PDMP CENTER OF EXCELLENCE Brandeis University The Heller School FOR SOCIAL POLICY AND MANAGEMENT

Selected Prescription Drug Monitoring Program Best Practices with Examples

Children, Families, Health, and Human Services Interim Committee Meeting

63rd Montana Legislature

January 10, 2014

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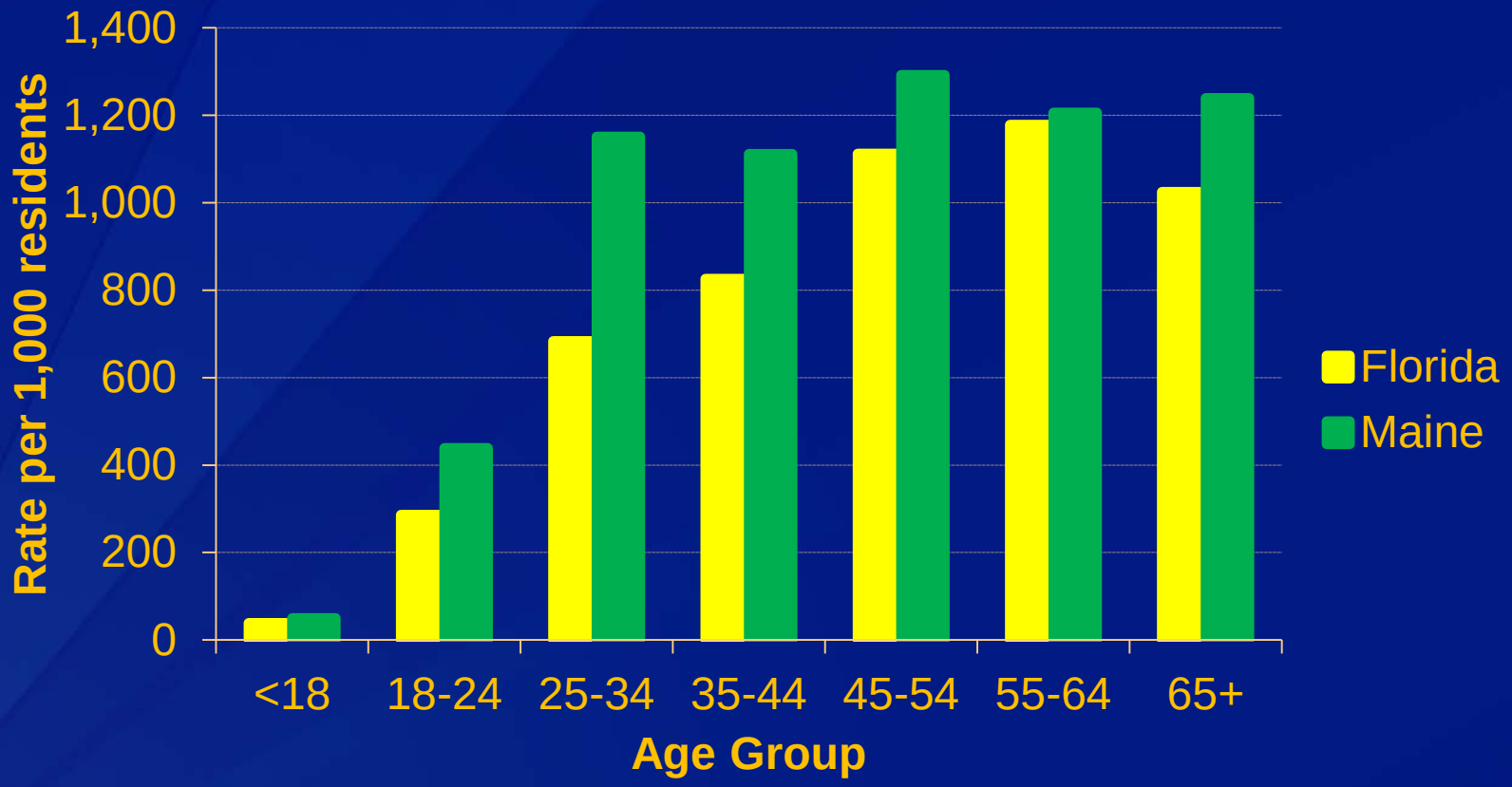
PDMP Center of Excellence at Brandeis University

De-identified PDMP Data for Epidemiological Studies

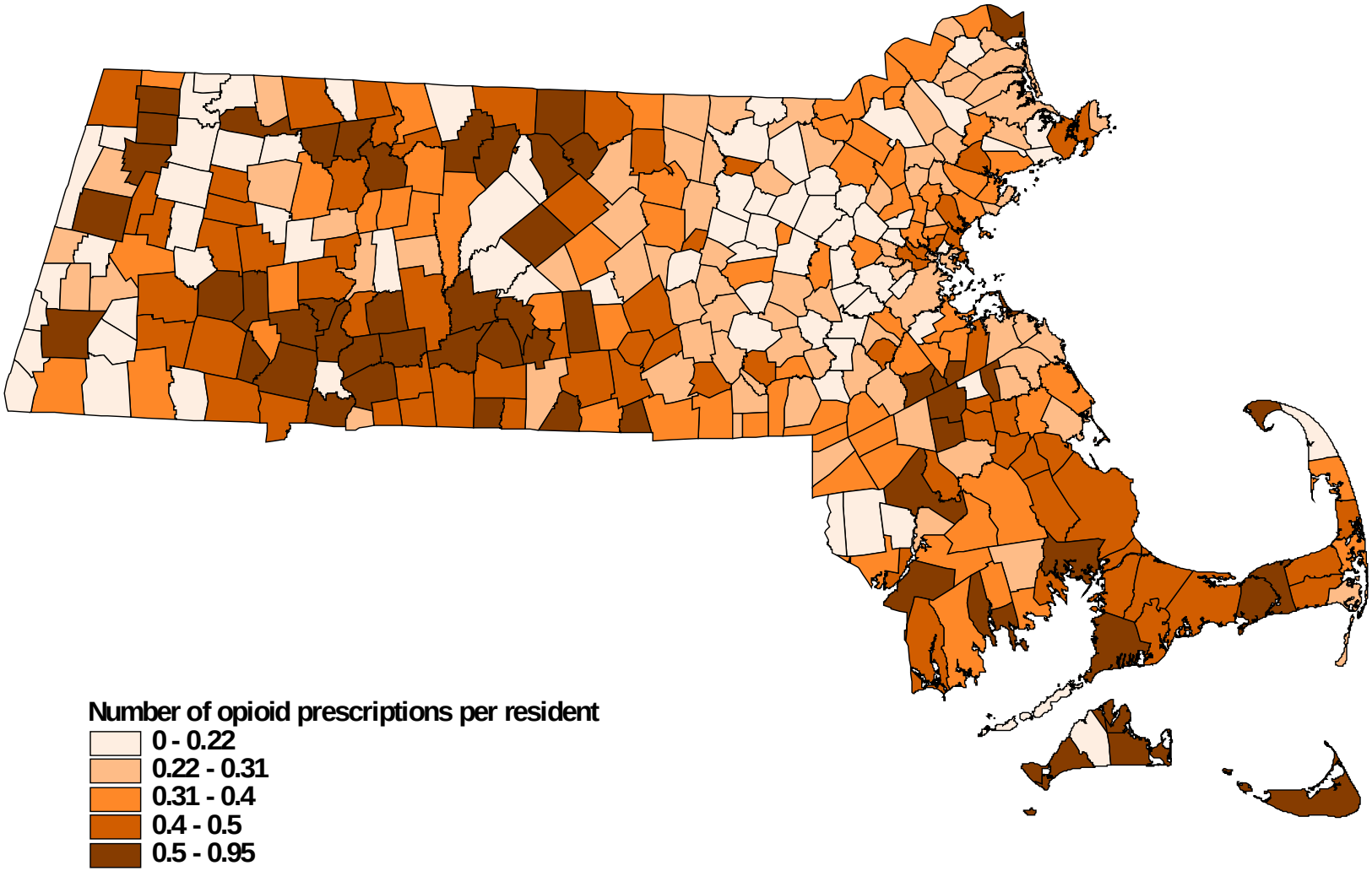
Can:

