Prescription Drug Monitoring Program (PDMP)

Rhode Island

Information contained in this presentation is accurate as of December 2017
Meet the Speaker

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What is a Prescription Drug Monitoring Program?

• A PDMP/PMP is a *statewide* electronic database which collects designated data on specified substances dispensed to or for patients. The PDMP is housed by a state regulatory, administrative or law enforcement agency. The housing agency disseminates information from the database to individuals who are authorized under state law to receive the information for purposes identified by state law.
State PDMP Overview

• Housed within RI Department of Health (RIDOH)
• Operational since 2012
• Legislation updated in 2016
State PDMP Overview

- Mandatory reporting on Schedule II-V controlled substances for all CSR providers such as:
  - Opiates
  - Naloxone
  - Benzodiazepines
  - Stimulants
  - Barbiturates

- Patient information
- Prescribing provider information (including DEA number)
- Prescription information
- Filling pharmacy information (including DEA number)
Exceptions/Exclusions for Reporting

• Pharmacies who hold an active RI Controlled Substance Registration must report
  ○ There are no exceptions or waivers to this rule

• Controlled substances dispensed to an inpatient at a hospital or opioid treatment program are not reported
Data Exchange Time Period

- Pharmacies and non-resident Pharmacies must report Schedules II-V controlled substances and opioid antagonists within 24 hours (this includes 0 reports as well) of the prescription being dispensed to the patient.
  - The information transmitted electronically by the pharmacy shall include the following: (1) Pharmacy Drug Enforcement Administration identification number; (2) Patient last name; (3) Patient first name; (4) Patient street address; (5) City; (6) State; (7) Date of birth; (8) Gender code; (9) Prescription species code; (10) Prescription number; (11) Date prescription written; (12) Number of refills authorized; (13) Date prescription filled; (14) Refill number; (15) National Drug Code number; (16) Quantity dispensed; (17) Days supply; (18) Payment code for either cash or third-party provider; (19) Prescriber Drug Enforcement Administration identification number.

- The database is refreshed daily
- Reports are received daily
Approved Users

- **Practitioners**
  - For the purpose of medical treatment

- **Pharmacists**
  - At the point of dispensing a controlled substance

- **Provider-authorized designees**

- **Law enforcement officials**
  - Obtain reports from RIDOH, pursuant to a valid search warrant,

- **Patients**
  - For request of own information

- **State vendors, agents, contractors, or designees**
  - For the purposes of maintaining the PDMP

- **Researchers**
  - No identifying information for patients or physicians, must have IRB approval
Mandates

• Providers must check the PDMP:
  ▪ At the time of initiation of opioid therapy
  ▪ At the time of initiation of opioid therapy using an intrathecal pump
  ▪ Every three months for patients on long-term opioid therapy
Limitations of Matching Data

- No single common identifier for patients
  - Match performed on name, DOB, prescription information
  - Data entry and quality issues
- Matching is done by vendor using proprietary algorithm
- Data matching improvement goal:
  - Move PDMP data into the RI EOHHS Data Ecosystem
  - Compare probabilistic vs. deterministic algorithms
  - Can use Qgram and fuzzy grouping transformation, can set threshold for similarity (typically 70%)
Data Availability

• Data can be accessed via web module or via integration in EHR using single sign-on
  ○ EHR integration pilot with Lifespan physician organization
Other State Databases

• NA
Analytics

• Drug information
• Active Daily MME
• MME/Rx
• Total Number of Providers
• Total Number of Pharmacies
• Payer information
Trends and Use Patterns

- Customized prescriber profiles:
  - Customized prescriber profile developed with input from multi-disciplinary stakeholders (pharmacy, medical board, Governor’s Task Force on Overdose Prevention)
  - Prescriber profiles were mailed to top 500 opioid prescribers
- Office visits per request (included in department communications to prescribers on website)
- PDMP Monthly training offered at Department of Health
- Outreach at Continuing Education events and conferences throughout the state
- Follow up communications post prescriber visits
- Provider packets
  - Includes customized prescriber profile, prescriber search history requests, prescribing regulations card, referrals and prescribing guidelines
State PDMP Moving Forward

• Phase 2 of EHR integration: Statewide rollout
  ○ Perform similar integration with other provider organizations already connected with HIE

• Measure impact of Phase 1 of EHR integration using qualitative and quantitative data.

• Integrate PDMP data into pharmacy workflow
  ○ Working with CVS to integrate PDMP into their record system in all RI stores

• Intelligent ED Alerts
  ○ Predictive risk modeling using PDMP data, among other sources

• Move PDMP data into RI EOHHS Data Ecosystem
QIN-QIO Involvement

• Why work with your QIN-QIO?
  ○ Access to data
  ○ Coordinated Efforts
    - QPP Quality Measures & Improvement Activities
      - Ex. Consultation of the PDMP (Activity ID: IA_PSPA_6)
  ○ Education and training
  ○ Process Improvement

• Additional QIN-QIO Information:
Thank you for watching!

• For more information about Rhode Island’s Prescription Drug Monitoring Program, please contact:
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