The Issue

- The U.S. is engulfed in a prescription drug abuse epidemic
  - Low perception of risk
    - Prescription drug is safe
  - Ease of access
    - Relative, “friend”, drug dealer, physicians, etc.
  - Financial incentive

Disclosure

- I do not have a vested interest in or affiliation with any corporate organization offering financial support or grant monies for this continuing education activity, or any affiliation with an organization whose philosophy could potentially bias my presentation

Objectives

- Discuss how prescriptions for controlled substances are monitored throughout the United States
- Understand the role of the Florida Prescription Drug Monitoring Program (PDMP)
- Learn how to access and use Electronic-Florida Online Reporting of Controlled Substances Evaluation (E-FORCSE)

Addiction

- The American Society of Addiction Medicine defines addiction as a primary, chronic disease of brain reward, motivation, memory and related circuitry.

- Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems with one’s behaviors and interpersonal relationships, and a dysfunctional emotional response.
What is a PDMP?

- The Substance Abuse and Mental Health Service Administration (SAMHSA) defines a Prescription Drug Monitoring Program (PDMP) as a statewide electronic database which collects, manages, analyzes and provides prescription data under the auspices of a state, territory, district, or commonwealth.

Why are PDMPs Important?

- Tool to address prescription drug abuse, addiction and diversion
  - Support legitimate access
  - Identify, deter and possibly prevent drug abuse
  - Potentially aid those who are addicted by identification
  - Data for public health
    - Policy initiatives
    - Public education/awareness programs

PDMPs – National Perspective

U.S. Overview (status)

U.S. Overview (collection interval)

U.S. Overview (housing entities)
Agent S is a 52 y/o M presenting to a VA Chronic Pain Mgmt. Clinic w/ c/o CLBP. Morphine SR 120mg PO Q8H no longer helps, making it difficult to work. Agent S states he works for the government, so you can trust him. Seeing Agent S for the first time, you ask him your usual questions, educate him on the rules of the clinic, and have him sign an opioid agreement. Agent S denies getting any meds OTC or from a Non-VA provider.

CLBP – Chronic Low Back Pain
Information Collected

- Patient information
  - Name, address, date of birth, gender, method of payment
- Prescriber Information
  - Name and DEA number
  - Date prescription was issued
- Dispenser Information
  - Name, DEA number, address
  - Date prescription was dispensed
- Drug information
  - Name, NDC, quantity, strength, refills

What’s Not Reported…

- Methadone from drug abuse treatment facilities
  - 42 CFR Part 2
- Military and Veterans Affairs
- Hospital, nursing home, ambulatory surgical center, hospice or skilled nursing facility
- Department of corrections
- <16 years of age (not retrievable)
- One-time, 72-hour re-supply

Indirect Access to FL PDMP

- Under certain conditions, the following entities may register to request information from program manager or support staff:
  - DOH or health care regulatory boards
  - Attorney General
  - Law enforcement
  - Patient, legal guardian or designee

Privacy Safeguards

- Unauthorized access prohibited
- Inappropriate disclosure of confidential information

Accessing

- Accessing prior to prescribing is NOT mandatory
- Accessing PDMP does not require patient consent
- Providers or dispensers subject to licensure or regulation by DOH under chapters 458, 459, 461, 462, 464, 465 or 466 have direct access to the PDMP

Headlines

- In 2013 the records of 3300 residents in the Volusia Co. area were released
- Daytona attorney’s pill database lawsuit dismissed
- Bill strengthening FL PDMP sponsored by First Coast state senator
- HB1381
  - Would have penalized providers failing to check the PDMP at initial visit before issuing Rx for controlled substance
**PDMPs & Provider Liability**

- Sanchez v. Wal-Mart Stores, et al
  - Lack of duty to take action
  - Legislative intent, not for the benefit of general public
  - Duty was owed to the patient
  - States have determined that there is a duty to warn a patient about potential adverse effects
  - Does not extend to the actual prescribing of the drug
  - Providers acting in good faith are immune from any civil, criminal or administrative liability

**Performance Measures**

1. Reduce inappropriate use of Rx drugs through education and safety
2. Reduce the qty of controlled substances obtained by individuals attempting to engage in deceit
3. Increase coordination among partners and stakeholders to achieve improved patient health care and safety and reduce Rx drug abuse and diversion

**Advantages & Limitations**

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**Performance Measure (Education)** (2011-2012 vs 2012-2013)

- Prescribers trained: 19.1% (2053 increase)
- Dispensers trained: 42.8% (4425 increase)
- Investigators trained: -34.7% (1643 decrease)