- Inform state- and community-level prevention efforts
- Help track effects of new drugs
- Help locate likely pill mills
- Highlight problematic prescribers
- Demonstrate PDMP effectiveness

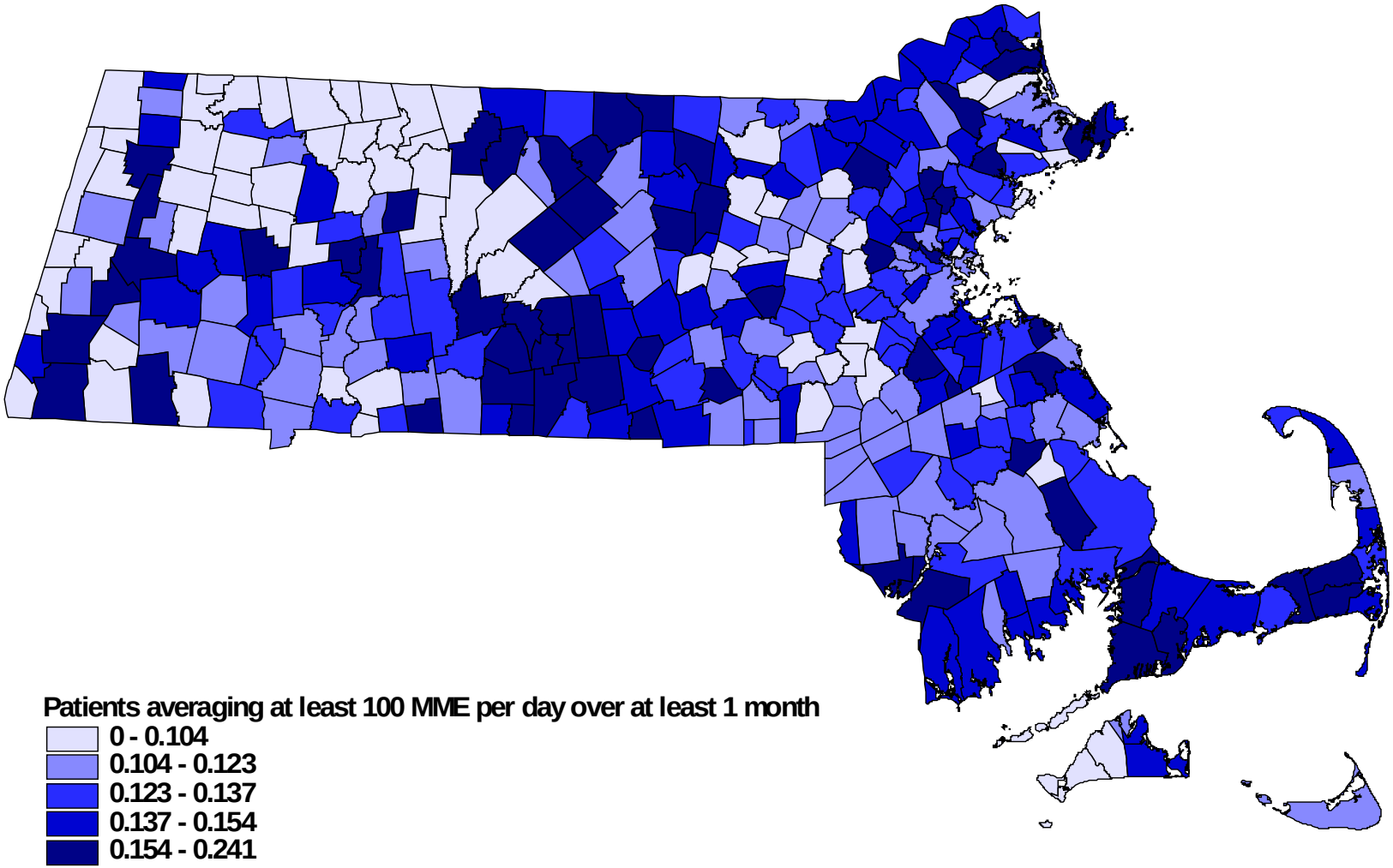
Opioid prescription rates by age group, Florida and Maine, 2012



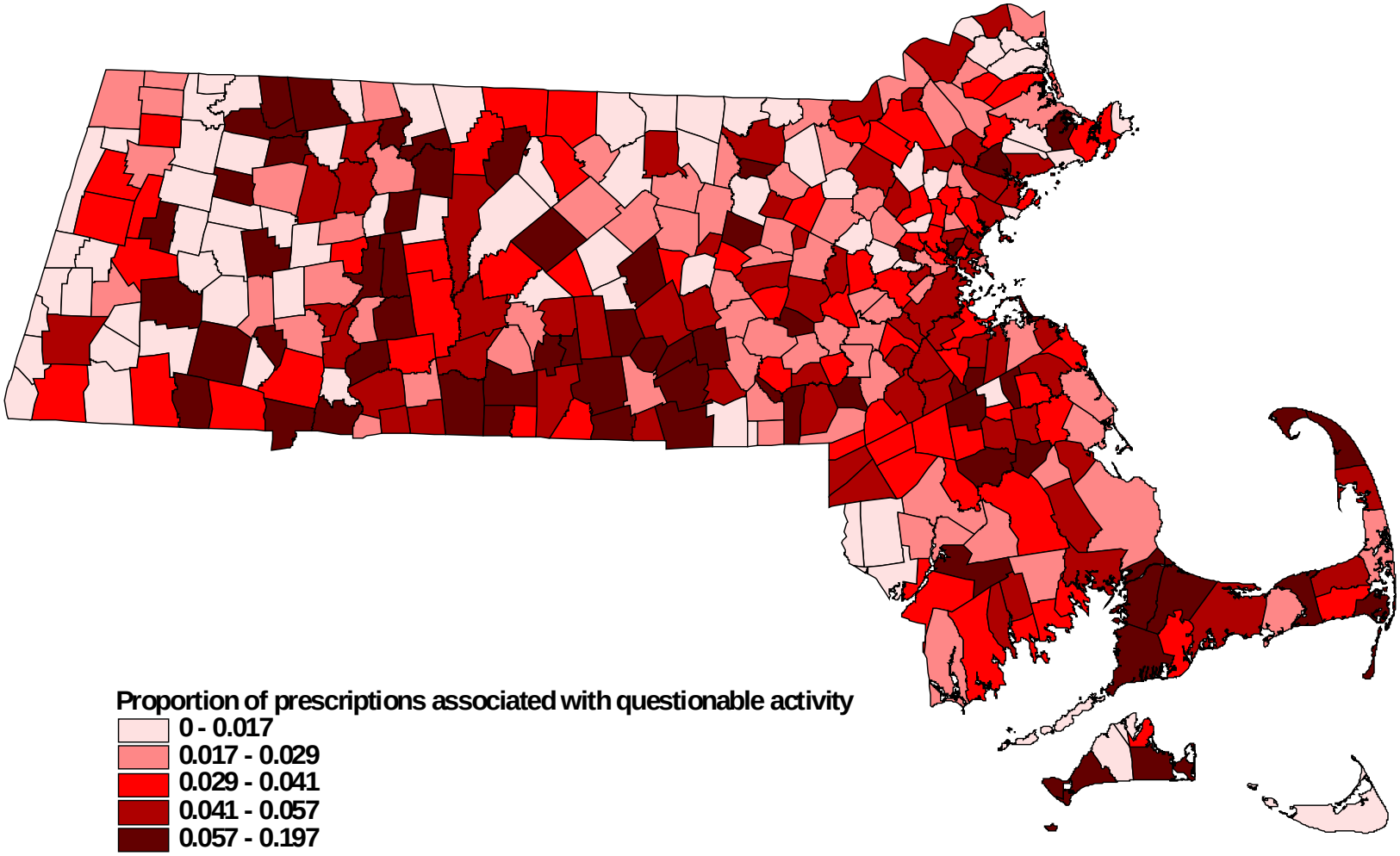
MA 2010: Average Number of Schedule II Opioid Prescriptions per Resident



