VIRGINIA'S PRESCRIPTION MONITORING PROGRAM

Promoting Appropriate Use of Controlled Substances

Ralph Orr
Director, Virginia Prescription Monitoring Program

CHANGES!

- Legislation becoming effective July 1, 2018
  - Covered Substances
  - Exemption change for Veterinarians
- Emergency Department Care Coordination Initiative
- NarxCare Enterprise Approval

WHAT IS A COVERED SUBSTANCE?

- §54.1-2519: As of July 1, 2018: "Covered substance" means all controlled substances included in Schedules II, III, and IV*; controlled substances included in Schedule V for which a prescription is required; naloxone;* and all drugs of concern that are required to be reported to the Prescription Monitoring Program, pursuant to this chapter.

WHO MUST REPORT? DISPENSERS!

- Pharmacies: Resident and Non-resident
- Physicians Selling: Think Urgent Care Centers
- Dentists
- Veterinarians not applying the legislative exemption

SB226 CHANGED EXEMPTION FOR VETERINARIANS

- §54.1-2522: 7. Effective July 1, 2018 reads: Dispensing of covered substances by veterinarians to animals within the usual course of their professional practice **for a course of treatment to last seven days or less.**

Emergency Department Care Coordination Initiative

- Connects 22 Health System Emergency Departments
- Go Live June 29, 2018
- Seven Health Systems with license for integration will also receive a “Narx Score Ribbon” based on PMP data in an EDIE alert
  - Further integration linkage will be made available in August

PRESCRIBER REPORTS

- One page report
  - Designed to inform prescribers of their prescribing history
  - Compare their prescribing with peers within role and specialty
  - A metrics document accompanies the report
- April Reports (4th round):
  - Over 14,800 reports sent
- Important Communications
  - Prescribers should review profile to ensure correct DEA and Healthcare Specialty
  - Delegates should be reminded to select the correct prescriber supervisor when making PMP requests
  - Prescriber Reports are now available in AWARxE under the prescriber's account (if a report has been compiled for that prescriber)

STATE
Seal

STATE PRESCRIPTION MONITORING PROGRAM
PDMP Prescriber Report

APPRISS HEALTH

DATE COVERED BY THIS REPORT: 10/01/2016 - 03/31/2017

DATE: 5/30/2017

Carl Flansbaum | Physician | SPECIALTY: Family Medicine | DEA #: AB123456789

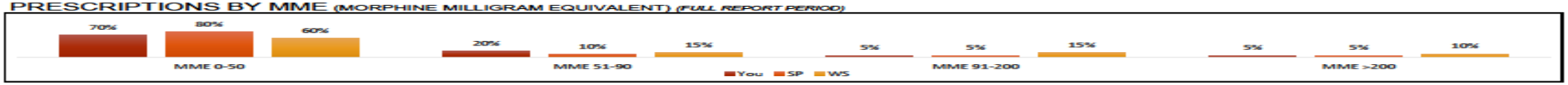
MEMBER NUMBERS IN YOUR PEER GROUPS: SIMILAR PRESCRIBER (SP): 1000 WITHIN YOUR SPECIALTY (WS): 300

NUMBER OF YOUR PATIENTS RECEIVING OPIOIDS (MONTHLY AVERAGE)			NUMBER OF PRESCRIPTIONS YOU WROTE FOR OPIOIDS (MONTHLY AVERAGE)		
400	300	350	1015	750	800
You	Similar Prescriber (SP)	Within your Specialty (WS)	You	Similar Prescriber (SP)	Within your Specialty (WS)

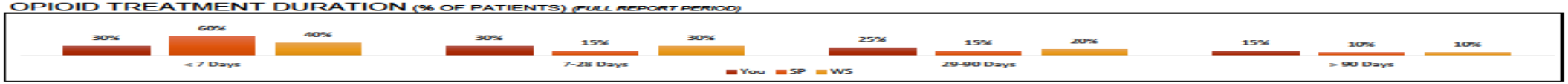
TOP MEDICATIONS PRESCRIBED (FULL REPORT PERIOD)

HYDROCODONE BITARTRATE/ACETAMINOPHEN	ALPRAZOLAM	ZOLPIDEM TARTRATE

PRESCRIPTIONS BY MME (MORPHINE MILLIGRAM EQUIVALENT) (FULL REPORT PERIOD)

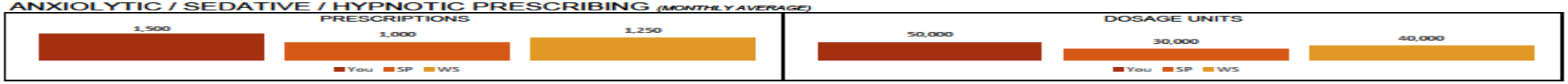


OPIOID TREATMENT DURATION (% OF PATIENTS) (FULL REPORT PERIOD)



PRESCRIPTION VOLUMES (TOTAL MME) (MONTHLY AVERAGE)

