



Illinois Prescription Monitoring Program

OTP Data Implementation

Clinical Tool For Safe Prescribing

The Illinois Prescription Monitoring Program (ILPMP) is a support tool for healthcare providers, offering insight into patients controlled-substance prescription history.

12-month controlled substance prescription history can help identify concerns

- Drug interactions
- Duplicate therapy
- Assist with care coordination
- Identify need for early intervention

Data is private and confidential

- HIPAA
- 42 CFR Part 2

SAMHSA Ruling – Amendments 42 CFR Part 2 for PDMPS

Section 2.36 Disclosures to prescription drug monitoring programs

New 2.36

A part 2 program or other lawful holder is permitted to report any SUD medication prescribed or dispensed by the part 2 program to the applicable state prescription drug monitoring program if required by applicable state law. A part 2 program or other lawful holder must obtain patient consent to a disclosure of records to a prescription drug monitoring program under 2.31 prior to reporting of such information.

Illinois General Assembly passes Public Act 102-0527

Effective 1.1.2023

- Opioid Treatment Programs (OTPs) Reporting to ILPMP with patient consent
- Provides that OTPs shall document an attempt to obtain patient consent
- OTPs shall not transmit information without patient consent
- Provides that treatment of a patient may NOT be conditioned upon their consent to reporting

Overview of Illinois Controlled Substance Act

Excerpt from Illinois compiled statute 720 ILCS 570/316, subsection 3.5 (as written) --

“(3.5) The requirements of paragraphs (1), (2), and (3) of this subsection also apply to opioid treatment programs that are licensed or certified by the Department of Human Services' Division of Substance Use Prevention and Recovery and are authorized by the federal Drug Enforcement Administration to prescribe Schedule II, III, IV, or V controlled substances for the treatment of opioid use disorders.

Opioid treatment programs **shall attempt to obtain written patient consent, shall document attempts to obtain the written consent, and shall not transmit information without patient consent.**

Documentation obtained under this paragraph shall not be utilized for law enforcement purposes, as proscribed under 42 CFR 2, as amended by 42 U.S.C. 290dd-2.

Treatment of a patient shall not be conditioned upon his or her written consent.”



Importance of Accessing OTP Data



Allows healthcare providers access to a patients complete controlled substance prescription history including methadone/buprenorphine



Prevents the need for unnecessary dose reductions of SUD medications



Helps prevent potential drug interactions associated with these medications

The Importance of sharing Methadone Dosage with the PMP

- Consent helps healthcare providers and pharmacists to work together to reduce the risk of negative medication interactions
- Methadone is primarily metabolized in the liver by the cytochrome P450 (CYP) enzymes – known for drug/drug interactions that can inhibit or induce medication metabolism – requiring dosing adjustments as well as additional considerations for prescribed medication

| Drug | Effect | Mechanism of action | Clinical importance |
|--|--|--|--|
| Fluconazole ⁴⁸ | Increased methadone levels; AUC increases by 35% | Inhibition by fluconazole of cytochrome P450 3A4-mediated methadone metabolism | Respiratory depression has occurred |
| Paroxetine | Increased methadone levels | Paroxetine is a mild inhibitor of CYP1A2, CYP2C9, CYP2C19, and CYP3A4 | |
| St John's Wort ⁴⁹ | Decreased methadone levels | CYP3A4 induction | Has precipitated withdrawal |
| Voriconazole ⁵⁰ | Increased methadone levels | Inhibits CYP3A4-mediated metabolism | None reported |
| Ciprofloxacin ⁵¹ | Increased methadone levels | Inhibits CYP3A4-mediated metabolism | Somnolence reported |
| Retrovirals ⁵² (except zidovudine) | Decreased methadone levels | CYP3A4 induction; P-glycoprotein? | |
| Carbamazepine ⁷ | Decreased methadone levels | CYP3A4 induction | |
| Desipramine ⁷ | Increased desipramine levels | Unknown | Increased adverse effects from desipramine |
| Azithromycin | Increased methadone levels | Inhibits CYP3A4-mediated metabolism | |
| Fluvoxamine ⁵³ | Increased methadone levels | Inhibits CYP3A4-mediated metabolism | |
| Fosphenytoin ⁵⁴ | Decreased methadone levels | Decreased methadone trough and AUC | Withdrawal symptom |
| Desipramine ⁷ | Increased desipramine levels | Mechanism unknown | |
| Didanosine ⁵² | Decreased didanosine levels | Mechanism unknown | |
| MAO inhibitors ¹¹ | Methadone is a serotonin uptake inhibitor | | Serotonin syndrome |
| Ketoconazole | Increased serum methadone levels | Inhibition of CYP3A4 | |
| Nevirapine ^{52,55} | | CYP inducer | |
| Efavirenz ⁵² | | CYP inducer | |