MA 2010: Proportion of Opioid Patients with High Dosage



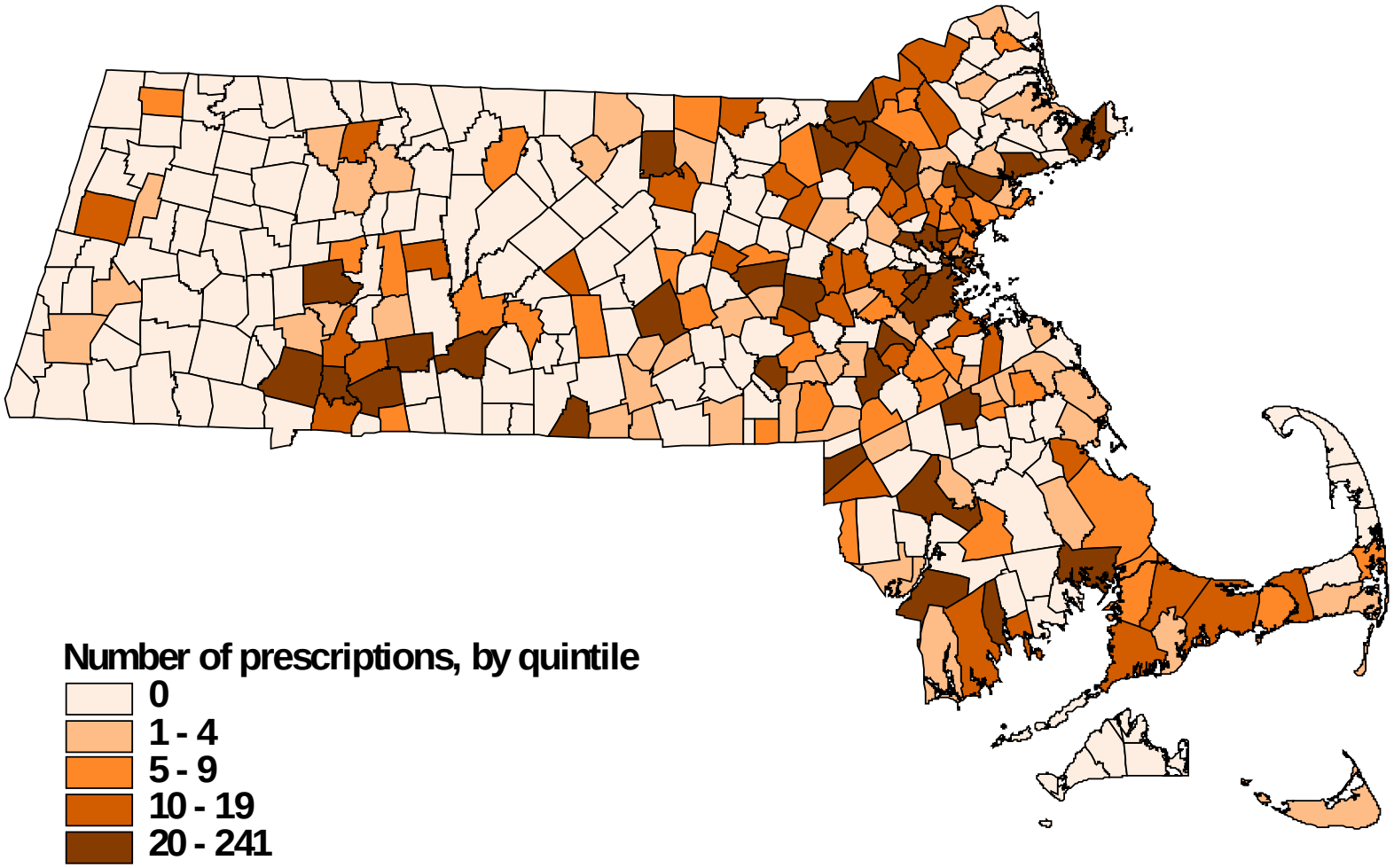
MA 2010: Schedule II Prescriptions Associated with Questionable Activity As a Proportion of All Schedule II Prescriptions



