

PRESCRIPTION DRUG MONITORING PROGRAM TRAINING AND TECHNICAL ASSISTANCE CENTER



BRANDEIS UNIVERSITY **THE HELLER SCHOOL**
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The Prescription Drug Monitor

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2013 Harold Rogers Prescription Drug Monitoring Program (PDMP) National Meeting

The 9th Harold Rogers Prescription Drug Monitoring Program National Meeting will be held in Washington, D.C. from September 25 - 27 at the Four Points Sheraton Hotel, 1201 K Street, NW, Washington, DC 20005. Among the invited speakers are R. Gil Kerlikowske (Director, Office of National Drug Control Policy) and Congressman Harold Rogers. This year's meeting contains several important topics for State PDMP Administrators and other stakeholders: New York's Rx Stat Program, Prescription Monitoring Information Exchange (PMIX) National Architecture enhancements, National Governors Association's Prescription Drug Abuse Policy Academy, Association of State and Territorial Health Officials' projects, and PDMP enhancements and best practices. Additionally, there will be updates from the Drug Enforcement Administration, Substance Abuse and Mental Health Services Administration, Centers for Disease Control, National Alliance for Model State Drug Laws, PDMP Center of Excellence, and Bureau of Justice Assistance. If you have not already registered, please do so. View the [REGISTRATION](#) form and preliminary [AGENDA](#).

NIDA Offers Free Online CMEs on Safe Prescribing for Pain and Preventing Opioid Abuse

The number of prescriptions filled for opioid pain relievers has increased dramatically, leading the Centers for Disease Control (CDC) to identify prescription drug abuse a problem of 'epidemic' proportions. To better equip physicians, nurses, and other health professionals against this crisis, the National Institute on Drug Abuse (NIDA) offers two free online CMEs/CEs:

- Safe Prescribing for Pain (1.25 credits) teaches the prevalence of prescription opioid abuse and explores ways to effectively screen for and prevent abuse in patients with pain.
- Managing Pain Patients Who Abuse Rx Drugs (1.75 credits) identifies the prevalence of opioid addiction and dependence in patients with chronic pain and assists physicians in identifying emerging abuse behaviors.

These courses, developed by NIDA and Medscape Education, provide guidance for screening pain patients for substance use disorder risk factors and in identifying when patients are abusing their medications. View the [Courses](#).

Prescription Opioid Abuse: Challenges and Opportunities for Payers

The American Journal of Managed care published an article addressing the increasing costs of prescription opioid abuse and addiction to private and public health insurers. Referenced data estimates the annual cost for the healthcare insurance providers is \$72.5 billion. To lower the costs associated with prescription opioid abuse several policies and procedures were listed for consideration. Internally, payers can implement claims review procedures to question potentially inappropriate prescriptions, promote the use of opioid formulations that may minimize abuse, review claims for instances of multiple prescribers or pharmacies and early refills, and share data with other types of insurance providers. Payers can also promote and support the use of PDMPs, alternative treatment methods, patient screening with Screening, Brief Intervention, and Referral to Treatment (SBIRT), patient education, urine drug monitoring for illicit drug use, and addiction treatment. The goal of employing these policies and procedures is to greatly reduce the staggering costs associated with prescription opioid abuse. View the [Article](#).

Opioid Prescribing in Emergency Departments

The Centers for Disease Control and Prevention (CDC) conducted a study to determine the scope of potential opioid misuse and inappropriate prescribing by Emergency Department (ED) providers. The researchers used overlapping opioid prescriptions, overlapping opioid and benzodiazepine prescriptions, high daily doses, use of long-acting/extended release (LA/ER) opioids for acute pain, and overlapping LA/ER prescriptions as indicators of potential inappropriate use. Analysis of data revealed that 7.7% had high daily doses, 2% had overlapping opioid prescriptions, 1% had overlapping opioid/benzodiazepine prescriptions, 21.7% had LA/ER opioids for acute pain with 14.6% overlapping, and 10.3% had at least one of the indicators. The researchers concluded that potentially inappropriate prescribing should be more closely evaluated to improve patient care and reduce misuse and integrating prescription drug monitoring program (PDMP) data into the ED's work process could be a valuable tool. View the [Abstract](#).