**Performance Measure (Reducing QTY)** (2011-2012 vs 2012-2013)

- Patients filling CII-CIV: -0.2% (12,640 decrease)
- Doses dispensed CII-CIV: -4.5% (63,457,833 decrease)
  - ≥5 prescribers and ≥5 dispensers (20,643,603)
  - ≥10 prescribers and ≥10 dispensers (1,662,110)
- Deaths caused by controlled Rx drug 2011 vs 2012: -17.7% (449 less)

**Room for Growth**

- 140,443 licensed Health Care Practitioners in FL
- 23,084 (16.4%) are registered E-FORCSE users
- #1– Pharmacists with 11,653 of 28,749 (40.5%)

![Pharmacist by day... SUPERHERO By night...](http://www.cafepress.com/superhero_pharmacist_framed_tile,277206356)

![Rx](http://www.qcshp.cshp.org/index.php/news/51/25/Pharmacists---Everyday-Superheroes-T-Shirts-Now-Available-Online)

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Performance Measure
(Reducing QTY)

(2011-2012 vs 2012-2013)
- Patients visiting multiple prescribers and dispensers in a 90 day period
  - ≥5  -50.6% (1449)
  - ≥6  -61.1% (670)
  - ≥7  -65.4% (336)
  - ≥8  -70.8% (209)
  - ≥9  -70.3% (121)
  - ≥10 -70.5% (74)
  - ≥15 -61.1% (11)

Performance Measure
(Reducing QTY)

Patients visiting multiple prescribers and dispensers within 90 day period

- Legislation did not provide state funding for implementation
- State law prohibits the use of funds provided by manufacturers either directly or indirectly
- Direct Support Organization (DSO), federal grants and private

Patient Case

Before discussing what changes will be made, you ask Agent S to go to the lab and complete a UDS. Meanwhile, you query E-FORCSE and see that he has been getting large doses of morphine from outside the VA for years. This is concerning because Agent S has also been getting morphine from the VA over the same period of time. Prior UDSs did not catch this due to the same substance being used.

E-FORCSE

“Now, witness the power of this fully operational battle station.”
Logging In

- Case sensitive, requires at least 8 characters consisting of:
  - Upper, lower case and a numerical digit
  - Special characters not welcome
- RxSentry passwords expire every sixty (60) days
- Session will timeout after fifteen (15) minutes of inactivity

Welcome Page

Query Form

Session Timeout

Liability Statement

Scenarios and Tips

- If a person claims to be law enforcement and requests that you run a query....
- If you are in a hospital and someone from another floor calls down and requests that you run a query....
- Running a query, consider only using first letter of first name
- Individually run each last name (in the case of multiples)
### On The Horizon

- Mandated PDMP use or face penalty
- Safeguards
  - Immunity clause
  - Law enforcement would be required to have a subpoena issued upon reasonable suspicion
- Amendments to funding rules
  - General fund
  - From licensure fees

### Summary

- U.S. prescription drug abuse epidemic
- PDMPs vary throughout the country
- E-FORCSE is Florida’s PDMP and a tool available to provide health care practitioners with a detailed hx of CII-CIV medications to improve patient health care and safety and reduce Rx drug abuse and diversion
- Queries are available at [www.hidinc.com/flipdmp](http://www.hidinc.com/flipdmp)
- E-FORCSE and other PDMPs are a work in progress

### Strings Attached

- Federal legislation was proposed in the US Senate
- Grant money for PDMPs would require the following
  - PDMPs would be required to be interoperable between states and federal agencies
  - Requires reporting of methadone dispensed
  - States would be forced to require practitioners use PDMP

### What can you do to help?

- Register for the FL PDMP
- Become familiar with & utilize this valuable tool
- If you are in a setting with access to electronic medical records, become comfortable with your lab/UDS specifications
- Check all patients - new to your service
- Confront patients with unexpected query results
- Obtain consent to talk to prescribing providers

### Patient Case

When Agent S returns from the lab, you discuss your findings and educate Agent S on safety and legal concerns. Agent S first states this isn’t him, but after further discussion and request for patient consent to contact NON-VA provider, Agent S admits to getting morphine from both providers but only because he needs it. Agent S refuses to provide consent for you to contact his outside provider and refuses a consult to mental health to be evaluated for substance abuse counseling.

### Resources

- Substance Abuse
  - [www.NA.org](http://www.NA.org)
  - [www.AA.org](http://www.AA.org)
  - [www.al-anon.alateen.org](http://www.al-anon.alateen.org)
  - [FindTreatment.samhsa.gov](http://FindTreatment.samhsa.gov)
- Other Resources
  - [www.PMPALLIANCE.org](http://www.PMPALLIANCE.org)
  - [www.DEADIVERSION.USDOJ.gov](http://www.DEADIVERSION.USDOJ.gov)
References

- Health Information Designs website available at http://www.hidinc.com/flpdmp