ANXIOLYTIC / SEDATIVE / HYPNOTIC PRESCRIBING (MONTHLY AVERAGE)



PDMP USAGE (MONTHLY AVERAGE)

PDMP REQUESTS BY YOU	PDMP REQUESTS BY YOUR DELEGATE(S)	SIMILAR PRESCRIBER AVERAGE	SPECIALTY FIELD AVERAGE
100	75	200	150

PATIENTS EXCEEDING MULTIPLE PROVIDER THRESHOLDS (FULL REPORT PERIOD)

PATIENTS EXCEEDING MULTIPLE PRESCRIBER THRESHOLD	PATIENTS EXCEEDING MULTIPLE PHARMACY THRESHOLD
25	15

DANGEROUS COMBINATION THERAPY

PRESCRIPTIONS FOR OPIOID + BENZO IN SAME MONTH		PRESCRIPTIONS FOR OPIOID + BENZO + CARISPORODOL IN SAME MONTH	
25	35	15	20
BY YOU	BY YOU + OTHER PRESCRIBERS	BY YOU	BY YOU + OTHER PRESCRIBERS

CLINICAL ALERTS

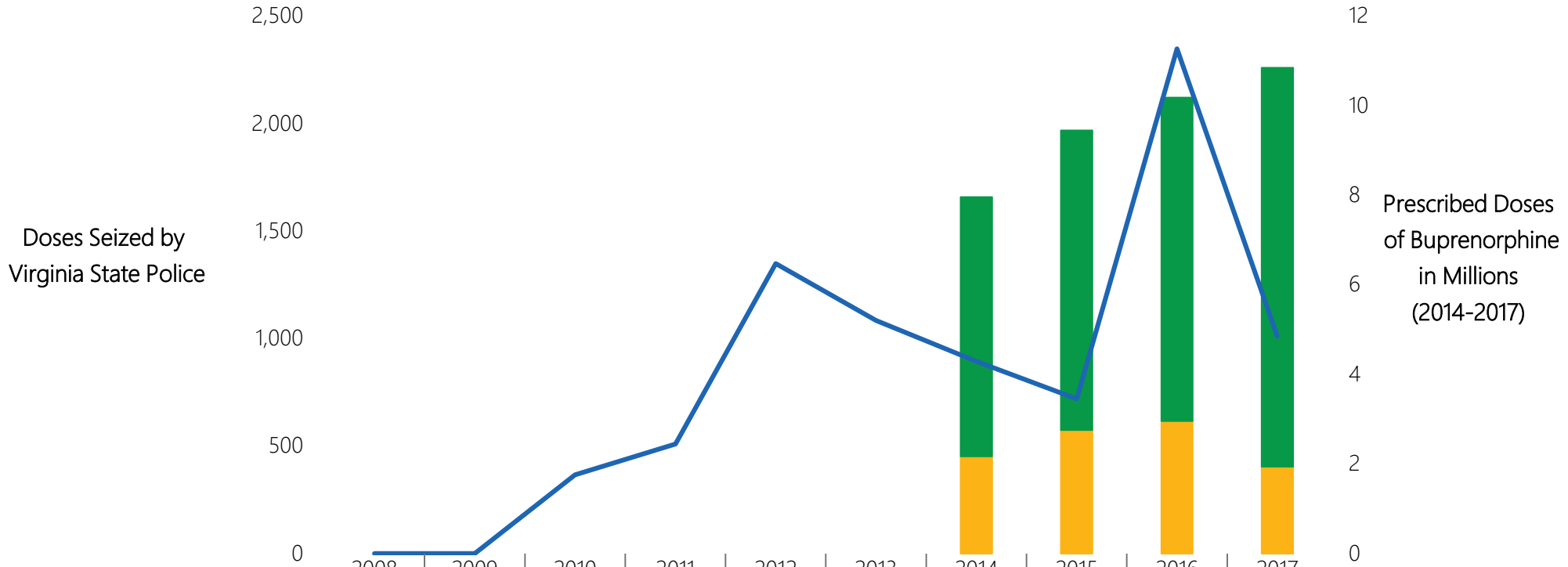
- Calculated daily, appears in application, no repeat notification period of one month. No emails are being sent at this time.
- Multiple Provider Episodes (MPE)—3 or more prescribers and pharmacies in a 60 day period
- MME Alert—over 120 Morphine Milligram Equivalents (MME) Daily
- Combination Therapy: Opioids and Benzodiazepines—active prescriptions at the same time

Date Range	Total Clinical Alerts for All Prescribers	Total Prescribers Received Alerts	Prescriber/ Dispenser Alerts	Daily Active MME Threshold Alerts	Opioid & Benzo Threshold Alerts
01/29/2018-02/04/2018	81,594	9,183	7,600	30,281	43,713
02/26/2018-03/04/2018	47,553	7,480	6,862	18,694	21,997
4/2/2018 - 4/8/2018	41,231	6,163	3,683	16,142	21,406
4/30/2018 - 5/6/2018	34,576	6,710	5,334	9,468	19,774