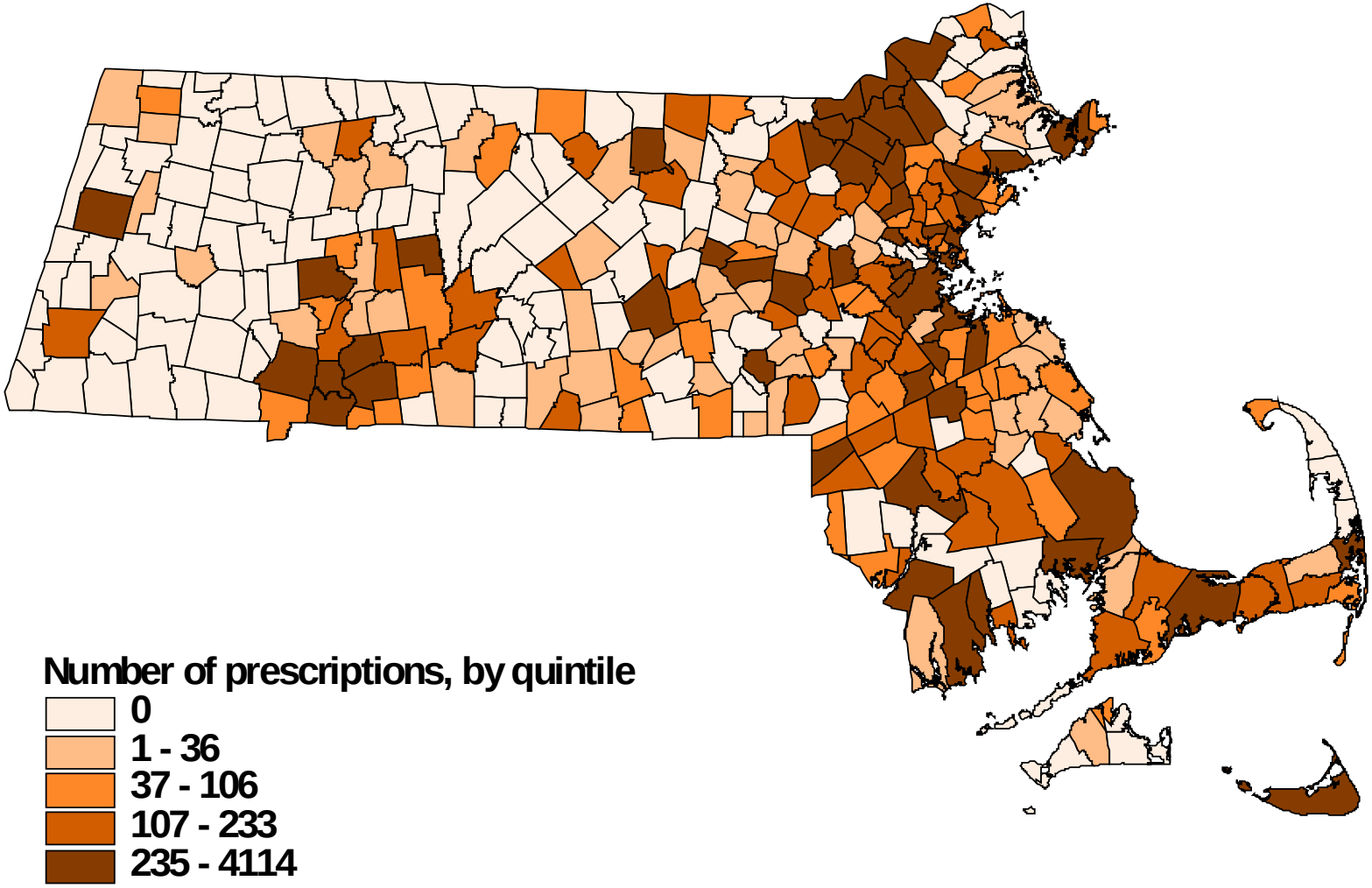
Another Example from Massachusetts

- The diffusion of OxyContin use and misuse
- Introduced in 1996

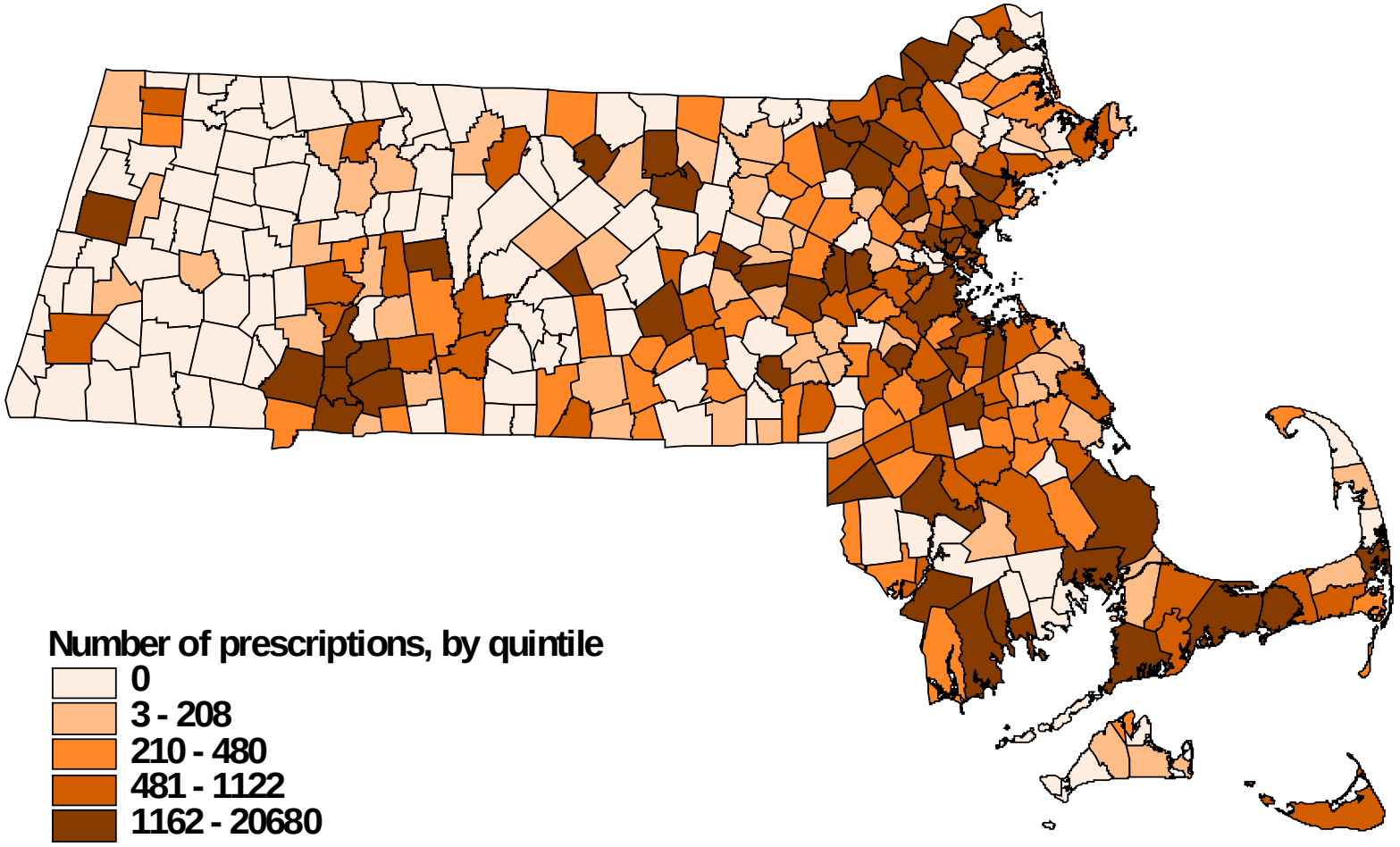
OxyContin Prescriptions in MA, 1996



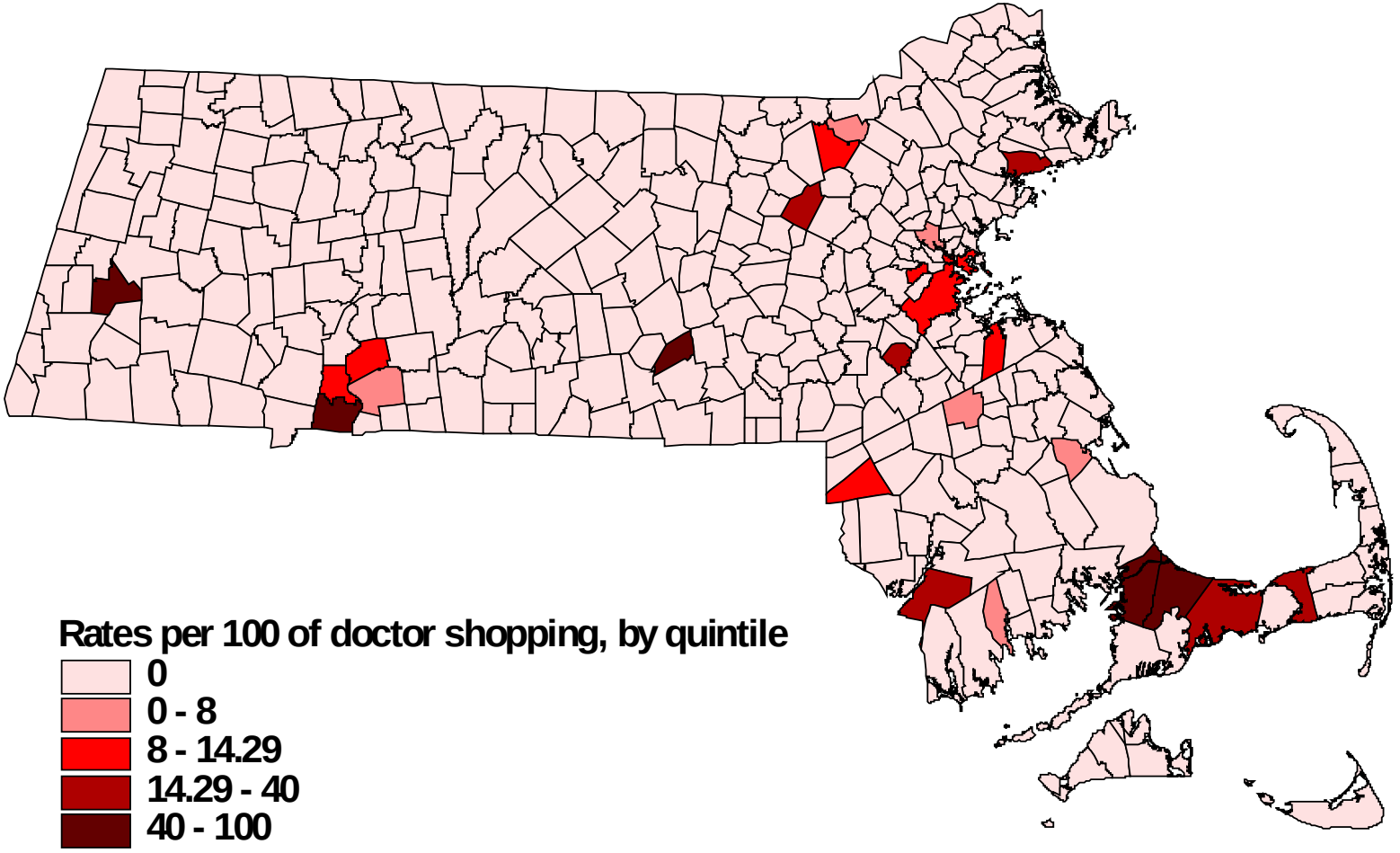
