Maximizing Use of Prescription Drug Monitoring Programs

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Overview of Presentation

- PDMP background
- Status of PDMPs
- PDMP effectiveness
- Current initiatives
- Other prescription drug monitoring options
- Conclusions
CDC Goal

- Reduce abuse and overdose of opioids and other controlled prescription drugs while ensuring patients with pain are safely and effectively treated.

Motor vehicle traffic, poisoning, and drug poisoning (overdose) death rates
United States, 1980-2010

NCHS Data Brief, December, 2011. Updated with 2009 and 2010 mortality data
Drug overdose deaths by major drug type, US, 1999-2010

- Opioids
- Heroin
- Cocaine
- Benzodiazepines

Rates of Opioid Overdose Deaths, Sales, and Treatment Admissions, US, 1999-2010

- Opioid Sales KG/10,000
- Opioid Deaths/100,000
- Opioid Treatment Admissions/10,000

CDC/NCHS National Vital Statistics System, CDC Wonder

CDC MMWR. 2011 http://www.cdc.gov/mmwr/preview/mmwrhtml/mm60e1101a1.htm?__cid=mm60e1101a1_w updated with 2009 mortality and 2010 treatment admission data
CDC public health policy options

- Prescription Drug Monitoring Programs (PDMPs)
- Patient Review & Restriction Programs
- Laws/Regulations/Policies
- Insurers & Pharmacy Benefit Managers (PBM) mechanisms
- Clinical Guidelines
- Substance Abuse Treatment

What are PDMPs?

- State databases that collect information on dispensed controlled prescriptions drugs by pharmacies (and dispensing physicians in some states)
- Data Collected
  - CII-CIV prescriptions (some CV)
  - Prescriber
  - Dispenser
  - Patient
  - Date Dispensed
  - Drug
  - Strength
  - Quantity
  - Refills
  - Method of Payment
- Variation in state programs
How can PDMPs be used?

- Clinical
- Regulatory Oversight
- Surveillance and Evaluation Tool
- Law Enforcement
- Passive vs Proactive

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Current status of PDMPs

- 49 States have legislation authorizing a PDMP
- Operational in 42 states

Best practices

- Outlines a set of best practices
- Research agenda
- PDMP Funding
- A few best practices
  - Allow access to prescribers and dispensers
  - Allow access to regulatory boards, state Medicaid and public health agencies, Medical Examiners, and law enforcement (under appropriate circumstances)
  - Provide real-time data and access
  - Share data with other states (interoperability)
  - Integrate with other health information technology to improve use among health care providers
  - Have ability to send unsolicited reports
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PDMP effectiveness - peer-reviewed literature

- Research consistently suggests PDMPs reduce prescribing of schedule II opioid analgesics.
  - One study found compensatory increases in schedule III opioids.

- 2009 study found states with PDMPs had lower opioid substance abuse treatment rates compared to states without PDMPs.

PDMP Effectiveness – Peer-reviewed literature

- 2012 analysis of poison control center data concluded states with PDMPs had lower annual increases in opioid misuse or abuse from 2003-2009

- Use of PDMP data in an ED suggests it can change prescribing. PDMP data review changed prescribing in 41% of cases
  - 61% received fewer or no opioids
  - 39% received more opioid medication than previously planned

- Impact on overdose mortality has not been found, at least based on data through 2005.


PDMP Effectiveness – Grey Literature

- Surveys indicate prescribers find PDMPs to be a useful clinical tool.
- Surveys find clinicians in many cases report altering their prescribing after reviewing a PDMP report.
- Proactive reporting reduces doctor shopping by increasing awareness among providers about at-risk patients leading to changes in prescribing behaviors.

6. Communication from LA PMP to PMP Center of Excellence.
Public safety officials have endorsed the utility of PDMPs.

A 2010 survey found 73% of KY law enforcement officers who used PDMP data strongly agreed that the PDMP was an excellent tool for obtaining evidence in the investigative process.²

2002 GAO report concluded that PDMPs are a useful tool to reduce drug diversion.

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Current PDMP Initiatives

- ONC – SAMHSA – ONDCP – CDC Health Information Technology and PDMP Pilot programs
- SAMHSA – CDC PDMP Interoperability and Electronic Health Record Integration Project
- ONDCP Interagency Working Group subcommittee on PDMP integration
- Providing technical assistance to states and others to:
  - Focus efforts on patients at highest risk of abuse and overdose
  - Focus on prescribers deviating from accepted medical practice
  - Maximize surveillance and evaluation capabilities of PDMPs
- Bureau of Justice Assistance – CDC MOU
- Various PDMP evaluations

Interoperability

- **RxCheck (formerly PMIX)**
  - AL, KY and FL are connected
  - ME working on MOUs with AL, KY, MA, WA, VT
  - MA working on MOU with KY and ME
- **PMPI (NABP)**
  - AZ, CT, IN, KS, MI, NM, ND, OH, SC, VA are connected
  - Several other states currently working on connecting or MOUs
- **HID**
  - AL and ME are connected (data sharing unclear)
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What about other monitoring programs?

- Insurer and pharmacy benefit manager claims data
  - Identify high-risk patients
  - Identify inappropriate prescribing
  - Identify geographic patterns
  - Drug utilization review programs can alert to high-dose opioid prescribing and other potential risky medication combinations at the point of care and point of dispensing

- A recent randomized trial of use of proactive reporting by an insurer rather than a PMDP suggests such reporting reduces the number of prescribers and prescriptions.

Conclusions

- PDMPs are a promising intervention to address prescription drug abuse, diversion, and overdose
- Serve multiple purposes – clinical, surveillance, evaluation, regulatory and enforcement
- Multiple efforts at the Federal and state level to maximize utility of PDMPs
- Current research will further inform evidence-base
- State support to implement PDMP best practices and evaluate impact is critical

Additional information

- [Vital Signs: Risk for Overdose from Methadone Used for Pain Relief] (http://www.cdc.gov/HomeandRecreationalSafety/pdf/PolicyImpact-PrescriptionPainkillerOD.pdf)
- [MMWR: Vital Signs: Overdoses of Prescription Oxycodone Pain Relievers — United States, 1999–2006] (http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6126a5.htm?sd=m6126a5_w)
Thank You

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The findings and conclusions in this report are those of the author and do not necessarily represent the views of the Centers for Disease Control and Prevention.