Prescription Drug Monitoring Program (PDMP)

West Virginia

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

Jerad Bailey
State PDMP Overview

- RxDataTrack CSAPP (Controlled Substance Automated Prescription Program)
- “The data is housed in a high security, HIPAA-compliant database within the state of West Virginia.”
- CSAPP since 2013
- Internet-based CSMP since 2004
State PDMP Overview

“All licensees who dispense Schedule II, III and IV controlled substances to residents of West Virginia must provide the dispensing information to the West Virginia Board of Pharmacy (BOP) each 24 hour period basis.”

Also includes

- Schedule V controlled substances (eg. pseudoephedrine) dispensed as a prescription
- Gabapentin-containing products
- Naloxone-containing opioid-reversing agents (eg. Narcan®)
Exceptions/Exclusions for Reporting

• WV Code §60A-9-3(c)(2)
  ○ A dispenser, who does not have an automated record-keeping system capable of producing an electronic report in the established format may request a waiver from electronic reporting. The request for a waiver […] shall be granted if the dispenser agrees in writing to report the data by submitting a completed "Pharmacy Universal Claim Form" as defined by legislative rule.

• WV Code §60A-9-4(d)
  ○ Reporting required by this section is not required for a drug administered directly to a patient by a practitioner. Reporting is, however, required by this section for a drug dispensed to a patient by a practitioner: Provided, That the quantity dispensed […] may not exceed [a seventy-two-hour supply] with no greater than two seventy-two-hour cycles dispensed in any fifteen-day period of time.
Data Exchange Time Period

• WV Code §60A-9-3(b)
  ○ The information required to be submitted by the provisions of this article shall be required to be filed no more frequently than within twenty-four hours.

• WV Code §60A-9-4(a)(1) through (9)
  ○ (1) Dispensing pharmacy/provider’s name, address, Rx#, and DEA#
  ○ (2) Full legal name, address, DOB of patient
  ○ (3) Name, address, and DEA# of prescriber
  ○ (4-5) Name, NDC, and quantity of medication dispensed
  ○ (6) Date prescription was written/filled
  ○ (7) Number of refills authorized by prescriber
  ○ (8) Full name, address, and DOB listed on government-issued photo ID of person picking up medication
  ○ (9) Source of payment (eg. Cash, Medicaid, Third Party)
Data Exchange Time Period

• Database refreshes are constant
  ○ Pharmacy will receive a report next-day that their data has been submitted, and any errors which may need corrected

• Reporting is near-instantaneous
  ○ Receiving a report is quick; logging in and typing the necessary information is “the slow part”
Approved Users

• Access is granted to Physicians, Pharmacists, Dentists, Veterinarians, Physician Assistants, Advanced Practice Nurses, and Other Prescribers and Dispensers

• Authorized agents of select law-enforcement agencies (drug task forces, DEA, Bureau of Medical Services), Office of Chief Medical Examiner, and Licensing Boards

• WV Code §60A-9-5
  - Entitled “Confidentiality; limited access to records; period of retention; no civil liability for required reporting”
  - For medical practitioners, access should be pursuant to the actual care of patients
Mandates

• WV Code §60A-9-5a
  ○ (a) All practitioners [...] who prescribe or dispense Schedule II, III or IV controlled substances shall register with the West Virginia Controlled Substances Monitoring Program [and maintain access]: Provided, That compliance [...] must be accomplished within thirty days of the practitioner obtaining a new license. [...] 
  ○ (b) Upon initially prescribing or dispensing any pain-relieving controlled substance for a patient and at least annually thereafter should the practitioner or dispenser continue to treat the patient with controlled substances, all persons with prescriptive or dispensing authority [...] shall access the West Virginia Controlled Substances Monitoring Program database for information regarding specific patients for whom they are providing pain-relieving controlled substances as part of a course of treatment for chronic, nonmalignant pain but who are not suffering from a terminal illness. The information obtained from accessing the West Virginia Controlled Substances Monitoring Program database for the patient shall be documented in the patient's medical record. [...]

Limitations of Matching Data

• Name mismatches
  ○ Shortened names (eg. John vs. Jonathan)
  ○ Married names (Smith, Jones, Smith-Jones, Jones-Smith)

• Broaden search by using less info
  ○ Can run a report with as little as patient’s last name
  ○ Output report will have patient’s first name, DOB, and other relevant information

• Use the information on the patient’s photo ID
  ○ Best practice
Data Availability

• Data is accessed online via RxDataTrack CSAPP
  ○ Each DEA Registrant (Provider, Pharmacy, etc.) has its own account
  ○ Individuals can create a “delegate” account and upon approval be associated with one or more DEAs

• Board of Pharmacy Monitoring
  ○ Letters sent to providers and dispensers about patients exceeding established parameters
  ○ Patients highest on list were referred to law enforcement

• Substance Abuse and Mental Health Services (SAMSHA) Grant
  ○ CSMP integration into workflows
Other State Databases

• As of February 2016
  ○ Interconnectivity with Arizona, Connecticut, Indiana, Kansas, Kentucky, Maryland, Nevada, New Mexico, Ohio, Virginia
  ○ Pennsylvania absent from this list
  ○ Interstate data only available to practitioners at this time

• Most states limit delegate access to CSMP
  ○ Limits interstate data exchange
Analytics

• Available to Pharmacies
  o Morphine Milligram Equivalents (MME)

• Available to Practitioners
  o Dispensing self-reports
  o Top prescriber reports

• Available to Board of Pharmacy
  o Multiple prescriber
  o Prescribers with no access to CSMP
  o User activity
Trends and Use Patterns

• Reports and analytics available to the Board of Pharmacy
  ○ Top products dispensed
  ○ Patient demographics (age, city/county)
  ○ Distance traveled between prescriber and pharmacy
  ○ % of prescriptions being paid for with cash

• Advisory and Database Review Committees
  ○ Inform physicians and pharmacies of anomalies and patient deaths
State PDMP Moving Forward

• Veterans Administration
  ○ Ability to receive dispensing data

• SAMSHA Grant
  ○ Workflow integration

• New CSMP Vendor
  ○ Possibility for a new system entirely
Thank you for watching!

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