related to prescription labeling and the maintenance of audit trail information. It further establishes standards for the delivery of prepared prescriptions between a remote dispenser and an on-site pharmacy. Specifically, the rule requires that delivery be conducted in a manner that ensures the integrity of the medication by adhering to nationally recognized standards, and address packaging and temperature control. The rule also addresses possession and control of prescription drugs during delivery, whether by a common carrier, contract carrier, or pharmacy employee, and prohibit the dispensing of any prescription drug compromised in transit. When prescriptions are not dispensed to patients, the rule requires that they be returned to the remote dispenser pharmacy in situations where the remote dispenser and the on-site pharmacy operate under different ownership. Finally, the rule specifies that the centralized prescription dispensing of controlled substances must comply with all applicable provisions of federal regulations set forth in 21 CFR Parts 1300 through 1399. This rule became effective on March 20, 2026.
6. *Project 2025-09 – Prescription Monitoring Program (PMP) Record Retention* – the Board amended Section 2914 of its rules relative to PMP record retention. Pursuant to Act 159 of the 2025 Louisiana Legislature, which directed the Board to establish rulemaking standards for the retention, archiving, and destruction of PMP audit trail information, the rule amendment adds audit trail information to the records required to be maintained by the PMP. The amendment also simplifies existing regulatory language. This rule became effective on March 20, 2026.
7. *Project 2026-01 – Controlled Dangerous Substances (CDS)* – the Board amended Chapter 27 of its rules relative to Controlled Dangerous Substances (CDS). The amended rule streamlined the regulatory framework by adopting federal regulations by reference, consolidated any provisions that differ from the Code of Federal

Regulations (CFR) into Section 2713, and repealed all remaining sections containing redundant requirements. The rule also changed distributor reporting so ARCOS related reports are provided to the Board only upon request, which reduces ongoing reporting requirements for licensees. This rule became effective on May 20, 2026.

8. *Project 2026-02 – Remote Access by a Pharmacy Technician* – the Board amended Section 1145 of its rules relative to remote access to prescription drug orders, medical orders, and chart orders. The amended rule adds pharmacy technicians to those authorized under the rule. The rule includes required safeguards for records, supervision requirements for pharmacy technicians, and policies to address quality assurance standards. This rule became effective on May 20, 2026.
9. *Project 2026-03 – Community Pharmacy* – the Board repealed Chapter 13 of its rules relative to Community Pharmacy. During the Board's review of its rules in compliance with the Governor's Executive Order No. JML 25-038 and Act 102 of the 2024 Regular Session, the regulations in Chapter 13 were determined to be unnecessary because its requirements are already addressed in Chapter 11, Pharmacies. This rule became effective on May 20, 2026.
10. *Project 2026-04 – Institutional Pharmacy* – the Board amended Section 1705 and repealed Sections 1715, 1717, 1719, 1721, 1723, and 1725 of its rules relative to Institutional Pharmacy. The amendment in Section 1705 removed the restriction on the type of pharmacy permit that may be issued to a pharmacy located within an institutional facility and removed Section 1705.B and Section 1705.C regarding hospital and correctional center pharmacies which are addressed in Chapter 15 and Chapter 18 of the Board's rules. The repeal of Sections 1715, 1717, 1719, 1721, 1723, and 1725 removes regulations regarding Drug Abuse Treatment Center Pharmacies that were determined to be unnecessary following the Board's review of its rules in compliance with the Governor's Executive Order No. JML 25-038 and Act 102 of the 2024 Regular Session. Drug Abuse Treatment Center Pharmacies will adhere to the remainder of Chapter 17 and Chapter 11 of the Board's rules. This rule became effective on May 20, 2026.

C. Prescription Monitoring Program

The Board continued its operation of Louisiana's Prescription Monitoring Program (PMP). The vendor contract to operate the program is held by Bamboo Health, based in Louisville, KY. The vendor's operating platform is PMP AWA[®]. Further, through its PMP InterConnect[®] portal, the Louisiana PMP connects to prescription monitoring programs in 38 state and federal jurisdictions to allow for seamless interstate data inquiries. The number of prescribers and dispensers authorized to access the program's database continues to increase, with more than 30,000 providers using the system as of June 30, 2026. The downward trend for the dispensing of opioid medications has continued. Since the program is required to file an annual report to the legislature, we have appended that report to this one to facilitate its separation.

BOARD OFFICE

The Board currently employs 21 people on a full-time basis in a variety of professional, technical, and clerical roles. The physical and mailing address of the Board office is:

Louisiana Board of Pharmacy
3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700

The Board's website address is www.pharmacy.la.gov and general email is received at info@pharmacy.la.gov.

