



PRESCRIPTION MONITORING PROGRAM



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*Operations Manager*

Prescription Monitoring  
Program

# Prescription Monitoring Program

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2017 BJA COAP  
CATEGORY 6  
DATA DRIVEN RESPONSES TO OPIOID ABUSE

# WA PMP 2017 BJA Grants

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## **Category 5: Harold Rogers Prescription Drug Monitoring Implementation and Enhancement \$333,489 2yr**

The Washington Department of Health will hire a PDMP Onboarding Coordinator (Management Analyst) who will perform outreach, education and provide onboarding assistance to facilities interested in integrating PDMP query to their Electronic Health Record (EHR) system. Washington's Emergency Department Information Exchange (EDIE) is a care management tool that has been largely successful in integrating PDMP data in their reports. By supporting more EHR-PDMP integration, it is expected more healthcare organizations to uptake the technology and fully adopt the Agency Medical Directors Group (AMDG) Interagency Guideline for Prescribing Opioids for Pain.

## **Category 6: Data-driven Responses to Opioid Misuse Projects**

**\$520,165 3yr**

The proposed data-driven response project will reduce opioid misuse and overdose fatalities in Washington by providing quarterly PDMP data to health care facility chief medical officers (CMOs). The data provided will be based on key PDMP indicators that will identify potential outlier prescribers compared to current guidelines from both the Washington State Agency Medical Directors Group (AMDG) Interagency Guideline for Prescribing Opioids for Pain and CDC prescribing guidelines. CMOs have the authority to engage with their prescribers in the development of pro-active prescribing Quality Improvement (QI) interventions, and encourage provider use of the PDMP for clinical decision-making.

If you build it will they come ...?

# DOH Goals for Washington PMP

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## Prevent Prescription Drug Overdose

- ✓ Give practitioners an additional tool that provides more information for making patient care decisions.
- ✓ Provide data that can help healthcare providers recognize patterns of misuse and addiction ensuring SBIRT opportunities are not missed.
- ✓ Make sure those in need of scheduled prescription drugs receive them.
- ✓ Educate the population on the dangers of misusing prescription drugs.
- ✓ Curb illicit use of prescription drugs.

PMP GoLive January 2012

# Access

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## Original Legislation Provided PMP Access for...

- ✓ Prescribers & dispensers – for patient care
- ✓ Licensing boards – for investigations
- ✓ Individuals – regarding prescriptions dispensed to them
- ✓ EDIE – Providing PMP in the ED
- ✓ DOH/Vendor – in regard to program operation
- ✓ Law Enforcement/Prosecutor – for bona fide investigations
- ✓ Medical Examiner/Coroner – cause of death determination
- ✓ HCA (Medicaid), L&I (Worker's Comp), DOC (Offenders)
- ✓ De-identified information may be provided for research and education



# Access Continued ...

## **SB 5720 (2015)**

- ✓ Staff of Medical Testing Labs – for urinalysis testing and determining prescribed medication use.

## **HB 2730 (2016)**

- ✓ Health Care facilities and clinics when using a certified EHR connected to the state's Health Information Exchange (HIE)
- ✓ Access for legend drug prescribers (no DEA #)
- ✓ Delegate Access for DOH licensed Pharmacy Staff

## **ESHB 1427 (2017)**

- ✓ EDIE - OD reports to recent prescribers
- ✓ WSHA CQIP, Health Care facilities, and provider groups of 5 or more can obtain PMP data for QI
- ✓ Federal and Tribal HC facilities using EHR-HIE



