Prescription Monitoring Programs

Alliance of States with Prescription Monitoring Programs

October 18-19, 2010

Charleston, South Carolina
The Need for Prescription Monitoring

- National Survey on Drug Use and Health
- Arcos Data
- IMS Health
- National Vital Statistics System
Prescription Monitoring Programs

• Description
  – A program that collects, manages, analyzes, and provides prescription data under the auspices of a state, territory, district, or commonwealth.

• Tool
  – Most effective tool in curtailing drug abuse and diversion while ensuring access to controlled substances to patients with legitimate medical need
Prescription Monitoring Programs

GOALS

• Access to Controlled Substances for Legitimate Medical Purposes
• Education & Information
• Public Health Initiatives
• Early Intervention & Prevention
• Investigation & Enforcement
Prescription Monitoring Programs History

• First PMP 1918 in New York State
  – 1940- 1943 - California, Hawaii
• Triplicate/Duplicate Prescription Forms
• Issued By States to Practitioners/Institutions
• 1991- Oklahoma first electronic program
States with Prescription Monitoring Programs
43 States and 1 Territory

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<tr>
<th>Alabama</th>
<th>Kentucky</th>
<th>Pennsylvania</th>
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Status of Prescription Drug Monitoring Programs (PDMPs)

Current as of May 28, 2010

Operational PDMPs (34)
Enacted PDMP legislation, but program not yet operational
Legislation pending

*Washington has temporarily suspended its PMP operations due to budgetary constraints.
PMP Administrative Agencies

• According to statute or regulation, States have determined the agencies to administer PMPs.

• As of January 1, 2010:
  – Consumer Protection Agency 1
  – Substance Abuse Agency 2
  – Law Enforcement Agency 6
  – Professional Licensing Agency 5
  – Department of Health 13
  – Pharmacy Board 17
Controlled Substances Data Collected

• PMPs Collect Controlled Substances:

  24 collect Schedules II - V
  17 collect Schedules II – IV
  1 collect Schedule II only
  2 collect Schedules II & III
Non-Controlled Substances

• 12 States monitor non-controlled substances or drugs of concern

Delaware Mississippi
Kansas Idaho
Louisiana New Jersey
Washington North Dakota
Wisconsin Ohio
Massachusetts Wyoming
Prescription Information Collected

• Patient identification:
  – Name & Address
  – DOB & Gender

• Prescriber Information (DEA number)

• Dispenser Information (DEA number)

• Drug Information, Drug Name (NDC= name, type, strength, manufacturer)

• Quantity & date dispensed
Who may be required to submit data

- **Dispensers:**
  - Pharmacies located within the state
  - Out of state pharmacies licensed to dispense into the state
  - Hospitals (Outpatient Pharmacy)
  - Practitioners who dispense out of their office
Dispenser Reporting Requirements

• **Format:**
  - ASAP
  - Batch

• **Frequency:**
  - Daily, Weekly, Bi-weekly, Monthly

• **Methods:**
# Accessing the PMP

<table>
<thead>
<tr>
<th>Method I</th>
<th>Method II</th>
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<tr>
<td>1. Registration with the PMP</td>
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<td>2. Receive Login Credentials</td>
<td>2. Receive Approval for use</td>
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<td>3. Login to Secure Web Portal</td>
<td>3. Submission of Paper/Fax Requests</td>
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<tr>
<td>4. Request Report</td>
<td>4. PMP creates report</td>
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<td>5. View Report Online</td>
<td>5. Report is mailed/faxed back</td>
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<tr>
<td>6. Print Report</td>
<td>Typical for Law Enforcement/Licensing</td>
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</tbody>
</table>
Types of PMP Reports

- Reports can be produced:
  - By Patient
  - By Prescriber
  - By Dispensing Pharmacy

- Solicited – almost all PMPs do this
- Proactive – Unsolicited – some states
- Access to which types of reports varies by state
Uses for Prescribers/Pharmacists

- Prescription history of a current or a new patient
  - Check for addiction or undertreated pain
  - Check for misuse, multiple prescribers
  - Check for drug interactions or other potential harm
  - Use reports for compliance with pain contracts

- Prescription history of transactions linked to a DEA number
  - Check for fraudulent scripts
  - Regular monthly reporting
Uses for Law Enforcement / Licensing Agencies

• Investigations of
  – Unlawful prescribing
  – Unlawful dispensing
  – Organized Forgery Rings

• Meeting Standard of Care

• Monitoring compliance of prescribers currently on probation

• Compliance monitoring for dispensers reporting information to the program
Uses for Medicaid/Workers Comp

• Used by fraud units to search for fraud and diversion.