OTP Consent Form Overview

Medication Assisted Recovery with Methadone

Sharing Your Methadone Dosage Information with the Prescription Monitoring Program (PMP) and other Healthcare Provider

To receive the safest and best care while you are receiving Medication Assisted Recovery with methadone, your consent is needed to share your information with the PMP and other healthcare providers.

Why is this important? Without your voluntary consent, another healthcare provider would not have your dose information and may stop or reduce your methadone dose. Your consent to share your methadone dosage also helps healthcare providers work together and reduce the risk of negative medication interactions; a doctor or pharmacist who isn't part of your opioid treatment program (OTP) will not know what medications are safe to prescribe for your treatment.



Why would this happen? You may need to visit the emergency room (ER) due to an accident, because you need emergency health care (e.g., asthma attack, COVID-19), or you may need to be hospitalized. In these cases, you may not be able to tell your healthcare provider your methadone dosage.



Other Benefits: When you consent and allow your OTP to disclose your methadone dosage to the PMP and other healthcare providers treating you for other conditions such as diabetes or high blood pressure, you improve the quality of your medical care and decrease the risk of a negative medication interactions and even a drug overdose.

Additional Confidentiality Protections: Your consent to share your methadone dosage with the PMP and healthcare providers does not mean it can be shared with others without your consent. Information related to your opioid use disorder and treatment has additional privacy and confidentiality protections. In addition to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), your information is also protected by federal regulation 42 CFR Part 2. These laws protect your healthcare records including your opioid use disorder treatment records. Federal regulation requires patient consent for sharing most information about treatment, payment, or other healthcare operations.

And your information cannot be disclosed to anyone that is not considered a Part 2 program "lawful holder" and any information that is shared legally is still protected by 42 CFR Part 2 from being shared with others. Information may only be released for legal or law enforcement purposes through a much stricter Part 2-compliant court order, usually only used in cases of extremely serious crimes.

Without your consent, your information cannot be shared with your family, landlord, or employer. You may choose to provide general consent to those who assist you with treatment or you can name who receives your information. You can also cancel your consent for release of your treatment information at any time although information may have already been shared with consent before you cancel.

How To Give Consent: Speak to your OTP, a signed consent form is all that is needed to share your methadone dosage information with the PMP and other healthcare providers.

Educate patients on importance of patient consent

- Present patient with informational brochure which can be found online at [Medication Assisted Recovery with Methadone \(state.il.us\)](https://www.state.il.us/medication-assisted-recovery)
- Explain in detail benefits of obtaining consent
 - Care coordination
 - Medication Reconciliation
 - Checking for Drug Interactions

Consent for Participation in Illinois Prescription Drug Monitoring Program

I, _____ SSN/ID# _____ DOB _____
(Patient Name)

authorize _____ Opioid Treatment Program disclose my:
(Treatment Facility Name)

Photograph, name, alias, gender, DOB, mother's maiden name, admit date, current medication, and date of discharge/last treatment date to the Illinois Prescription Monitoring Program (PMP) and to clinics participating in the PMP which have a treating provider relationship with you. A current list of clinics which participate in the PMP is available at www.ilpmp.org. You (or other individual authorized to sign on your behalf), confirm your understanding that, upon request and consistent with applicable law, you must be provided a list of entities to which your information has been disclosed pursuant to this consent.

The information will be shared via secured electronic transmission. The information will not be redisclosed and shall not be used by any law enforcement agency or for any law enforcement activity.

The purpose for such disclosure is to prevent dual enrollment in Medication Assisted Recovery and the administration or prescribing of contraindicated or interacting medications. This Consent for Participation is in compliance with Federal Confidentiality of Substance Use Disorder Patient Records rules, set forth at 42 CFR Part 2 (Part 2).

