History of Prescription Drug Monitoring Programs

PDMP Training and Technical Assistance Center
Brandeis University
History of Prescription Drug Monitoring Programs

- First PDMP
- Early PDMP Characteristics
- Paper Era 1939-1989
- Court of Opinion 1977
- Electronic Era-1990 (Breaking New Ground)
- Federal Era -2003
- Next Generation-2012
Status of Prescription Drug Monitoring Programs (PDMPs)

Operational PDMPs
- Enacted PDMP legislation, but program not yet operational
- Legislation pending

Key:
- Operational PDMPs
- Enacted PDMP legislation, but program not yet operational
- Legislation pending

Map showing the status of PDMPs across the United States.
Enactments of PDMPs

- 1939-1959: 2
- 1960-1969: 2
- 1970-1979: 3
- 1980-1989: 2
- 1990-1999: 6
- 2000-2012: 35

Total: 40
Enactments of PDMPs

- 1939-1989: 18%
- 1990-2000: 12%
- 2001-2012: 70%

First 50 years of 20th Century: 18%
Last Decade of the 20th Century: 12%
Fist Decade of the 21st Century: 70%
First Prescription Monitoring Program

- New York State 1918
- Drugs
  - Cocaine
  - Morphine
  - Heroin
- State’s Role
- Doctor’s Role
- Pharmacist’s Role
  - Copy to State within 24hrs of Dispensing
Early Prescription Monitoring Programs

- **1939-43**
  - California - 1939 (Oldest Continuous Program)
  - Hawaii – 1943

- **1960-1989**
  - Illinois (1961)
  - Idaho (1967)
  - Pennsylvania (1972)
  - New York (1972)*
  - Rhode Island (1978)
  - Texas (1981)
  - Michigan (1988)
Early PDMPs Characteristics

- **Purpose of PMPs**
  - Law Enforcement
  - Curtail Diversion
- **Collected ONLY Schedule II Drugs**
- **Use of State Issued Prescriptions**
- **Frequency of Collecting Data**
  - 30 days from time of dispensing
Early PDMPs Characteristics
PAPER ERA (1939-1990)

- Paper Prescriptions
  - Triplicates
  - Duplicates
  - Individually Serialized
  - Issued by the State
  - Cost to Prescribers
- Copies sent to States
  - Data entry process
  - Printouts
Early PDMPs Information Gathering

State PDMP Issues Rx

Doctor Prescribes on Rx
Keeps One Copy

Patient Brings 2 copies of Rx to Pharmacy

Pharmacy Dispenses
Keeps Original and forwards 3rd copy to state

State PDMP enters information into database
US Supreme Court Decision
Roe vs. Whalen

• New York State PDMP Program
• Decision Supports the Ability of the State to Collect Prescription Information
• Provided Validation for the Other Existing PDMPs
• Paved the Way for Future PDMPS Nationally
US Supreme Court Decision
Roe vs. Whalen

- **US SUPREME COURT HELD**
  - Patient identification is a reasonable exercise of the State’s broad police powers

- **Police Powers**
  - From the 10th Amendment to the Constitution, which reserves to the states the rights and powers for protection of the welfare, safety, health, and even morals of the public.

- **Police Powers**
  - Includes licensing, inspection, zoning, safety regulations (which cover a lot of territory), quarantines, and working conditions as well as law enforcement.
US Supreme Court Decision
Roe vs. Whalen

• US SUPREME COURT HELD
  • Neither the immediate nor the threatened impact of the patient identification requirement on either the reputation or the independence of patients for whom Schedule II drugs are medically indicated suffices to constitute an invasion of any right protected by the Fourteenth Amendment
US Supreme Court Decision
Roe vs. Whalen

- **US SUPREME COURT HELD**
  - The possibility that a doctor or pharmacist may voluntarily reveal information on a prescription form, which existed under prior law, is unrelated to the computerized data bank.
  - There is no support in the record or in the experience of the two States that the New York program emulates for assuming that the statute's security provisions will be improperly administered.
US Supreme Court Decision
Roe vs. Whalen

US SUPREME COURT HELD

- The remote possibility that judicial supervision of the evidentiary use of particular items of stored information will not provide adequate protection against unwarranted disclosure is not a sufficient reason for invalidating the entire patient identification program.

- Though it is argued that concern about disclosure may induce patients to refuse needed medication, the 1972 statute does not deprive the public of access to Schedule II drugs, as is clear from the fact that about 100,000 prescriptions for such drugs were filed each month before the District Court's injunction was entered.
US Supreme Court Decision
Roe vs. Whalen

• US SUPREME COURT HELD
  • Appellee doctors' contention that the 1972 statute impairs their right to practice medicine free from unwarranted state interference is without merit, whether it refers to the statute's impact on their own procedures, which is no different from the impact of the prior statute, or refers to the patients' concern about disclosure that the Court has rejected
Electronic Era-Breaking New Ground

- **Oklahoma (1990)**
  - First to Require Electronic Transmission of Data
  - Reduced Operational Costs
  - Increased accuracy and timely submissions
  - Enabled other States to Consider PDMPs

- **Nevada (1995)**
  - First to Require the Reporting of More than Schedule II drugs (Schedules II-IV)
  - First to provide Unsolicited Reports to Practitioners
Present PDMPs-Federal ERA

• Harold Rogers Prescription Drug Monitoring Programs Grant (2003)
  • Funds to Plan, Implement, Enhance PDMPs
  • Program Administered by Bureau of Justice Assistance (BJA)
    • 2003-2012- Thirty Three (33) States Enacted PDMP legislation

• SAMHSA (NASPER)
• CDC
• DEA
• ONDCP
• ONC
Next Generation PDMPs

- Interstate Data Sharing
- Real Time Collection of Data
- Integration into HIEs
- PDMPs as Part of Standard of Care
- Unsolicited Reports
- Standardization of Programs
- Increase Authorized Users of PDMPs