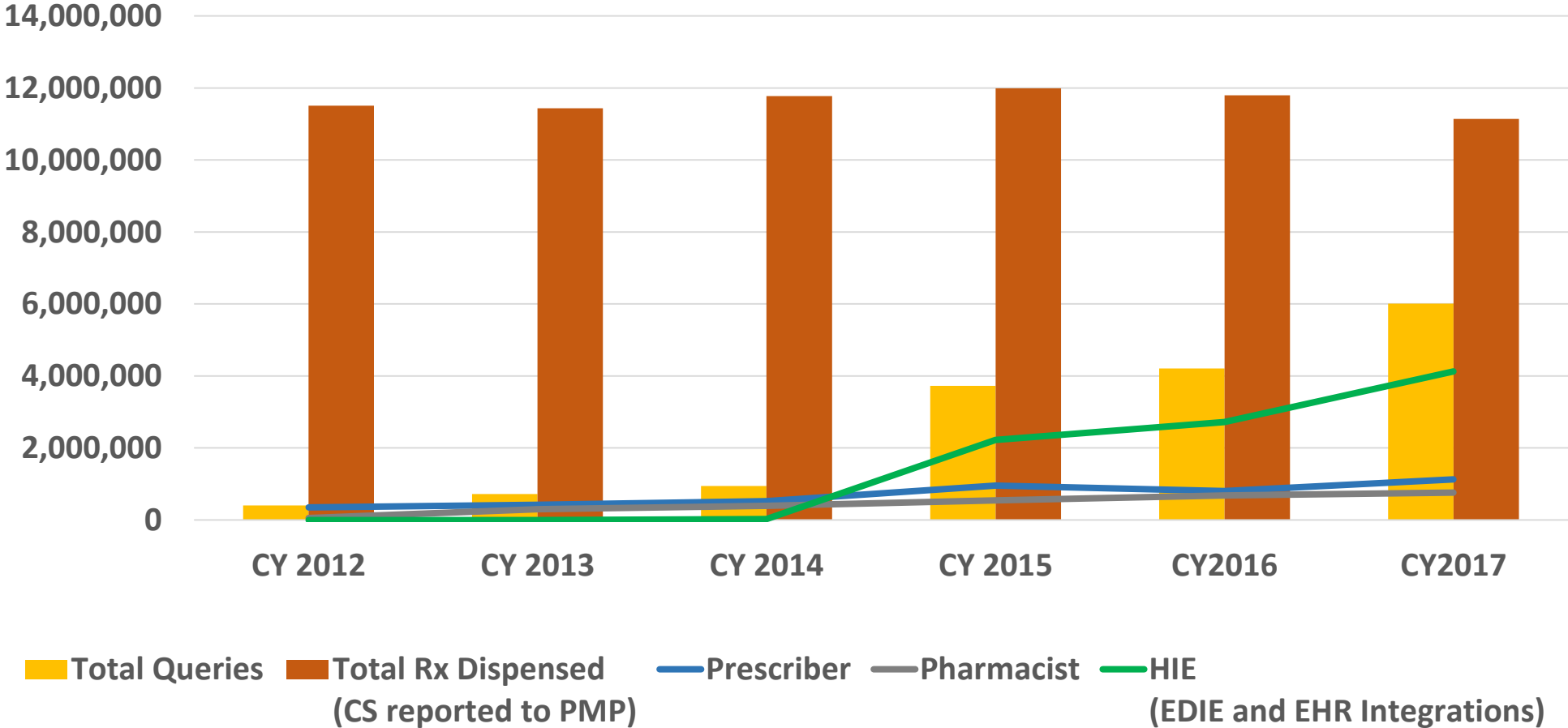
# PMP Data and Utilization

## Controlled Substance Prescriptions by Calendar Year

	2012 Rx	2013 Rx	2014 Rx	2015 Rx	2016 Rx	2017 Rx
HYDROCODONE (all)	3,043,357	2,928,052	2,855,227	2,521,688	2,371,802	2,096,731
OXYCODONE (all)	1,816,171	1,827,750	1,889,380	1,952,720	1,937,349	1,819,159
DEXTRO/METH AMPHETAMINE (all)	466,702	323,013	579,927	626,923	701,795	777,311
TRAMADOL (all)	-----	-----	308,803	730,446	718,261	680,506
ZOLPIDEM TARTRATE	898,620	838,636	790,571	761,159	712,360	649,127
LORAZEPAM	632,757	634,566	643,922	640,505	623,551	589,411
ALPRAZOLAM	644,377	641,634	644,930	625,209	609,594	565,432
CLONAZEPAM	519,642	521,425	527,935	520,615	502,644	468,441
DEX / METHYL PHENIDATE (all)	397,021	410,821	422,664	420,891	443,262	487,343
MORPHINE (all) (not w/ Naltrexone)	327,191	330,399	336,190	362,408	351,167	329,280
<b>Total Rx Dispensed (CS reported to PMP)</b>	<b>11,509,488</b>	<b>11,434,877</b>	<b>11,771,216</b>	<b>11,992,986</b>	<b>11,798,943</b>	<b>11,141,708</b>