CONCLUSION

The Board has had an active year on several fronts, and all of these activities have contributed to the overall mission of the Board. The officers and members of the Board, as well as the entire office staff, are committed to achieving our goal of protecting the public's health, safety, and welfare through appropriate regulation of the practice of pharmacy in this state. We understand that public service is a privilege, and we endeavor to render that service honorably.

Respectfully submitted,

Joe Fontenot
Executive Director



Louisiana Board of Pharmacy

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Telephone 225.925.6496 - E-mail: info@pharmacy.la.gov



Prescription Monitoring Program (PMP)

Annual Report

Fiscal Year 2025-2026

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INTRODUCTION

Act 676 of the 2006 Louisiana Legislature authorized the development, implementation, and operation of an electronic system for the monitoring of controlled substances and other drugs of concern that are dispensed in the state or dispensed to an address within the state. The goal of the program is to improve the state's ability to identify and inhibit the diversion of controlled substances and drugs of concern in an efficient and cost-effective manner that will not impede the appropriate utilization of these drugs for legitimate medical purposes.

The Louisiana Prescription Monitoring Program (PMP) was implemented in August 2008. Pharmacies and dispensing prescribers were instructed how and when to transmit their dispensing transactions to the program vendor for assimilation into the PMP database. Prescribers, dispensers, and other persons authorized by law to access PMP information were instructed how to secure their access privileges. The web portal to the PMP database was opened to searches and requests on January 1, 2009, and the program remains fully operational.

ADVISORY COUNCIL

The enabling legislation created the PMP Advisory Council to assist the Board in the development and operation of the program. The council consists of the following members, each of whom may appoint a designee:

1. The president of the Louisiana State Board of Medical Examiners;
2. The president of the Louisiana State Board of Dentistry;
3. The president of the Louisiana State Board of Nursing;
4. The president of the Louisiana State Board of Optometry Examiners;
5. The president of the Louisiana Academy of Physician Assistants;
6. The president of the Louisiana Board of Pharmacy;
7. The superintendent of the Louisiana State Police;
8. The administrator of the United States Drug Enforcement Administration;
9. The speaker of the Louisiana House of Representatives;
10. The president of the Louisiana Senate;
11. The chairman of the House Committee on Health and Welfare;
12. The chairman of the Senate Committee on Health and Welfare;
13. The secretary of the Department of Health;
14. The president of the Louisiana State Medical Society;
15. The president of the Louisiana Dental Association;
16. The president of the Louisiana Association of Nurse Practitioners;
17. The president of the Optometry Association of Louisiana;
18. The president of the Louisiana Pharmacists Association;
19. The president of the Louisiana Independent Pharmacies Association;
20. The president of the National Association of Chain Drug Stores;
21. The president of the Louisiana Sheriffs' Association;
22. The president of the Louisiana District Attorneys Association;
23. The president of the Pharmaceutical Research and Manufacturers of America;
24. The president of the Louisiana Academy of Medical Psychologists.

During Fiscal Year 2025-2026, the council convened a quorum of members on February 11, 2026. The program staff presented a variety of statistical information including the number of prescription transactions reported to the program database as well as the number of searches and requests for information to the database by prescribers, dispensers, law enforcement, prosecutorial officials, and specialty courts. The staff also reported on the PMP InterConnect® interstate data sharing network, as well as the increased utilization by the private sector of the PMP Gateway® service, which offers interoperability of the PMP with existing practice information systems in a variety of settings, including hospitals, clinics, practitioner offices, and pharmacies.

PROGRAM HIGHLIGHTS – FY26

- **August 1, 2025** – Act 159 of the 2025 Louisiana Legislature establishes provisions for the retention, archiving, and destruction of audit trail information within the PMP.
- **March 20, 2026** – The Board of Pharmacy published a final rule amending Section 2914 relative to PMP record retention. Pursuant to Act 159 of the 2025 Louisiana Legislature, which directs the Board to establish rulemaking standards for the retention, archiving, and destruction of PMP audit trail information, the rule adds audit trail information to the records required to be maintained by the PMP. The amendment also simplifies existing regulatory language.
- **April 2, 2026** – Louisiana Department of Health (LDH) provided additional federal grant money to continue funding the Gateway® PMP Statewide Integration Project for the period October 1, 2025 through June 30, 2026.
- **June 30, 2026** – as of this date, the Louisiana PMP participates in interstate data sharing of PMP information with 38 PMPs: Alabama, Alaska, Arizona, Arkansas, Colorado, Connecticut, Delaware, D.C., Military Health System – Dept. of Defense (MHS-DOD), Florida, Georgia, Idaho, Indiana, Iowa, Kansas, Kentucky, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Montana, Nevada, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Virginia and West Virginia.

