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PDMP Administrators' Town Hall: SUPPORT Act Discussion

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The PDMP must facilitate access by covered providers to, at a minimum, the following information with respect to a covered individual, in as close to real-time as possible:

- Information regarding the prescription drug history of a covered individual with respect to controlled substances.
- The number and type of controlled substances prescribed to and filled for the covered individual during at least the most recent 12-month period (data on “prescribed” and “filled” medication may be two data sources).
- The name, location, and contact information (or other identifying number selected by the state, such as a national provider identifier issued by the CMS National Plan and Provider Enumeration System) of each covered provider who prescribed a controlled substance to the covered individual during at least the most recent 12-month period.

The PDMP must also facilitate the integration of the information described above into the workflow of a covered provider, which may include the provider’s electronic prescribing system for controlled substances.

Reports submitted starting in 2023 must include the following information for a 12-month period:

- % of covered providers who checked the prescription drug history of a covered individual
- Aggregate trends with respect to prescribing controlled substances such as—
 - the quantity of daily morphine milligram equivalents prescribed for controlled substances;
 - the number and quantity of daily morphine milligram equivalents prescribed for controlled substances per covered individual; and
 - the types of controlled substances prescribed, including the dates of such prescriptions, the supplies authorized (including the duration of such supplies), and the period of validity of such prescriptions, in different populations (such as individuals who are elderly, individuals with disabilities, and individuals who are enrolled in both Medicaid and Medicare).
- An accounting of any data or privacy breach of a qualified PDMP described in section 1944(b), the number of covered individuals impacted by each such breach, and a description of the steps the state has taken to address each such breach, including, to the extent required by state or Federal law or otherwise determined appropriate by the state, alerting any such impacted individual and law enforcement of the breach.

What transaction data, reports, and performance information should the PDMP be able to produce?

- Concurrent Use of Opioids and Benzodiazepines: % of individuals ≥ 18 years with concurrent use of prescription opioids and benzodiazepines for ≥ 30 cumulative days (excludes patients in hospice care and those with cancer).
- Use of Opioids at High Dosage in Persons Without Cancer: % of individuals ≥ 18 years of age who received prescriptions for opioids with an average daily dosage of ≥ 90 MME over a period of ≥ 90 days (excludes patients in hospice care and those with cancer).
- Use of Opioids from Multiple Providers in Persons Without Cancer: % of individuals ≥ 18 years of age who received prescriptions for opioids from ≥ 4 prescribers and ≥ 4 pharmacies within ≤ 180 days (excludes patients in hospice care and those with cancer).
- Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer: % of individuals ≥ 18 years of age who received prescriptions for opioids with an average daily dosage of ≥ 90 MME over a period of ≥ 90 days AND who received prescriptions for opioids from ≥ 4 prescribers AND ≥ 4 pharmacies within ≤ 180 days (excludes patients in hospice care and those with cancer).
- The rate of events among individuals receiving prescription opioid medications captured via electronic case reporting that have evidence of opioid-related hospitalizations, emergency department visits, and/or urgent care visits, expressed as number of unique events per month.



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