1. I _____ (Patient Initials) understand my records are protected under Part 2 and may not be disclosed without my express written consent, unless otherwise provided for in the regulations. I also understand I may revoke this consent at any time except to the extent that action has been taken in reliance upon it.
2. I _____ (Patient Initials) understand the above information will be maintained in the PMP securely and shall not be shared except for purposes of preventing dual enrollment in Medication Assisted Recovery and to prevent the administration or prescribing of contraindicated medications.
3. I _____ (Patient Initials) understand when any clinic which participates in the PMP requests information from the PMP and I am found to be enrolled in another clinic, the PMP will disclose the name, address, and telephone number of the clinic in which I am already enrolled to the requesting clinic.
4. I _____ (Patient Initials) understand this consent form is valid until the end of the treatment.
5. I _____ (Patient Initials) understand I may view and request a copy of the information described above and/ or in this form.
6. I _____ (Patient Initials) understand the clinic named above receives no compensation for using or disclosing health information from or to the PMP.

Patient Notification:

This clinic is required to notify each patient prior to admission that it cannot provide methadone, buprenorphine, or naltrexone containing product to a patient who is simultaneously receiving methadone, buprenorphine, or naltrexone containing product from another treatment clinic, unless the medication is being provided in response to an emergency or disaster that forced the closure of the patient's regular home clinic.

Patient Statement:

I am not receiving medication and/or treatment from another Medication Assisted Recovery facility, its satellite, or an Opioid Treatment Program.

I understand I will NOT be denied treatment if I refuse to consent to a disclosure for purposes of the PMP.

Patient Signature

Date

Staff Signature

Date

Consent Form Components

- Demographics
- Consent options
- Important notes to highlight with patient
- Patient and Staff signature and dates

OTP Staff Requirements


- Attempt to obtain patient consent
- Document attempt in patient chart
- Notify SUPR if consent is revoked



Website Data Display

Consent Disclaimer

Patient Information





 **Clark Kent**
Age: 64 years and 3 months
D.O.B: 6/11/1959
Address: 123 Anywhere Lane
CHICAGO, IL. 60660.

Notifications/ Summary


| | |
|----------------------|---|
| Total Prescriptions: | 2 |
| Total Doctors: | 1 |
| Total Pharmacies: | 1 |

Notifications/ Summary

| | |
|---|----|
| Above 90 MMEs Per Day: | No |
| Overlapping Opioid Prescriptions: | No |
| Overlapping Benzo and Opioid Prescriptions: | No |
| Long-Acting Opioid/Opioid Naive: | No |

Refer to Helpline



Consent [X]

This patient is enrolled in an Opioid Treatment Program (OTP). Information contained in the OTP data tab has additional privacy and confidentiality protections under Federal Regulation 42 CFR Part 2. The information in this section cannot be printed, shared, screen captured (in any format) or saved under any circumstances. Please click I agree to verify that you are involved in the direct care of this patient.

Drug Categories: Benzodiazepines Opioids Stimulants Other

Prescriber's View

Patient Information



Clark Kent

Age: 64 years and 3 months

D.O.B: 6/11/1959

Address: 123 Main St.
CHICAGO, IL. 60660.

Notifications/ Summary

Total Prescriptions: 2

Total Doctors: 1

Total Pharmacies: 1

Notifications/ Summary

Above 90 MMEs Per Day: **No**

Overlapping Opioid Prescriptions: **No**

Overlapping Benzo and Opioid Prescriptions: **No**

Long-Acting Opioid/Opioid Naive: **No**



All Prescriptions



Mapping Prescriptions



OTP Data



Refer to
Helpline

Opioid Treatment Program (OTP)

This patient is enrolled in an Opioid Treatment Program (OTP). Information contained in the OTP data tab has additional privacy and confidentiality protections under Federal Regulation 42 CFR Part 2. The information in this section cannot be printed, shared, screen captured (in any format) or saved under any circumstances.

| Week Begin Date | Clinic | Medication | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|-----------------|--|-------------------|-------|-------|-------|-------|-------|-------|-------|
| 07/24/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 75mg | 75mg | 75mg | 75mg | 0mg | 0mg | 0mg |
| 07/17/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 75mg | 75mg | 75mg | 75mg | 0mg | 75mg | 75mg |
| 07/10/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg |
| 07/03/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg |
| 06/26/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg |

Detailed Clinic Information

Patient Information

 **Clark Kent**
 Age: 64 years and 3 months
 D.O.B: 6/11/1959
 Address: 123 Anywhere Lane
 CHICAGO, IL. 60660.

Notifications/ Summary

Total Prescriptions: 2
Total Doctors: 1
Total Pharmacies: 1

Notifications/ Summary

Above 90 MMEs Per Day: No
Overlapping Opioid Prescriptions: No
Overlapping Benzo and Opioid Prescriptions: No
Long-Acting Opioid/Opioid Naive: No