# PMP Data and Utilization

## PMP Queries and Controlled Substance Prescriptions by Calendar Year



# PMP Data and Utilization

WA State HCP PMP Accounts				
Account Type	Active Accounts	Total Registrations All-Time	Licensed	% PMP
Pharmacists	4,314	5,811	10,481	41%
Pharmacy Delegates	74	92		
Prescribers	8,030	15,541	53,118	15%
Prescriber Delegates	3,951	5,820		
TOTAL	16,369	27,264		
		Last Updated 01/08/2018		

## WA DEA Registrants – Controlled Substance Prescribers

44,340 -- 18% 12/31/2017

# Resources

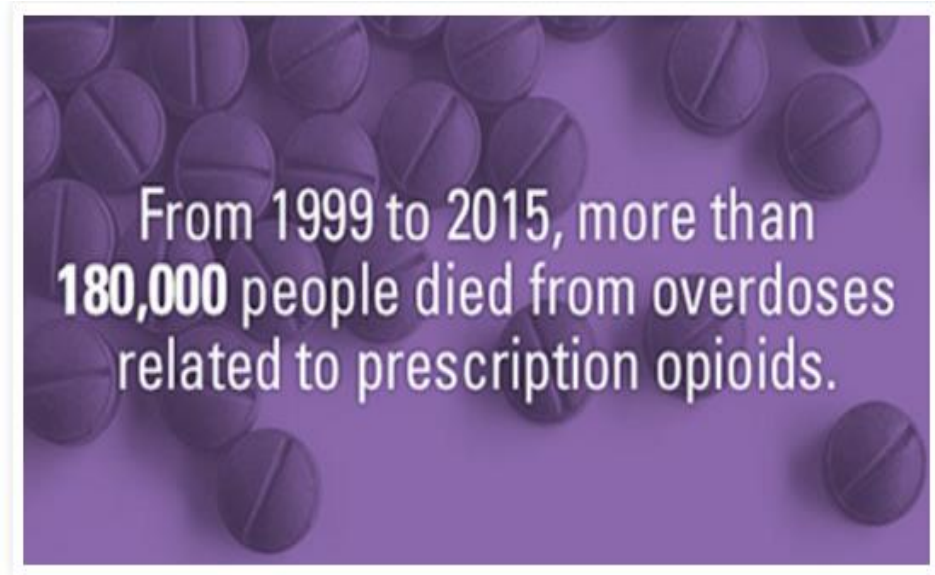
## CDC Guideline for Prescribing Opioids for Chronic Pain

<https://www.cdc.gov/drugoverdose/prescribing/guideline.html>

Improving the way opioids are prescribed through clinical practice guidelines can ensure patients have access to safer, more effective chronic pain treatment while reducing the number of people who misuse, abuse, or overdose from these drugs.

CDC developed and published the [CDC Guideline for Prescribing Opioids for Chronic Pain](#) to provide recommendations for the prescribing of opioid pain medication for patients 18 and older in primary care settings.

