

Quick Reference Guide – Making a Request in PMP AWARxE

1. Go to the PMP AWARxE login page (<https://newmexico.pmpaware.net/login>). If a password reset is needed, use the “Reset Password” link.
2. Once you’re logged in, select the **RxSearch** tab, then choose **Patient Request**.
3. Enter search criteria.

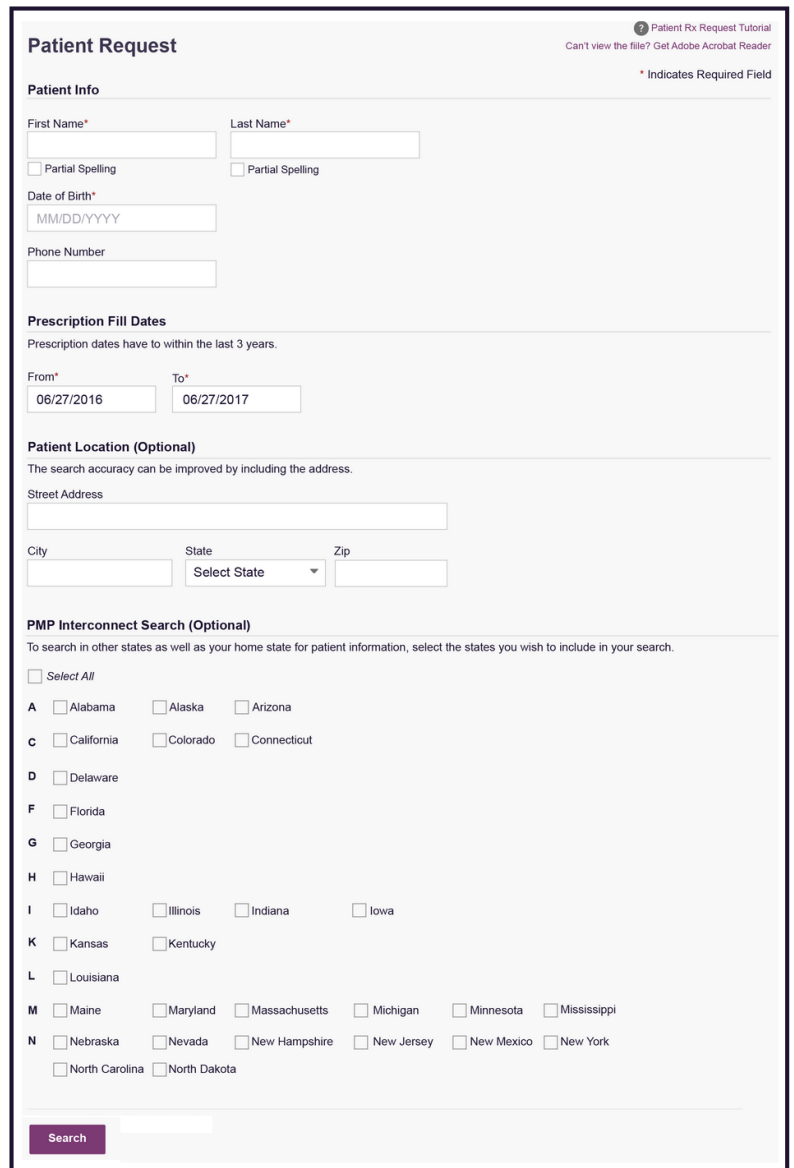
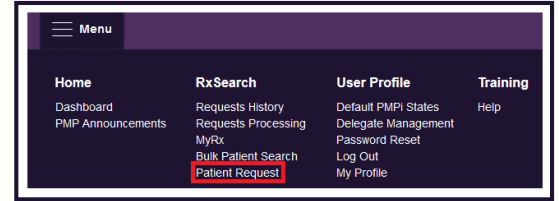
At a minimum, you must provide:

- **First name** (full or partial*)
 - **Last name** (full or partial*)
 - **Date of birth** (must be in MM/DD/YYYY format)
 - **Prescription fill dates** (must be in MM/DD/YYYY format)
4. Click **Search** at the bottom of the screen to submit your request.
 5. Matching patient history will now display. If **multiple patients** are identified, you will be presented with the option to **refine your search** by providing additional search information or you can select a **single, multiple, or all returned patient groups** to include in your patient prescription request results.
 6. Click on “Run Report”, the patient prescription results will be displayed.
 7. Print form by clicking on the PDF button or convert the form to a CSV (Microsoft Excel) file. You may retrieve your searches and the search results of any delegates by clicking on the **Requests History** tab.

Search Tips:

- ***Partial Spelling:** Using Partial Spelling can be helpful for hyphenated or commonly abbreviated names (Will vs. William). At a minimum, enter the first three characters of the patient’s first and/or last name.

- **Prescription Fill Dates** - The maximum time period for your search is 60 months.
- **PMP Interconnect Search** - allows you to search other participating state databases for the patient’s records.
 - To improve the likelihood of finding a specific patient:
- For out-of-state searches – Limit your search criteria to only the required fields.
- For in-state searches – In addition to the required fields, include additional details such as ZIP code.



Patient Request

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* Indicates Required Field

Patient Info

First Name* Last Name*

Partial Spelling Partial Spelling

Date of Birth*

Phone Number

Prescription Fill Dates

Prescription dates have to within the last 3 years.

From* To*

Patient Location (Optional)

The search accuracy can be improved by including the address.

Street Address

City State Zip

PMP Interconnect Search (Optional)

To search in other states as well as your home state for patient information, select the states you wish to include in your search.

Select All

A Alabama Alaska Arizona

c California Colorado Connecticut

D Delaware

F Florida

G Georgia

H Hawaii

I Idaho Illinois Indiana Iowa

K Kansas Kentucky

L Louisiana

M Maine Maryland Massachusetts Michigan Minnesota Mississippi

N Nebraska Nevada New Hampshire New Jersey New Mexico New York

North Carolina North Dakota