Clinic Information X

Name: FAMILY GUIDANCE CENTERS, INC

Address: 310 W. Chicago AV Chicago, IL 60654

Phone: 3129436545

OTP Data

| Week Begin Date | Clinic | Medication | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|-----------------|--|-------------------|-------|-------|-------|-------|-------|-------|-------|
| 12/31/1969 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg |
| 12/31/1969 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg | 75mg |

Medication Dosage location Take Home vs. Onsite

| Week Begin Date | Clinic | Medication | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|-----------------|--|-------------------|-------|-----------------|--------|--------|--------|--------|--------|
| 12/04/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 115mg | 115mg* | 115mg* | 115mg* | 115mg* | 115mg* | 115mg* |
| 11/27/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 115mg | 115mg Take Home | 115mg* | 115mg* | 115mg* | 115mg* | 115mg* |
| 11/20/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 0mg | 0mg | 115mg | 115mg* | 115mg* | 115mg* | 115mg* |
| 11/13/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 0mg | 0mg | 115mg | 115mg* | 115mg* | 115mg* | 115mg* |
| 10/30/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 0mg | 115mg | 115mg* | 115mg* | 115mg* | 115mg* | 115mg* |
| 10/23/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 115mg | 115mg* | 115mg* | 115mg* | 115mg* | 115mg* | 115mg* |
| 10/16/2023 | FAMILY GUIDANCE CENTERS, INC CHICAGO AVE | Methadone, Liquid | 110mg | 110mg* | 110mg* | 110mg* | 110mg* | 110mg* | 110mg* |

Integration Data Display

OTP Data Display Through Integrated Display

IL PMPnow integrates Illinois Prescription Monitoring Program information into a healthcare organization's Electronic Health Record (EHR), Electronic Medical Record (EMR), Pharmacy Management system, or Office of the National Coordinator (ONC) Certified Health IT module. Under Illinois law, all locations that provide health care services and have an EHR, EMR, Pharmacy Management system, or ONC Certified Health IT module are required to integrate with IL PMPnow.

- Integrated Data Display feature went live April 16, 2024

IL PMPnow Consent Disclaimer

Consent ✕

This patient is enrolled in an Opioid Treatment Program (OTP). Information contained in the OTP data tab has additional privacy and confidentiality protections under Federal Regulation 42 CFR Part 2. The information in this section cannot be printed, shared, screen captured (in any format) or saved under any circumstances. Please click I agree to verify that you are involved in the direct care of this patient.

I agree Decline

IL PMPnow Prescriber's View

Select all

De-select all

Update

DALE DOBACK
12-26-1966, M
1215 WEST APPLEWOOD CT
ROCKFORD IL
61101
Patient Id: 1

Update

Patient Prescription Analysis IL

My PMP

Thu Mar 07 2024 15:54:39 GMT-0500 (Eastern Standard Time)

DALE DOBACK

Age: 57 years 2 months
Gender: M
Date of Birth: 12-26-1966
Address: 1215 WEST APPLEWOOD...
[Refer to Helpline](#)

Last 12 months prescriptions

| BENZODIAZEPINES | STIMULANTS | OPIOIDS | MUSCLE RELAXANTS |
|-----------------|------------|---------|------------------|
| 2 | 0 | 18 | 0 |

| PRESCRIPTIONS | PRESCRIBERS | PHARMACIES |
|---------------|-------------|------------|
| 22 | 2 | 1 |

| MEDICAL CANNABIS | NALOXONE | NALOXONE ADMINISTRATION- DISCHARGE DATA |
|------------------|----------|---|
| 0 | 0 | 0 |

MME Details** [MME Trend](#)

