

## **SJR 20: Prescription Drug Abuse**

### ***State Approaches to Curbing Prescription Drug Abuse***

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January 2013

#### Background

Spurred by growing concern over prescription drug abuse, states around the country have taken steps to reduce misuse, abuse and diversion of the drugs. Most notably, all states except Missouri have established prescription drug databases that allow health care providers and others to review a patient's prescription drug history in an effort to identify and prevent abuse of the drugs.

States have taken numerous other steps, as well. The efforts can be broadly categorized as:

- public awareness and education;
- prescriber education and regulation;
- safe storage and disposal; and
- overdose prevention.

This briefing paper provides an overview of recent state actions related to prescription drug abuse based on a National Conference of State Legislatures (NCSL) summary of legislation and a review of news articles and state laws. It is not intended to provide a comprehensive review of all state laws related to prescription drug abuse. Instead, it looks at the general types of actions that states are undertaking and provides selected examples showing the varying ways in which states have approached similar topics. It also does not include activities related to prescription drug monitoring programs; those programs are discussed in the briefing paper entitled "*State Prescription Drug Monitoring Program Practices*."

#### Public Awareness and Education

A number of states and communities have established advisory councils or work groups to review the use and abuse of prescription drugs in their states. Often, these studies have resulted in recommendations for public education campaigns to raise awareness of the potential problems posed by prescription painkillers and of the need to safely use, store and dispose of the drugs.

Below are examples of public awareness activities undertaken in other states.

- **Arizona:** An initiative spearheaded by several state agencies and stakeholders resulted in a multi-pronged pilot program in three counties. The effort included training for health care professionals and law enforcement officials, as well as public education efforts aimed at both children and adults.

- **Idaho:** The 2013 Legislature appropriated \$627,600 for a one-year statewide media campaign focusing on the dangers of prescription drug abuse and on safe disposal of unused drugs.
- **Ohio:** At Ohio State University, the Student Society of Health-System Pharmacy undertook an on-campus effort to educate students about the dangers of abusing prescription drugs.

### Prescriber Education and Regulation

Because prescription narcotics generally enter both the legal and illegal markets only after they are prescribed, a number of states are looking at ways to ensure that the drugs are appropriately prescribed and dispensed. Some efforts focus on educating health care providers about the best practices to use in prescribing pain medications and treating patients for chronic pain. Others involve the standard of care prescribers are to use.

States have taken different approaches on the question of whether prescribers should be required or merely encouraged to follow certain standards. Some states are establishing mandatory practices for health care providers, while others are adopting guidelines.

Below are examples of efforts to educate prescribers or to regulate their activities related to prescribing controlled substances.

- **Delaware:** The 2013 Legislature approved legislation allowing only pharmacies to dispense more than a 72-hour supply of a controlled substance.
- **Florida:** The 2011 Legislature established numerous requirements for pain clinics and for physicians treating chronic pain. They included requiring doctors to conduct physical examinations, enter into treatment plans with patients receiving prescription painkillers, schedule regular followup appointments, and use tamper-proof prescription pads.
- **Indiana:** The Indiana Medical Licensing Board last year established requirements that physicians must follow when prescribing opioids to patients who do not have a terminal illness and who aren't in hospice or palliative care. The requirements kick in when a patient receives more than 60 opioid-containing pills in a month or has a morphine equivalent dose of more than 15 milligrams per day for more than three consecutive months. In those instances, a doctor must — among other things — check the prescription drug registry, assess the patient's mental health status and substance abuse risk, conduct annual drug tests, and see the patient at least every four months.
- **Kentucky:** In 2012, the Legislature passed a comprehensive prescription drug bill that, among other things, requires the state's health care regulatory boards to establish mandatory prescribing and dispensing standards for controlled substances, requires practitioners to make a written treatment plan for individuals being treated with controlled substances, and establishes continuing education requirements related to treatment of chronic pain.
- **New York:** The New York City Health Department carried out a public health initiative that focused on educating physicians about prescribing recommendations and providing patient education materials.
- **Ohio:** A working group of the Governor's Cabinet Opiate Action Team has established guidelines for all prescribers. The guidelines encourage prescribers to re-evaluate the

safety and effectiveness of a patient's pain management plan if the patient has been taking a morphine equivalent dose of 80 milligrams a day for more than three months for chronic, non-terminal pain.

- **Oklahoma:** The 2013 Legislature approved a bill prohibiting refills of prescriptions for hydrocodone.
- **Tennessee:** The 2013 Legislature established limits on opioid prescribing and refills and required practitioners to obtain continuing education on controlled substances prescribing.
- **Utah:** The 2013 Legislature required doctors who prescribe controlled substances to obtain continuing education on prescribing practices in order to qualify for renewal of their licenses.
- **Washington:** The Washington State Agency Medical Directors Group published guidelines for opioid use for chronic non-cancer pain in 2010. The guidelines are designed to help primary care providers determine when to prescribe opioids, how to calculate safe and effective dosage levels, and how to treat patients whose morphine equivalent dose exceeds 120 milligrams a day. Legislation in 2010 also required state regulatory boards to establish rules on pain management practices for their licensees, including dosing criteria.

In addition, many states have passed laws or administrative rules that require pharmacists to check the identification of individuals who are picking up certain prescription drugs. A November 2013 summary compiled by the National Association of Model State Drug Laws showed that 32 states had such laws, which varied somewhat in scope and requirements.

#### Safe Storage and Disposal

Organizations working on prescription drug abuse stress the importance of storing prescription painkillers safely in the home and disposing of unused drugs properly to prevent diversion of the drugs. In many states, law enforcement agencies have established drop-off locations for unused medications. Some communities also sponsor and promote "Take Back Days" to encourage people to return their medications to a designated location for safe disposal.

Many states have obtained and used federal grants to purchase drop boxes and promote safe disposal activities.

#### Overdose Prevention

Recent proposals related to prescription drug abuse have focused on preventing drug overdoses and unintentional overdose deaths through a two-pronged approach that:

- allows emergency responders and others to administer drugs designed to counter the effects of opiate overdoses; and
- provides immunity to people who seek help for themselves or someone else who is experiencing an overdose.

According to NCSL, seven states approved legislation that addressed drug overdoses in one of those two ways in 2013.