2013 North Regional Meeting

The PDMP Training and Technical Assistance Center (TTAC) facilitated the 2013 North Regional Meeting in St. Louis, MO on April 23rd and 24th. PDMP representatives from Illinois, Indiana, Kansas, Michigan, Minnesota, Missouri, Nebraska, Ohio, and South Dakota, along with Cynthia Gunderson (Indian Health Services) and Peter Kreiner (PDMP Center of Excellence), participated in this day and half meeting. Among the topics covered: Obtaining Indian Health Services Data, PDMP Enhancements, PDMP Access by Public Payers, PDMP Projects, and Health Information

Exchange. Copies of the presentations are available on the TTAC website. View the [Presentations](#).

Did You Know?

- American Academy of Pain Management 24th Annual Clinical Meeting to be held Sept 26 - 29, in Orlando - Experience 25 hours of pain management education in fresh, exciting, and useful ways. The Academy's Annual Clinical Meeting offers a balance of small, hands-on sessions and larger, more didactic sessions. The Academy accredits 11 disciplines including physicians, physician assistants, nurses, nurse anesthetists, psychologists, physical therapists, and more. View the [Announcement](#).
- The TTAC has been hosting monthly webinars on prescription-related topics for PDMP administrators, federal partners, and other stakeholders. A listing of upcoming webinars and conferences is available on the TTAC website. View the [Calendar](#). Also, the TTAC posts copies of the webinar presentations on the website. View past [Presentations](#).
- The Insurance Journal has published several articles entitled 'Opioid Epidemic Plagues Workers' Comp'. The articles provide valuable information and statistics by state and include various state efforts to deal with the epidemic. View the [Articles](#).
- Nearly ¼ of U.S. high school students reported using prescription drugs without a prescription. The Partnership Attitude Tracking Study (PATS) asked 3,884 students, "What was the main reason why you last used a prescription drug without a prescription?" Approximately 18% of the students indicated that the main reason was 'to help me relax'. The published results also include a comparison of trends in teen prescription drug abuse since 2008. View the [Study](#).
- Medscape Today News has published the opioid prescribing policies for each state. Their website not only has the summary of each state's policies, but also detailed guidelines on the states' pain regulations. View the [Website](#).
- Two new synthetic drugs have hit the streets: N-Bomb and Desmethyl Fentanyl. N-Bomb (also called '251', 'smiles' or 'NBOME') is marketed as an alternative to LSD and mescaline; however its effects are more like methamphetamine. Desmethyl Fentanyl is purported to be 40 times more powerful than heroin. As with most synthetic drugs created by amateur chemists, ingredients and strengths can vary greatly. View the articles: [N-Bomb](#) and [Desmethyl Fentanyl](#).
- A new vaccine may soon undergo human tests following successful tests with rats. The tests stopped heroin-addicted rats from increasing their heroin intake. This vaccine prevents the drug from reaching the brain and does not impact other medications used to treat heroin addiction. It is believed that the vaccine, in conjunction with other treatments, could be very effective. Read the [Article](#).
- A new vaccine, that hinders the effects of oxycodone and hydrocodone, has undergone preclinical testing. The vaccine aims to block the rewarding and reinforcing effects of these two drugs. When fully developed, the vaccine could be used in conjunction with

other treatment methods; ideally, enhancing the effectiveness of both. Read the [Article](#).

Read [more](#)

PDMPs News and Updates

- Alabama
- California
- Florida
- Georgia
- Guam
- Indiana
- Kentucky
- Missouri
- New Mexico
- North Carolina
- Ohio
- Pennsylvania
- South Carolina
- Texas
- Virginia
- Washington
- Wisconsin

Alabama – Alabama’s Governor signed House Bill 150 enhancing the prescription drug monitoring program. The bill adds the Department of Mental Health and the State’s Medicaid Agency to the PDMP Advisory Committee. It also adds method of payment and third party payer information to the reporting requirement and allows physician assistants, authorized Medicaid personnel, and two physician delegates authority to access the PDMP. View the [BILL](#).

California - Senate Bill 809 passed unanimously in the Senate. The bill requires that the health licensure boards increase their fees of licensees authorized to prescribe or dispense controlled substances by no more than 1.16%. The proceeds would be deposited into the CURES Fund. Additionally, the bill permits the CA Department of Justice to seek private funds from insurers, health care service plans, and qualified manufacturers to support CURES. View the [Bill](#).

Florida - House Bill 831, requiring physicians to consult the prescription drug monitoring program prior to prescribing certain controlled substances, died on Calendar.

