

PRESCRIPTION DRUG MONITORING PROGRAMS: A BRIEF OVERVIEW
NATIONAL ALLIANCE FOR MODEL STATE DRUG LAWS (NAMSDL)
JULY 2008

- **TOOL:** Prescription Drug Monitoring Programs are a major tool being used by states to address prescription drug abuse, addiction and diversion. Such programs are commonly referred to as PDMPs or PMPs.
- **DESCRIPTION:** A PDMP is a statewide electronic database which collects designated data on controlled substances dispensed in the state. The PDMP is housed by a specified statewide regulatory, administrative or law enforcement agency. The housing agency distributes data from the database to individuals who are authorized under state law to receive the information for purposes of their profession.
- **GOALS/OBJECTIVES:** A PDMP may serve multiple purposes. These include: (1) identify and deter or prevent drug abuse and diversion, (2) support access to legitimate medical use of controlled substances, (3) facilitate and encourage the identification, intervention with and treatment of persons addicted to prescription drugs, (4) inform public health initiatives through outlining of use and abuse trends and (5) educate individuals about PDMPs and the use, abuse and diversion of and addiction to prescription drugs.
- **STATES WITH PDMP LAWS:** There are currently **38 states with laws** that authorize the establishment and operation of a PDMP: Alabama, Alaska, Arizona, California, Colorado, Connecticut, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Nevada, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wyoming.
- **OPERATIONAL:** Of those 38 states, **29 are currently operational**. For NAMSDL purposes, operational means that the PDMP is capable of collecting data and distributing data to one or more authorized users of the data.

States with operational PDMPs: Alabama, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Kentucky, Maine, Massachusetts, Michigan, Mississippi, Nevada, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wyoming. By the end of 2008, 5 additional states are hoping to become operational or at least be collecting data: Arizona, Connecticut, Iowa, Louisiana, Vermont.

- **HOUSING ENTITIES:** State PDMPs are housed in (1) health departments or single state authorities on drugs and alcohol, (2) boards of pharmacy, (3) law enforcement agencies, or (4) professional licensing or consumer protection agencies.

The 29 currently operational PDMPs are primarily housed in health departments or single state authorities, or in boards of pharmacies.

Breakdown of Housing Entities

11 – Health Departments or Single State Authorities on Drugs & Alcohol

11 – Boards of Pharmacy

5 - Law Enforcement Agencies

2 - Professional Licensing

- **CONTROLLED SUBSTANCES MONITORED:** State PDMPs monitor designated schedules of controlled substances. The specific schedules to be monitored are identified in state law and regulation. Additionally, some state PDMPs are authorized to monitor drugs of concern. Such drugs are substances that demonstrate a potential for abuse and are designated as a drug of concern or a drug in need of monitoring by the appropriate state body.

Most states monitor Schedule II, III and IV substances. Numerous states also monitor Schedule V substances.

- **AUTHORIZED REQUESTERS AND USERS OF DATA:** The categories of individuals often identified as authorized requesters and users of PDMP data include:

1. Licensed physicians/practitioners with authority to prescribe controlled substances
2. Pharmacists with authority to dispense controlled substances
3. Designated federal, state and local law enforcement
4. Representatives of professional or occupational licensing, certification or regulatory boards, commission or agencies
5. Individuals whose receipt of controlled substances prescriptions has been included in the PDMP database

Of the categories of authorized users, state PDMPs report that the highest percentage of requests for PDMP data are from physicians/practitioners.

States sometime add categories of authorized users of PDMP data as is appropriate for that jurisdiction. For example, states using an outside vendor to collect data will allow appropriate personnel of that vendor to access the PDMP

data. Another example is a state that provides for an advisory committee to work with the statewide entity housing and operating the PDMP. That state will permit advisory committee members to access the PDMP information.

- **CONFIDENTIALITY & PRIVACY PROTECTIONS**

State PDMP laws often incorporate specific language designed to protect confidentiality and privacy rights related to PDMP data. Common statutory safeguards include:

1. Exempting PDMP data from public records or open records laws. Concomitantly, the law will state that the PDMP information is confidential.
2. Carefully specifying who is allowed to access the PDMP, under what circumstances the information may be accessed or what criteria must be met for access, and for what purposes the lawfully accessed data may be used.
3. Explicitly requiring that the statewide agency operating the PDMP comply with all relevant state and federal privacy and confidentiality laws. Additionally, some states also require that the agency develop procedures and policies which protect the confidentiality of the information.
4. Penalizing the unlawful access and/or the unlawful disclosure of PDMP data.

State PDMP officials implement their statutory obligations regarding privacy and confidentiality by developing precise procedures for the submission of information requests and the corresponding program response. The procedures may vary in accordance with the particular parameters applicable to a category of authorized users.

To date, PDMP officials have reported that there have been no convictions in their jurisdictions for unlawful disclosure of PDMP information.

- **FUNDING FOR STATE PDMPs**

A primary source of funding for the development and operation of state PDMPs has been the Harold Rogers Prescription Drug Monitoring Program (HRPDMP) administered by the Bureau of Justice Assistance (BJA).

Since its inception in 2002, the HRPDMP has provided state officials with planning, implementation and enhancement grants. For FY2008, Congress appropriated \$7.05 million for the HRPDMP, and BJA solicited applications for all three types of grants. BJA anticipates awarding the FY08 grants by the end of September 30, 2008.

Other financial mechanisms used by state officials include revenues from state general funds and licensing or registration fees paid by authorized PDMP users.

**RESOURCES FOR INFORMATION ON STATE PDMPs AND
PRESCRIPTION DRUG ABUSE, ADDICTION AND DIVERSION**

- **NATIONAL ALLIANCE FOR MODEL STATE DRUGS LAWS
(NAMSDL) www.namsdl.org**

Sherry L. Green, Chief Executive Officer, sgreen@namsdl.org
HEADQUARTERS: WESTERN REGIONAL OFFICE:
1414 Prince Street, Suite 312 215 Lincoln Avenue, Suite 201
Alexandria, VA 22314 Santa Fe, NM 87501
703-836-6100, ext. 116 703-836-6100, ext. 116
703-836-7495 FAX 505-820-1750 FAX

- **ALLIANCE OF STATES WITH PRESCRIPTION MONITORING
PROGRAMS www.nasca.org/monitoring.htm**

Jim Giglio
President, Alliance of States with Prescription Monitoring Programs
Director, NY Bureau of Narcotic Enforcement
433 River Street, 5th Floor
Troy, New York 12180-2238
518-402-0707 (Ph.), Jgg01@health.state.ny.us

- **NATIONAL ASSOCIATION OF STATE CONTROLLED SUBSTANCES
AUTHORITIES (NASCSA) www.nasca.org**

Danna Droz
Chair, Executive Committee
NASCSA
Ohio Board of Pharmacy
PMP Administrator
77 South High Street, Room 1702
Columbus, OH 43026
614-466-4143 (Ph.), DDROZ@bop.state.oh.us

- **BUREAU OF JUSTICE ASSISTANCE (BJA)**

Rebecca M. Rose
Policy Advisor for Substance Abuse & Mental Health
BJA/Office of Justice Programs (OJP), U.S. Dept. of Justice
810 Seventh Street, NW
Washington, D.C. 20531
202-514-0726 (Ph.)
Rebecca.Rose@usdoj.gov