LOUISIANA PMP STATEWIDE INTEGRATION PROJECT

On January 1, 2019, the Board partnered with the Louisiana Department of Health's Office of Public Health, Bureau of Community Preparedness (LDH-OPH-BCP) and Bamboo Health to provide a statewide PMP integration option to all healthcare providers in Louisiana utilizing a service called PMP Gateway®. Gateway® offers healthcare providers an option to integrate PMP data within the provider's electronic health record (EHR) or pharmacy information system to provide a streamlined clinical workflow for providers. The integration eliminates the need for providers to log in separately to the PMP web portal; instead, the EHR automatically initiates a patient query and returns the patient's PMP information directly within the provider's EHR or pharmacy information system.

The statewide initiative has been funded through grants obtained from LDH-OPH-BCP which covered the costs from January 1, 2019 through June 30, 2026.

As of June 30, 2026, the Louisiana PMP was interoperable with 899 licensees (EHRs and pharmacy management systems) across the state. The 899 licensees represent more than 3,100 facilities in Louisiana and were responsible for 3,318,883 PMP requests in the month of June 2026.

PROGRAM METRICS

The following information provides summary data for the operational aspects of the program for Calendar Year 2025 (CY25). The following 3 tables indicate the number of PMP requests performed by user role for the calendar year. The first table presents information about the use of the information by authorized prescribers, pharmacists, and their delegates. Data for the different roles of users are presented, including the number authorized to obtain PMP access privileges, the number with active access privileges, and the number of queries to the PMP database through the PMP website (AWARxE®) and through the integration component (Gateway®). Additionally, information about the use of the information by other authorized users, including law enforcement, prosecutorial officials, specialty courts, regulatory agencies, and other roles.

Healthcare User Role	Number Eligible for Access	Number with Access	PMP User Requests AWARxE®	PMP User Requests Gateway®
Physician (MD, DO)	14,326	10,003	2,442,390	28,650,230
Nurse Practitioner (APRN)	6,139	4,915	1,234,210	3,128,883
Dentist (DDS)	2,377	1,532	20,807	9,313
Physician Assistant (PA)	1,597	1,303	258,293	469,450
Optometrist (OD)	372	158	17	1,133
Podiatrist (DPM)	167	117	8,065	0
Medical Psychologist (MP)	108	95	27,413	40,643
Medical Intern/Resident	2,049	1,503	74,827	883,559
Prescriber's Delegate	NA	3,191	694,681	NA
Pharmacist	10,091	5,746	5,351,465	15,969,182
Pharmacist's Delegate	NA	1,642	327,487	NA
Totals	37,226	30,205	10,439,655	49,152,393

Law Enforcement, Prosecutorial Officials, and Specialty Courts	Requests CY2025
DEA (Patient Requests)	151
Specialty Court	168
FBI	10
Local Law Enforcement	113
State Attorney General	5
State Police	13
HHS-OIG	10
Total	470

Regulatory Agencies; Other Roles	Requests CY2025
Board of Pharmacy PMP	1,546
Board of Medical Examiners	492
Board of Nursing	14
DEA (Registrant Requests)	596
Medical Examiner/Coroner	1,171
Louisiana Medicaid Program	143
Total	3,962

The following three tables presents information concerning the numbers of controlled substance prescriptions and drugs of concern dispensed in the state, including summary data by drug schedule and drug classes. Just over 12 million prescriptions for controlled substances and drugs of concern were dispensed in the state during Calendar Year 2025, with an average of 2.507 prescriptions per Louisiana resident.

Calendar Year (CY) 2025	Statistic
Prescriptions Reported to PMP	12,058,652
Prescriptions Per Capita	2.507
Days Supply	314,680,992

Drug Schedule	Prescription Count
Schedule 2	4,833,249
Schedule 3	1,033,958
Schedule 4	3,591,332
Schedule 5	529,613
Non-scheduled Prescriptions	2,070,500
Total	12,058,652

Drug Class	Prescription Count
Opioid	3,436,543
Benzodiazepine	2,074,669
Anxiolytic, Hypnotic, Sedative	1,143,896
Stimulants	2,612,769
Other	2,790,775
Total	12,058,652

CONCLUSION

On December 31, 2025, the program completed seventeen years of operation, marked by significant improvements and sustained functionality. Feedback from authorized users indicates that the program is a resource-efficient and cost-effective solution. Consistent trends in the data suggest measurable progress in reducing the diversion of controlled substances.

We are grateful for the continued partnership and meaningful contributions from members of the Prescription Monitoring Program Advisory Council. We also acknowledge the contributions from our administrative coordinators, Ms. Reshmi Ravindranath, Ms. Christina Howland, and Ms. Nerissa Montgomery for their assistance with the development of this report and administrative oversight of the program.

Respectfully submitted,

Joe Fontenot
Executive Director