Georgia – The Georgia Prescription Drug Monitoring Program became operational on this month. Congratulations to Ronnie Higgins and all others involved in reaching this milestone.

Guam - Melvin Cruz has been promoted to Program Coordinator of the Guam Department of Education. We wish Melvin continued success with his new position.

Indiana – Marty Allain, administrator of Indiana’s prescription drug monitoring program, has accepted a position with the National Association of Boards of Pharmacy (NABP). We wish Marty success in the new position.

Kentucky – Stephanie Hold has been promoted to Director of the Office of Inspector General, Division of Audits & Investigations. Congratulations on the promotion, Stephanie.

Missouri – Neither Senate Bill 146 nor Senate Bill 233 were passed out of a Senate Committee. The legislative session has ended without enacting any legislation to establish a Prescription Drug Monitoring Program in Missouri.

New Mexico – House Bill 624, establishing requirements for pain management prescribing, dispensing and administration, has had action postponed indefinitely. Carl Flansbaum is the new PDMP Director and Larry Loring has been promoted to Director of NM Board of Pharmacy. Congratulations to both.

North Carolina – Senate Bill 222 was passed modifying several aspects of the PDMP; notably: pharmacies must send data to PDMP within 3 business days; dispensing physicians will be required to report; PDMP will capture method of payment; authority to provide unsolicited alerts to practitioners; permits prescriber or dispenser delegates to access data; and information can be provided to law enforcement pursuant to court order.

Ohio – Danna Droz, longtime administrator of Ohio’s prescription drug monitoring program, has accepted a position with the National Association of Boards of Pharmacy (NABP) as their PDMP Liaison. This new job will allow Danna to continue sharing her experience with the PDMP community; we wish her success in her new position.

Pennsylvania – House Bill 317, modifying the State’s PDMP, has been ‘laid on the table’.

South Carolina – The TTAC welcomes the new Director of PDMP at the SC Department of Health and Environmental Control, Christie Frick. Congratulations on your new position. We also wish former Director, Cheryl Anderson, success in her future endeavors.

Texas – Senate Bill 1643 was signed by the Governor allowing delegates (pharmacy technicians and licensed nurses) to access the prescription drug monitoring program, establishes an Interagency Prescription Monitoring Work Group to evaluate the effectiveness of the program, and extends the retention time of patient information from one year to three years from date of receipt.

Virginia – House Bill 1704 passed allowing disclosure of prescription drug monitoring information to local law enforcement. View the [BILL](#).

Washington – House Bill 1565 passed and becomes effective July 28, 2013. This bill provides for the funding of the PDMP from the Medicaid fraud penalty account. View the [BILL](#). The King County (Seattle) Board of Health passed a rule to create a drug take-back system. The program will be funded and operated by the drug manufacturers who produce the medications.

Wisconsin - The Prescription Drug Monitoring Program became operational on June 1, 2013. Congratulations to Chad Zadrazil and all others involved in reaching this milestone.

Articles for The Prescription Drug Monitor – If there are news items about your state’s PDMP or if you have information that you believe would be of interest to other readers of The Prescription Drug Monitor, please let us know. The items can be sent to info@pdmpassist.org.

PDMP Training and Technical Assistance Center Providing Assistance - Brandeis University’s PDMP Training and Technical Assistance Center (TTAC) continues to provide assistance to grantees, non-grantees, federal partners, and other stakeholders. If you need information, training, or other assistance related to PDMPs, please don’t hesitate to contact us. Your request will get immediate attention, including input from other states in our national PDMP network, if necessary. The TTAC can help with questions about program evaluation, operating costs, laws and regulations, vendors, advisory groups, education, and more.

You can reach the TTAC team by telephone 360-556-7152 or e-mail info@pdmpassist.org.

PDMP Center of Excellence at Brandeis: “Helping PDMPs Realize Their Full Potential” - Funded by the Bureau of Justice Assistance, the PDMP Center of Excellence (COE) at Brandeis University collaborates with PDMPs and other stakeholders to help PDMPs achieve their full potential in combating the prescription drug abuse epidemic.

Major program areas include: encouraging and evaluating innovative uses of PDMP data, compiling PDMP best practices, advancing methods for assessing PDMP effectiveness, and providing an online clearinghouse of information and tools to enhance PDMP operations and help establish new PDMPs.

The COE welcomes your input and collaboration in fulfilling its mission. Contact us at info@pmpexcellence.org or call 781-736-3909.

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