OxyContin Prescriptions in MA, 1998



OxyContin Prescriptions in MA, 2001



Rates of Doctor Shopping Associated with OxyContin in MA, 1996



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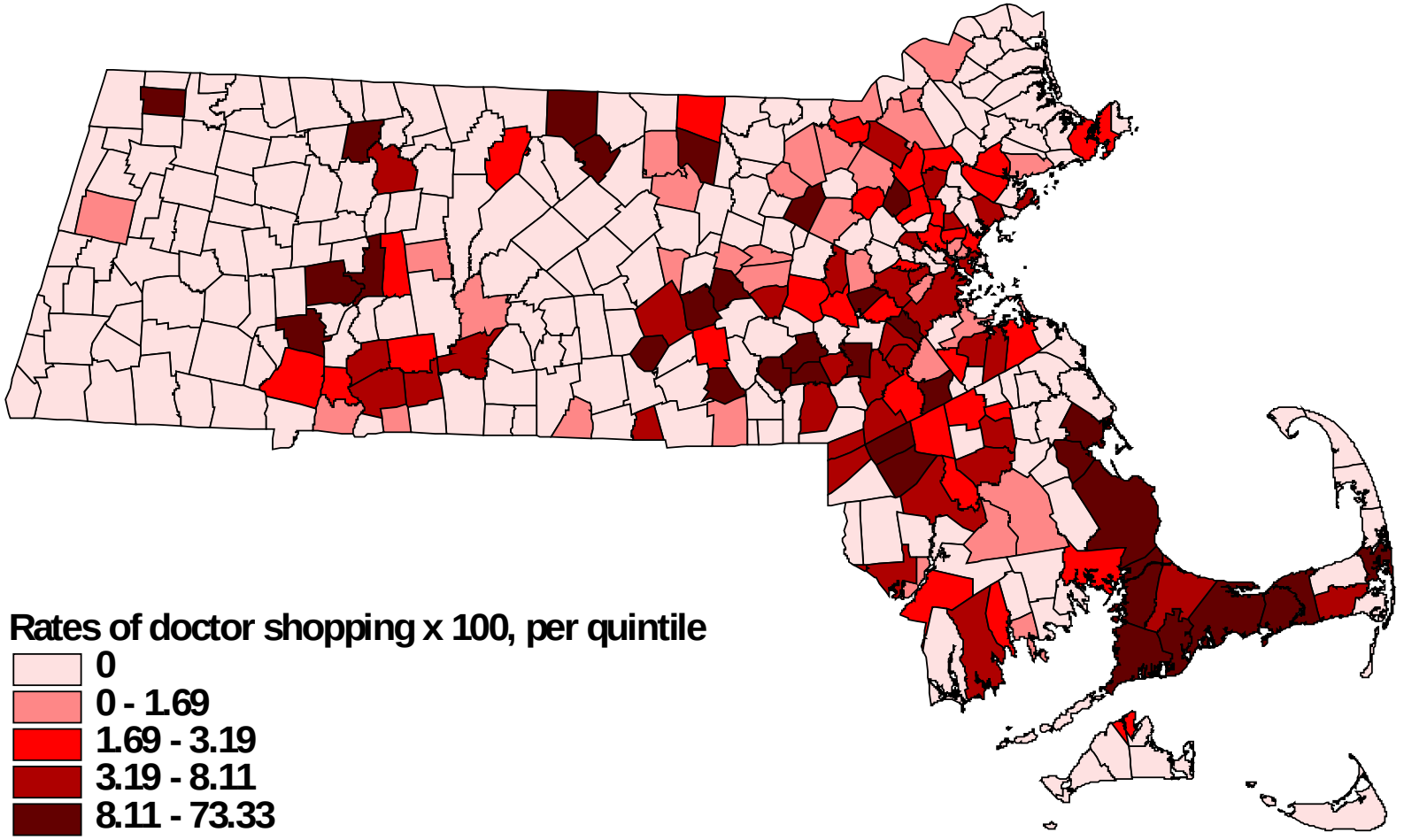