ADVANCED ANALYTICS

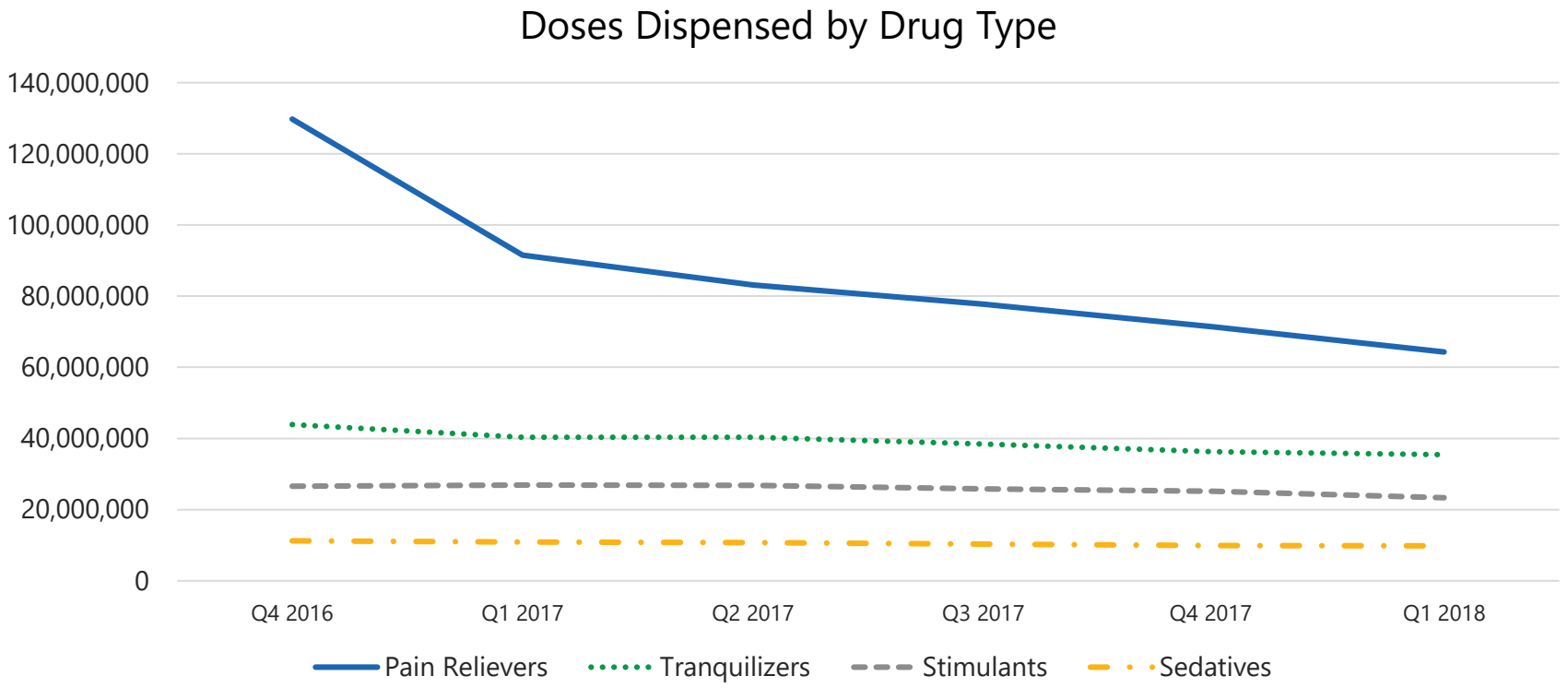
- Phase 1 received November 15, 2017 along with enhanced version of Appriss provided TABLEAU (non-public)
- Phase 2 release scheduled for 2nd quarter 2018

Virginia Buprenorphine Prescribing and Police Seizures



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Buprenorphine/Naloxone Doses Prescribed							5,793,690	6,693,413	7,224,713	8,906,709
Mono-Product Buprenorphine Doses Prescribed							2,169,068	2,754,270	2,956,241	1,940,793
Total Amount of Buprenorphine Doses Seized	0	0	366	509	1,349	1,084	894	719	2,348	1,011

Source: Buprenorphine Seizures Data 2008-2017 Virginia State Police Bureau of Criminal Investigations. Buprenorphine prescription doses (2014-2017) from Virginia Prescription Monitoring Program



From the fourth quarter of 2016 to the first quarter of 2018 Pain Reliever Doses declined from 129,797,789 to 64,291,723 which represents a 49.53% decline. In that same time period, tranquilizer doses declined by 19.17% and sedatives declined by 12.59%. There was a 12.31% decline between the fourth quarter of 2016 & the first quarter of 2018 for stimulants but there was an increase from the fourth quarter of 2016 to peak in the first quarter of 2017.

CONTACT INFORMATION

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An Overview of Virginia's Prescription Monitoring Program