0

Total MME for Active Prescriptions
Average MME for the last 12 months: 657.49

Prescriptions

Prescribers

Pharmacies

Naloxone Administration- EMS Data

Opioid Treatment Program

Medical Cannabis Program

Show Only Active Prescriptions

Drug Categories: Opioids Benzodiazepines Others

Show entries Search:

| PRESCRIPTION # | FILLED | WRITTEN | DRUG LABEL | QTY | DAYS | STRENGTH | MME** | PRESCRIBER | PHARMACY | REFILL NO. | REFILLS | STATE | PATIENT ID |
|----------------|------------|------------|--|-------|------|------------------------|-------|---------------------------------|---------------------------------|------------|---------|-------|------------|
| 86660 | 10/19/2023 | 07/19/2023 | ACETAMINOPHEN 325 MG / oxyCODONE HYDROCHLORIDE 10 MG ORAL TABLET | 120.0 | 90 | 10.0 MG/325.0 MG | 20 | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 4876359 | 10/15/2023 | 08/30/2023 | Morphine Sulfate | 120.0 | 90 | 2 MG/ML | 2.67 | Logicoy Provider Md - XW1239448 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 91108 | 10/15/2023 | 10/15/2023 | HYDROcodone BITARTRATE-ACETAMINOPHE | 120.0 | 30 | 33.3 MG/ML / 0.5 MG/ML | 2 | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 4876352 | 10/14/2023 | 01/10/2023 | HYDROcodone BITARTRATE-ACETAMINOPHE | 120.0 | 30 | 33.3 MG/ML / 0.5 MG/ML | 2 | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 4876353 | 10/14/2023 | 10/15/2023 | HYDROcodone BITARTRATE-ACETAMINOPHE | 120.0 | 30 | 33.3 MG/ML / 0.5 MG/ML | 2 | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 4876351 | 10/10/2023 | 08/30/2023 | Morphine Sulfate | 120.0 | 90 | 2 MG/ML | 2.67 | Logicoy Provider Md - XW1239448 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 99756 | 10/10/2023 | 01/10/2023 | fentaNYL | 120.0 | 30 | 0.075 MG/HR | 2160 | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 86753 | 10/10/2023 | 07/20/2023 | oxyCODONE HCL | 120.0 | 90 | 5 MG | 10 | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 85320 | 10/10/2023 | 06/10/2023 | | 120.0 | 90 | | NA | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |
| 90852 | 10/01/2023 | 10/01/2023 | HYDROcodone BITARTRATE-ACETAMINOPHE | 120.0 | 30 | 33.3 MG/ML / 0.5 MG/ML | 2 | Logicoy Provider Md - ZZ1234567 | Ye Ole Pill Shoppe, Chicago, IL | NA | 0 | IL | 1 |

Showing 1 to 10 of 22 entries First Previous 1 2 3 Next Last

ANALYTICS

IL PMPnow Detailed Clinic Information

Select all
 De-select all

Update

DALE DOBACK
 12-26-1966, M
 1215 WEST APPLEWOOD CT
 ROCKFORD IL
 61101
 Patient Id: 1

Update

PMPnow Patient Prescription Analysis IL My PMP

Thu Mar 07 2024 15:54:39 GMT-0500 (Eastern Standard Time)

DALE DOBACK

Age: 57 years 2 months
 Gender: M
 Date of Birth: 12-26-1966
 Address: 1215 WEST APPLEWOOD...

[Refer to Helpline](#)

Last 12 months prescriptions

| BENZODIAZEPINES | STIMULANTS | OPIOIDS | MUSCLE RELAXANTS |
|------------------|------------|---|------------------|
| 2 | 0 | 18 | 0 |
| PRESCRIPTIONS | | PRESCRIBERS | PHARMACIES |
| 22 | | 2 | 1 |
| MEDICAL CANNABIS | NALOXONE | NALOXONE ADMINISTRATION- DISCHARGE DATA | |
| 0 | 0 | 0 | |

MME Details** [MME Trend](#)

0

Total MME for Active Prescriptions
 Average MME for the last 12 months: 657.49

Prescriptions
Prescribers
Pharmacies
Naloxone Administration- EMS Data
Opioid Treatment Program
Medical Cannabis Program

This patient is enrolled in an Opioid Treatment Program (OTP). Information contained in the OTP data tab has additional privacy and confidentiality protections under Federal Regulation 42 CFR Part 2. The information in this section cannot be printed, shared, screen captured (in any format) or saved under any circumstances.

| WEEK BEGIN DATE | 310 W. Chicago AV Chicago, IL 60654 Phone: 3129436545 | MEDICATION | DAY 1 | DAY 2 | DAY 3 | DAY 4 | DAY 5 | DAY 6 | DAY 7 |
|-----------------|---|-------------------|--------|--------|--------|--------|--------|--------|---------|
| 07/03/2023 | FAMILY GUIDANCE CENTERS, INC | Methadone, Liquid | 55mg * | 55mg * | 55mg * | 55mg * | 55mg * | 55mg * | 55mg * |
| 06/20/2023 | FAMILY GUIDANCE CENTERS, INC | Buprenorphine | 24mg * | 30mg | 35mg | 40mg | 45mg | 50mg * | 100mg * |

* Per CDC guidance, the conversion factors and associated daily morphine milligram equivalents for drugs prescribed as part of medication-assisted treatment for opioid use disorder should not be used to benchmark against dosage thresholds meant for opioids prescribed for pain.