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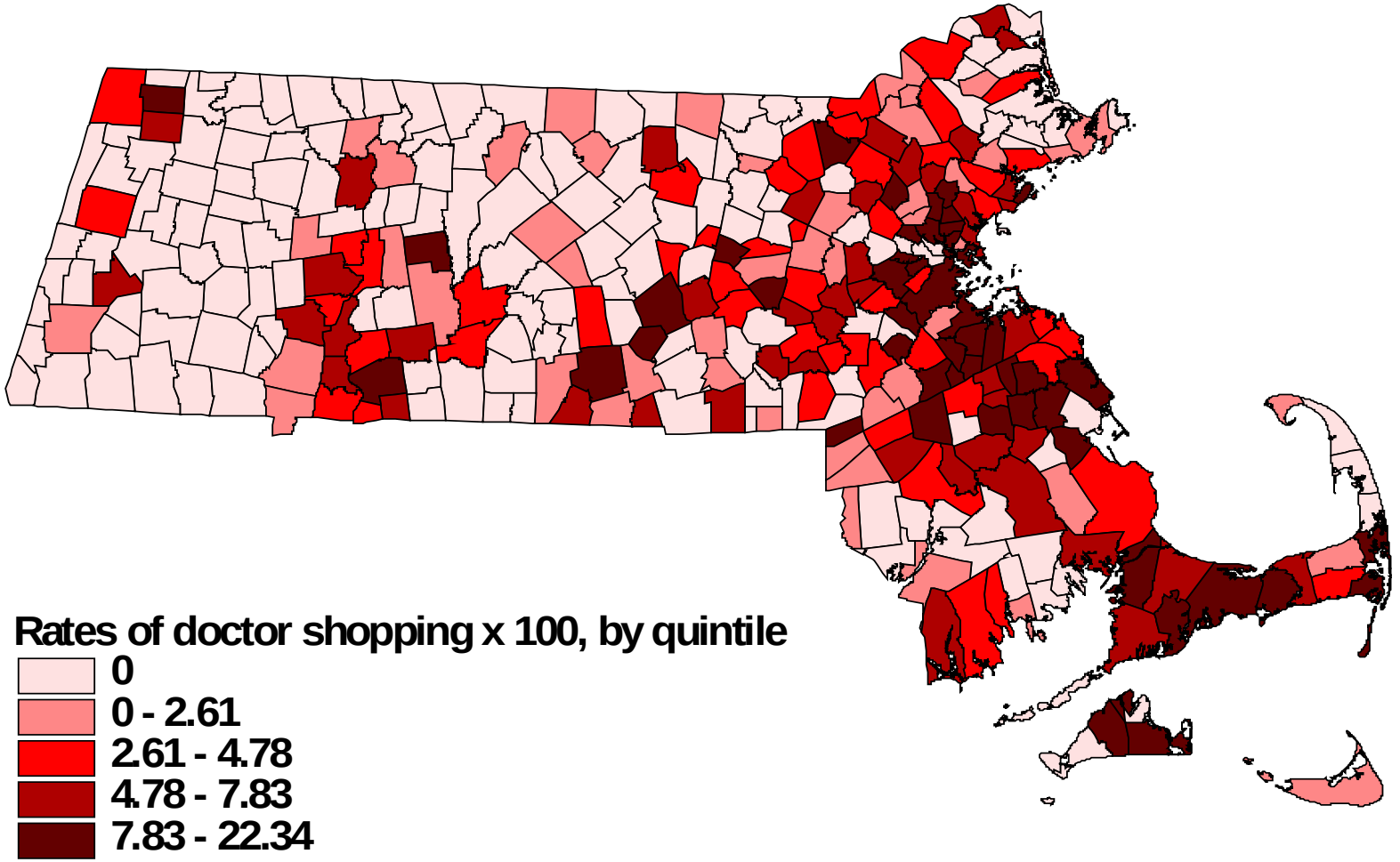
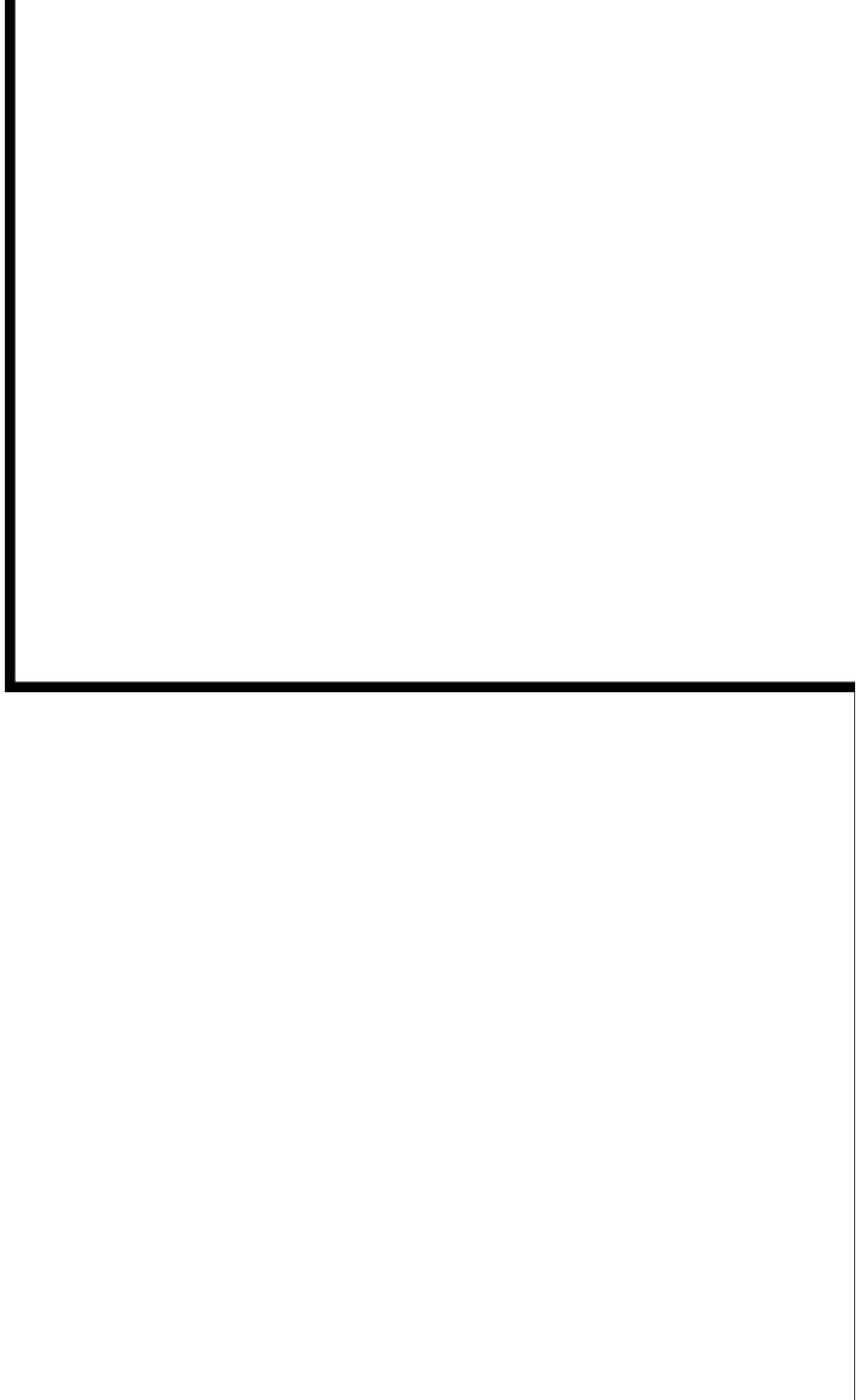
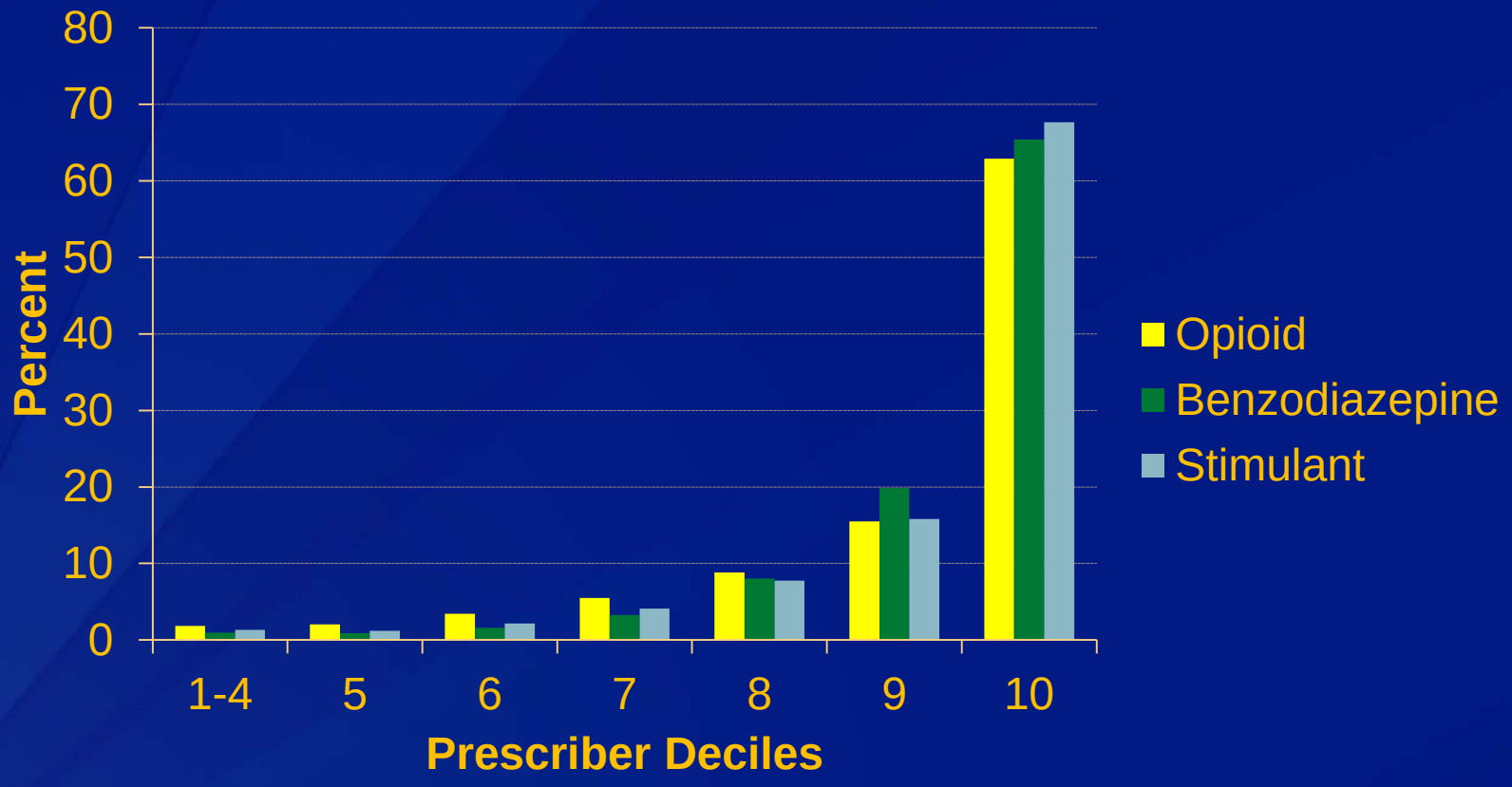