• Used by medical staff for reviewing client cases where other insurance/cash has been used.

• Data can help Drug Utilization Review Boards.

• Data can monitor clients restricted to only one prescriber/pharmacy.

• Assist review of Preferred Drug Lists.
OTHER USE OF PMP REPORTS

• Research
  • Public Health Initiatives (Treatment, Prevention & Education

• Drug Courts
  • Assist in monitoring compliance of participants

• Medical Examiners
  • Assist in identifying cause of death in drug overdose cases

• Impaired Professional Programs
  • Assist in monitoring compliance by the health care professional
Looking Forward
• Interstate Data Sharing •

• The BJA-sponsored, IJIS Institute Prescription Monitoring Information Exchange (PMIX) Phase III Extension Project has commenced activities.

• The project’s primary purpose is to facilitate interstate sharing of patient data.
IJIS Phase III Extension Members

• State PMP Managers
  • Dave Hopkins (KY)
  • Danna Droz (OH)
  • John Gadea (CT)
  • Dan Eccher (ME)
  • Donna Jordan (AL)
  • Ralph Orr (VA)

• Organizations
  • Alliance of states with Prescription Monitoring Programs
  • Brandeis PMP Center of Excellence
  • Bureau of Justice Assistance
  • Substance Abuse and Mental Health Services Administration
  • Office of National Drug Control Policy
  • Drug Enforcement Administration
  • Indian Health Services
  • National Alliance for Model State Drug Laws
  • American Society for Automation in Pharmacy
Interstate Compact to Facilitate Data Sharing

The Council of State Governments

CSG convened a forum regarding the development of interstate compact legislation for data sharing. This will be a useful model for states establishing data sharing.
Interstate Compact Advisory Committee
Vicki Schmidt (Chair)- State Senator, (KS)

- State PMP Members
  Danna Droz (OH)
  Katherine Ellis (CA)
  Claude Shipley (FL)
  Lee Guice (KY)
  Dave Hopkins (KY)

- State Representatives
  Steve Bullock (MT)
  Attorney General
  Jeff Kruse (OR)
  State Senator

- Federal Partners
  Rebecca Rose (BJA)
  Jennifer Fan (SAMHSA)

- Organizations
  James Giglio (ASPMP)
  Scott Serich (IJIS)
  Sherry Green (NAMSDL)
  Ralph Orr (NASCSA)
  June Dahl (ASPI)
  James McMillan (NCSC)
PMP Compact

• Purpose
  – Provide a mechanism for PMPs to securely share prescription data to improve public health and safety
  – Enhance the ability of PMPs to provide an efficient and comprehensive tool
  – Provide a technology infrastructure to facilitate secure data transmission
PMP Compact

- Each state retains its authority and autonomy over its PMP
- Establish a Commission composed of PMP states
- Funding
- Technology
- Authentication
Alliance Governance Committee

Will begin developing policies that will address the organizational structure of a governance board to oversee the administration and maintenance of the PMIX System

Dave Hopkins (KY) Chair
Donna Jordan (AL)   Dan Eccher (ME)
David Wills (WY)    Mike Wissell (MI)

Represent the 4 Alliance Regions
Alliance Authentication Committee

• PURPOSE
To examine the authentication process states currently employ and develop a set of “Best Practice” guidelines for PMPs.

• COMMITTEE MEMBERS
  John Eadie Chair (COE)
  Theresa Witowski (IA)  Chris Baumgartner (ASPMP)
  Jim Giglio (ASPMP)  Cheryl Anderson (SC)
  Dave Hopkins (KY)  John Gadea (CT)
  Don Vogt (OK)  Steve Bruck (Bruck Edwards)
“Promoting Public Health & Safety”

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