Recommendations focus on the use of opioids in treating chronic pain (pain lasting longer than 3 months or past the time of normal tissue healing) outside of active cancer treatment, palliative care, and end-of-life care.



## CDC Morphine Milligram Equivalents (MME) per Day Calculator

[https://www.cdc.gov/drugoverdose/pdf/calculating\\_total\\_daily\\_dose-a.pdf](https://www.cdc.gov/drugoverdose/pdf/calculating_total_daily_dose-a.pdf)

# Resources

Washington Agency Medical Directors Group (AMDG)  
[www.AgencyMedDirectors.wa.gov/Guidelines.asp](http://www.AgencyMedDirectors.wa.gov/Guidelines.asp)



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## Interagency Guidelines

Medical treatment guidelines are published as an educational tool for medical providers caring for patients of state agency programs. State agencies use the guidelines to evaluate health technologies, including devices, durable medical equipment, procedures, diagnostics, and off-label drug use.

## A New Opioid Guideline from Washington Agency Medical Directors' Group

Please note, the guideline is not a rule, and it is separate from DOH Pain Management Rules.

The new *AMDG 2015 Interagency Guideline on Prescribing Opioids for Pain* was developed in partnership with a broad advisory group of the state's academic leaders, pain experts, and clinicians in both primary care and specialty areas. The new guideline offers a balanced approach to pain management that includes recommendations for multimodal non-opioid therapies and opioids when appropriate. By using the best practices in the new guideline, clinicians can improve the care of patients with chronic pain and help save lives.

## Opioid Dosing - Quick Links

- ▶ **FREE** Online CME credits available for 2015 Interagency Guideline on Prescribing Opioids for Pain
- 📄 AMDG 2015 Interagency Guideline on Prescribing Opioids for Pain (1.75 MB PDF)
- 📄 Summary of AMDG Opioid Guideline (367 KB PDF)
- ▶ 2015 Primary Pain Care Conference
- ▶ Opioid Dose Calculator
- ▶ Assessment Tools
- ▶ Other Resources

## AMDG Opioid Dose Calculator

<http://www.agencymeddirectors.wa.gov/Calculator/DoseCalculator.htm>

# Data Driven Response

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WA

- ✓ Increased provider access to PMP
  - ✓ Registrations
  - ✓ Integrations
  - ✓ Legislations
- ✓ Available prescribing guidance
  - ✓ AMDG
  - ✓ CDC

What causes the provider to improve their prescribing patterns?

How is the provider's prescribing objectively measured and evaluated?

# Data Driven Response

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One key message we've heard from CMOs is they lack access to prescribing data, and aren't fully aware of their providers prescribing behaviors.

CMOs have the authority to engage with their prescribers in the development of pro-active prescribing Quality Improvement (QI) interventions, and encourage provider use of the PDMP for clinical decision-making.

- Development of QI interventions at the facility level helps to ensure effectiveness for the specific facility that can be closely monitored, and amended as needed.



# Data Driven Response

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Effective intervention:

1. Measureable Standard
  - ✓ Prescribing Guidelines
2. Actionable Data
  - ✓ PMP – Facility (prescriber) data
3. Touch point
  - ✓ Facility QI team/workgroup
4. Enforcer
  - ✓ Chief Medical Officer