Georgia Assessment: Data from Alabama

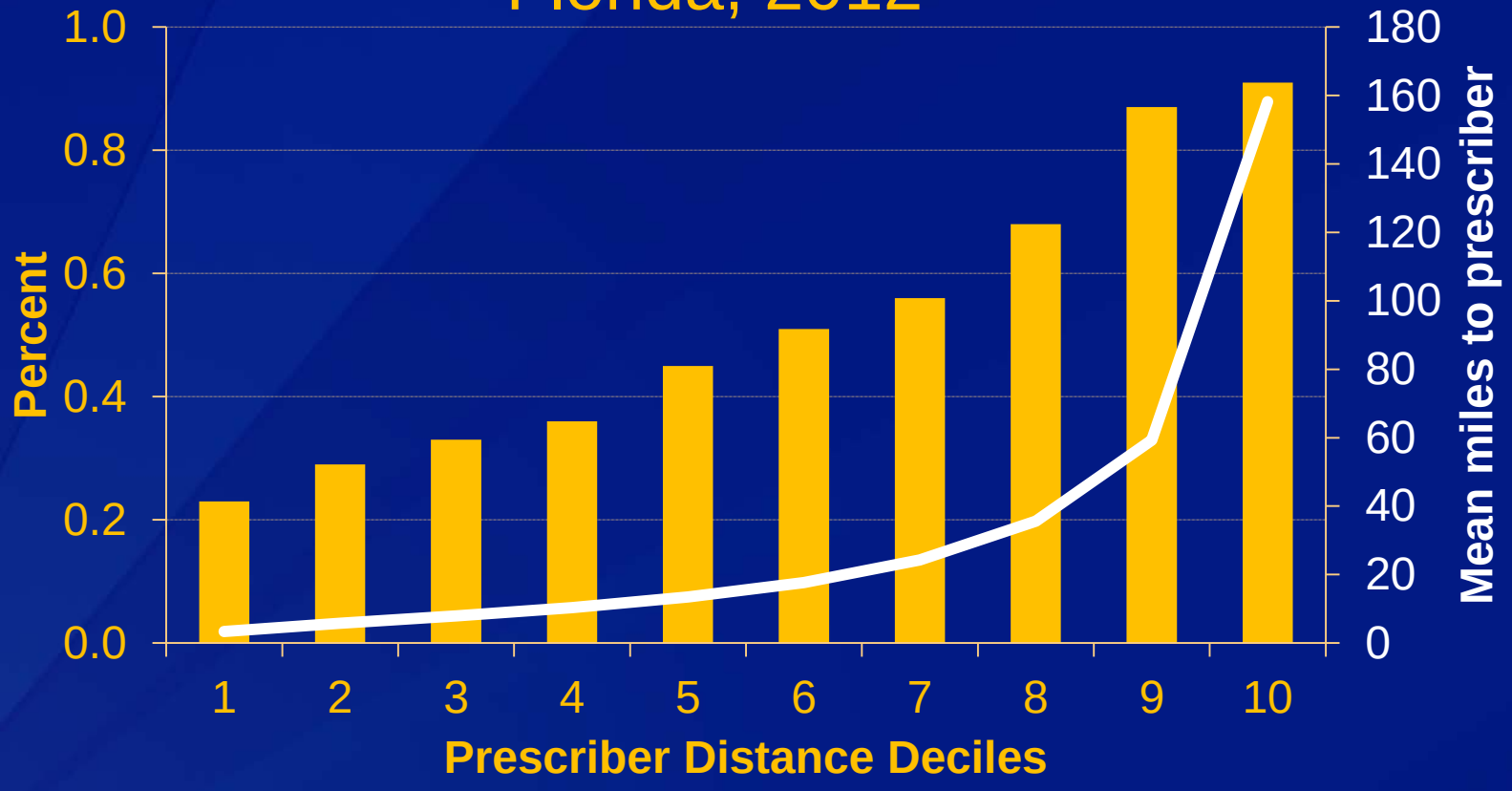
- Georgia PDMP administrators not allowed to examine PDMP data
- Data available from Alabama PDMP for prescriptions written by Georgia prescribers and filled in Alabama
- Measures aggregated by Zip Code of Georgia prescribers
- Examine average numbers of: patients per prescriber, prescriptions per patient, both together



Percent of prescriptions accounted for by prescriber decile by CS type, Florida, 2012