** Morphine Equivalent Daily Doses.

Report Disclaimers:
 The Report is based on the search criteria and the data provided by the dispensing entities. For more information about any prescription, please contact the dispenser or the prescriber. This Report contains confidential information, including patient identifiers, and is not a public record. The information should not be provided to any person or entity except as authorized in chapter 70.225 RCW.

ANALYTICS

IL PMPnow Medication Dosage Location Take Home vs. Onsite

DALE DOBACK
 Age: 57 years 2 months
 Gender: M
 Date of Birth: 12-26-1966
 Address: 1215 WEST APPLEWOOD...
 Refer to Helpline

Last 12 months prescriptions

| | | | |
|------------------|------------|---|------------------|
| BENZODIAZEPINES | STIMULANTS | OPIOIDS | MUSCLE RELAXANTS |
| 2 | 0 | 18 | 0 |
| PRESCRIPTIONS | | PRESCRIBERS | PHARMACIES |
| 22 | | 2 | 1 |
| MEDICAL CANNABIS | NALOXONE | NALOXONE ADMINISTRATION- DISCHARGE DATA | |
| 0 | 0 | 0 | |

MME** Details [MME Trend](#)

0
 Total MME for Active Prescriptions
 Average MME for the last 12 months: 657.49

Prescriptions

Prescribers

Pharmacies

Naloxone Administration- EMS Data

Opioid Treatment Program

Medical Cannabis Program

This patient is enrolled in an Opioid Treatment Program (OTP). Information contained in the OTP data tab has additional privacy and confidentiality protections under Federal Regulation 42 CFR Part 2. The information in this section cannot be printed, shared, screen captured (in any format) or saved under any circumstances.

| WEEK BEGIN DATE | CLINIC | MEDICATION | DAY 1 | Take Home | DAY 3 | DAY 4 | DAY 5 | DAY 6 | DAY 7 |
|-----------------|------------------------------|-------------------|--------|-----------|--------|--------|--------|--------|---------|
| 07/03/2023 | FAMILY GUIDANCE CENTERS, INC | Methadone, Liquid | 55mg * | 55mg * | 55mg * | 55mg * | 55mg * | 55mg * | 55mg * |
| 06/20/2023 | FAMILY GUIDANCE CENTERS, INC | Buprenorphine | 24mg * | 30mg | 35mg | 40mg | 45mg | 50mg * | 100mg * |

* Per CDC guidance, the conversion factors and associated daily morphine milligram equivalents for drugs prescribed as part of medication-assisted treatment for opioid use disorder should not be used to benchmark against dosage thresholds meant for opioids prescribed for pain.

** Morphine Equivalent Daily Doses.

Report Disclaimers:

The Report is based on the search criteria and the data provided by the dispensing entities. For more information about any prescription, please contact the dispenser or the prescriber. This Report contains confidential information, including patient identifiers, and is not a public record. The information should not be provided to any person or entity except as authorized in chapter 70.225 RCW.

OTP Consent Form Stats

| Site | Pt. Signed Consent | Pt. Declined Consent | Total | % declined consent |
|---------------|--------------------|----------------------|-------------|--------------------|
| 310 | 1398 | 0 | 1398 | 0% |
| Aurora | 295 | 13 | 308 | 4% |
| Des Plaines | 386 | 30 | 416 | 7% |
| Harvey | 147 | 4 | 151 | 3% |
| Joliet | 334 | 2 | 336 | 1% |
| Manteno | 45 | 0 | 45 | 0% |
| Quincy | 55 | 0 | 55 | 0% |
| Springfield | 356 | 1 | 357 | 0% |
| UIH | 224 | 1 | 225 | 0% |
| Wabash | 1148 | 4 | 1152 | 0% |
| Total: | 4333 | 55 | 4388 | 0.01% |



Sarah Pointer, Pharm D
Clinical Director
Illinois Prescription Monitoring Program

Office Phone: 217/558-9093

Sarah.Pointer@illinois.gov

