COE Work in Selected Areas

• New applications of PMP data
  • PMPs and prevention
  • Pilot project with WY
• PMP effectiveness
  • Evaluation of interstate data sharing
• Best practices
  • New approach based on PMP taxonomy
PMPs and Prevention

• COE collaboration with Carnevale & Associates to develop recommendations for how PMP data can be used to support prevention
• Worked with PDMP Administrator, state prevention director, and local prevention practitioner from CA, FL, IN, ME, and MA
• SAMHSA expected to OK report’s release soon
PMPs and Prevention – selected recommendations

• Collaborate across organizational lines
• Connect similar professionals to promote best practices
• Establish and promote a research network
• Address the regional nature of prescription drug abuse
• Increase the availability of community-level data
• Coordinate PMPs with state epidemiological work groups
• Educate prevention grantees on use of PMP data
• Engage providers as part of PMP and prevention activities
• Learn from pilot projects
An example from Massachusetts: spread of OxyContin prescribing and OxyContin-related doctor shopping, 1996 - 2005

Data courtesy of the Massachusetts PMP
OxyContin Prescriptions in MA, 1996

Number of prescriptions, by quintile

- 0
- 1 - 4
- 5 - 9
- 10 - 19
- 20 - 241
OxyContin Prescriptions in MA, 1998

Number of prescriptions, by quintile

- 0
- 1 - 36
- 37 - 106
- 107 - 233
- 235 - 4114
Rates of Doctor Shopping Associated with OxyContin in MA, 1996

Rates per 100 of doctor shopping, by quintile

- 0
- 0 - 8
- 8 - 14.29
- 14.29 - 40
- 40 - 100
Rates of Doctor Shopping Associated with OxyContin in MA, 1998

Rates of doctor shopping x 100, per quintile

- 0
- 0 - 1.69
- 1.69 - 3.19
- 3.19 - 8.11
- 8.11 - 73.33
A pilot project with Wyoming

Data courtesy of the Wyoming PMP
Wyoming: Zip Codes with Population Greater than 1,000 and High Doctor Shopping Rates (Number of Prescriptions Associated with Doctor Shopping per 10,000 Prescriptions) Aug., 2009 - July, 2010

Legend
- Pop < 1000 or doctor shopping rate < 20
- Pop > 1000 and doctor shopping rate between 20 and 60
- Pop > 1000 and doctor shopping rate > 60
Work with WY: Next Steps

• Analyze doctor shopping rates in relation to Zip Code demographic data
  • In MA, white, middle class communities associated with highest rates of doctor shopping/questionable activity

• Work with Univ. of Wyoming researchers to develop PMP data into community profiles usable by local prevention practitioners

• Work with Dept. of Health to access death certificate and hospital discharge data
PMP effectiveness

- COE summary of PMP effectiveness findings
- New NFF on Nevada
Nevada PDMP: Patient PrescriptionDosage Units Before and After an Unsolicited Report

<table>
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<tr>
<th>Year</th>
<th>Pre-profile doses</th>
<th>Post-profile doses</th>
<th># patients</th>
<th>Avg % of decline</th>
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<tr>
<td>1997</td>
<td>74,000</td>
<td>40,272</td>
<td>182</td>
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<tr>
<td>1998</td>
<td>60,348</td>
<td>33,420</td>
<td>162</td>
<td>55%</td>
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<td>2001</td>
<td>94,952</td>
<td>59,942</td>
<td>559</td>
<td>37%</td>
</tr>
<tr>
<td>2002</td>
<td>104,137</td>
<td>62,143</td>
<td>652</td>
<td>40%</td>
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PMP effectiveness:
Evaluation of interstate data sharing

• Effects of interstate sharing on prescriber utilization
• Identification of interstate doctor shopping
• Effects of interstate sharing on interstate doctor shopping
• Development of multi-state/regional doctor shopping thresholds?
• Development of multi-state/regional PMP data sets?
PMP effectiveness

- Maine’s longitudinal database
  - De-identified but with same ID # across nearly six years of data
  - Examine prescription histories leading up to meeting doctor shopping threshold (= patients at risk?)
  - Prescription histories after triggering unsolicited report
  - Prescription histories of prescribers who receive unsolicited report
  - Compare PMP data with MYDAUS data at county level
PMP effectiveness

• Massachusetts data
  • Track prescription histories for individuals on whom unsolicited report is sent, and individuals with similar prescription patterns on whom no report is sent
  • Study overlap in doctor-shopping patients among prescribers with relatively high proportions of doctor shoppers in their practices (patient-prescriber network)
    • Effects on these prescribers, and their doctor-shopping patients, of unsolicited reports (threshold effect on network?)
Best practices

• Initial approach: identify best practices that apply to all PMPs
  • E.g., authentication of end-users
  • Incorporated into PMP Model Act
  • Working on:
    • Ways to increase provider utilization of PMP
    • Prescriber education about how to prescribe controlled substances, how to use PMP data
Best practices

• New approach: develop groupings of similar PMPs and identify best practices within each group
  • Optimal parameters for unsolicited reporting
  • Benchmarks for performance measures
  • More tailored technical assistance
  • Possible examination of PMP efficiency (outputs relative to inputs)
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