# Data Driven Response

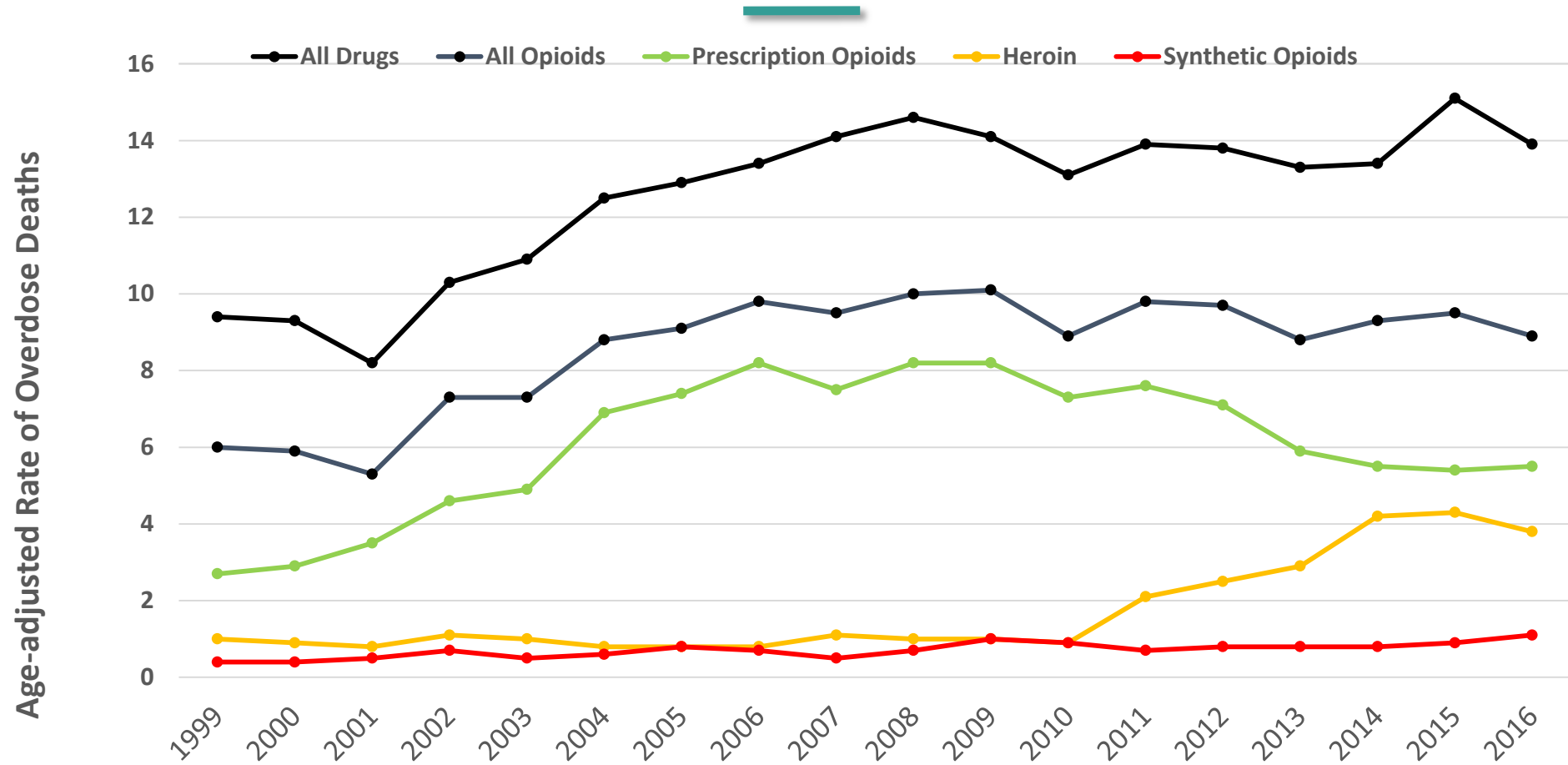
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The data provided from the PMP is to be based on key PDMP indicators that identify potential outlier prescribers compared to current guidelines from both the Washington State Agency Medical Directors Group (AMDG) Interagency Guideline for Prescribing Opioids for Pain and CDC prescribing guidelines.

Indicators are being developed with stakeholder input:

- [Bree Collaborative](#)
- WSHA
- WSMA
- HCOs
- Boards and Commissions

# Rates of Opioid-related Overdose Deaths by Type of Opioid, 1999–2016\*



Source: DOH Death Certificates (\*2016 data are preliminary)



*Washington State Department of*

*Health*