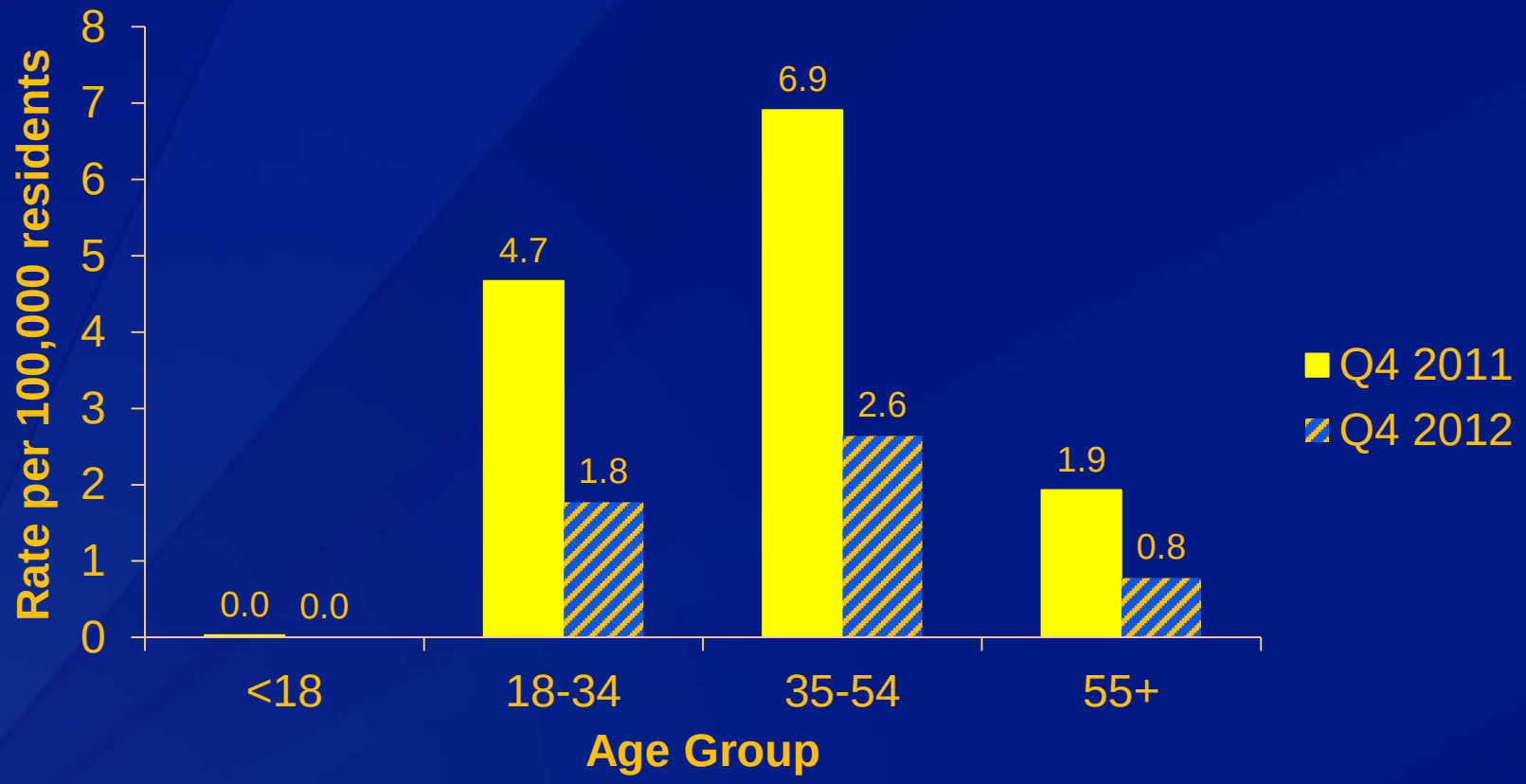


Percent of a prescriber's patients seeing multiple providers by distance deciles, Florida, 2012



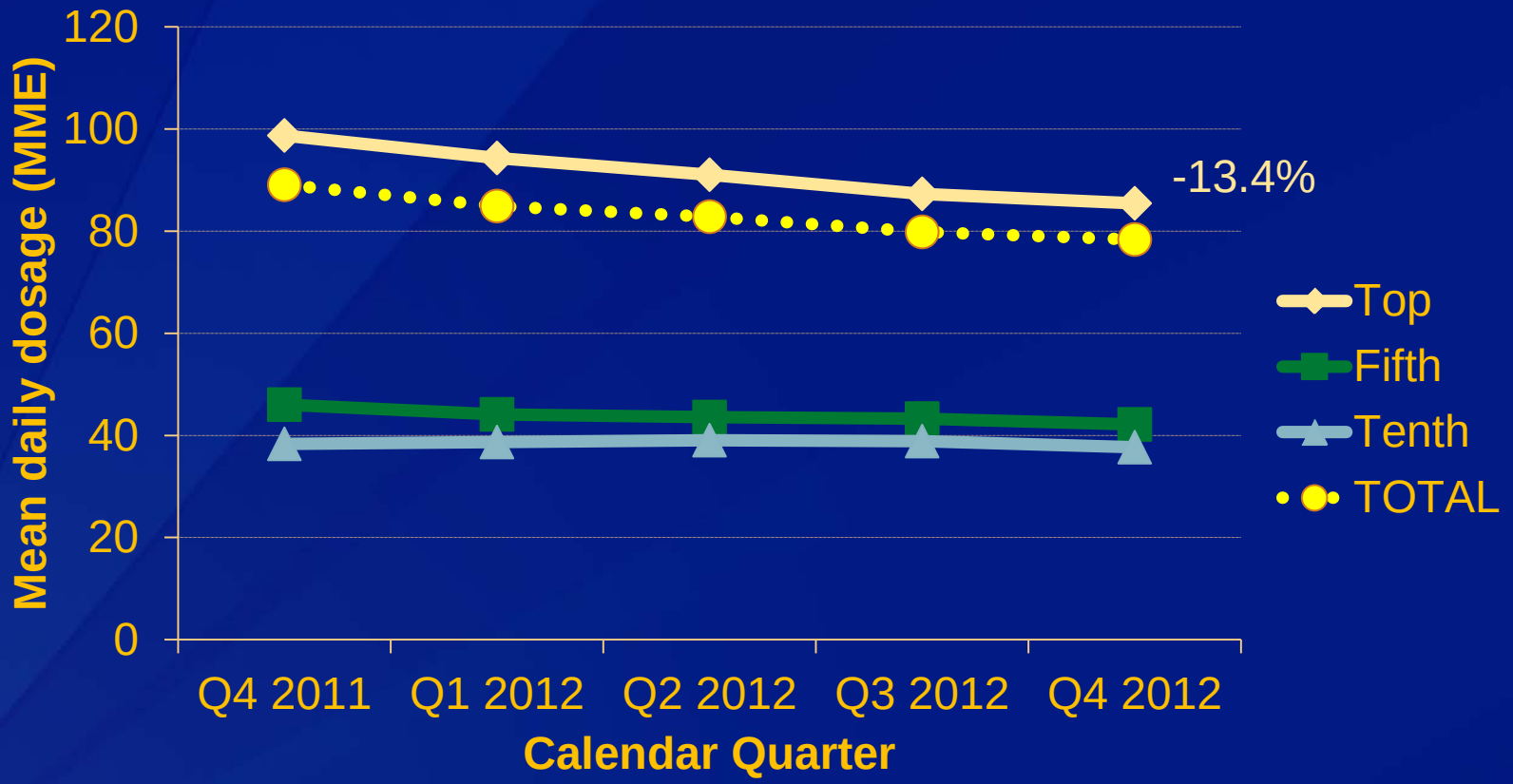
Prescribers are divided into deciles according to the mean distance between them and their patients for all CS prescriptions. Multiple providers means 5+ prescribers and 5+ pharmacies in 3 months. Includes out of state residents.

Multiple provider episode rates* for CS II drugs, Quarter 4 of 2011 vs. Quarter 4 of 2012, Florida



*Having CSII rx from 5+ prescribers dispensed at 5+ pharmacies during one quarter.

Mean daily opioid dosage by prescriber decile by quarter, Florida, Q4 2011 to Q4 2012



Prescriber deciles are based on number of opioid prescriptions.

Unsolicited Reporting: Massachusetts

Beginning in 2010, unsolicited reports were sent to prescribers of patients who had obtained CSII prescriptions from 4 or more prescribers, and filled them at 4 or more pharmacies, in a 6-month period

Effects, from 12 months prior to 12 months following the reports:

- Number of prescriptions decreased by an average of 50.3%
- Number of prescribers by 55.7%, pharmacies by 51.8%
- Dosage units by 39.2%, days' supply by 42.6%
- Total MMEs by 31.8%
- Decreases in no. of prescriptions, pharmacies, and days' supply were statistically significant relative to comparison group

Questions?