

Maine Department of Health & Human Services
Office of Substance Abuse & Mental Health Services
Prescription Monitoring Program

Prescription Monitoring Program Implementation Report

2017

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Purpose

Pursuant to Public Law ch. 488 Sec. 39, The Department of Health and Human Services shall report to the joint standing committees of the Legislature having jurisdiction over health and human services matters and over occupational and professional regulation matters, no later than January 31, 2018, with progress on implementing the provisions of this Act. The report contains information on the following:

- Registration of prescribers and dispensers in the Controlled Substances Prescription Monitoring Program under the Maine Revised Statutes, Title 22, chapter 1603;
- Data regarding the checking and using of the Controlled Substances Prescription Monitoring Program by data requesters;
- Changes in the average daily MME;
- Data regarding the total number of opioid doses prescribed;
- Progress on electronic prescribing of opioid medication;
- Improvements to the Controlled Substances Prescription Monitoring Program through the request for proposals process including feedback from prescribers and dispensers on those improvements.
 - A mechanism or calculator for converting dosages to and from morphine milligram equivalents;
 - A mechanism to automatically transmit de-identified peer data on an annual basis to prescribers of opioid medication;
 - Allowance for a broader authorization for staff members of prescribers to access the program including a single annual authorization for staff members at a licensed hospital and a pharmacy; Improvements in communication regarding the ability for prescribers and pharmacists to authorize staff members to access the program on behalf of the prescriber or pharmacist;
 - Improvements in the speed of the program for prescribers and pharmacists required to submit information and check the program, and the ability for prescribers and pharmacists to tailor the functions of the program to fit into the workflow of the prescribers and pharmacists required to access the program;
 - The establishment of a data modifier for information from a veterinarian prescribing opioid medication to an animal that differentiates the recipient of the opioid prescription from people.

Definitions

Active User – An individual with a completed and approved registration, login and profile within the PMP.

Dangerous Combination Therapy – Opioid and Benzodiazepine – Concurrent prescriptions for an opioid medication and a benzodiazepine medication.

Dangerous Combination Therapy – Opioid, Benzodiazepine & Carisoprodol – Concurrent prescriptions for an opioid medication, benzodiazepine medication and Carisoprodol

Delegate/Designee – Any staff member duly authorized by a prescriber

Delegate – Licensed – An individual authorized as a delegate that holds an active license in the State of Maine as a paraprofessional. (*Ex. CNA, LPN, RN*)

Delegate – Unlicensed – An individual authorized as a delegate that does not hold an active license in the State of Maine, but performs administrative duties within a medical practice. (*Ex. Medical Assistant, Office Manager, Administrative Assistant*)

Morphine Milligram Equivalents (MME) – The standard value utilized to compare opioid doses and potency.

Multiple Pharmacy Threshold – A patient visiting 5 or more pharmacies within a 30-day period

Multiple Provider Threshold – A patient visiting 5 or more providers within a 30-day period

Opiate Agonist – A drug that activates the opioid receptors in the brain fully resulting in the full opioid effect. (*Examples: oxycodone, hydrocodone, morphine*)

Opiate Partial Agonist – A drug that activates the opioid receptors in the brain to a much lesser degree than a full agonist. (*Examples: Subutex, Suboxone, Buprenorphine, LAMM*)

Patient Report – A report that displays the prescription drug activity for a specific patient.

PMP Clearinghouse – The system used to collect and submit controlled substance dispensations to the PMP.

Prescriber Report – A quarterly report that provides information regarding current prescribing volumes, behaviors and PMP use in comparison with the recipient's peers.

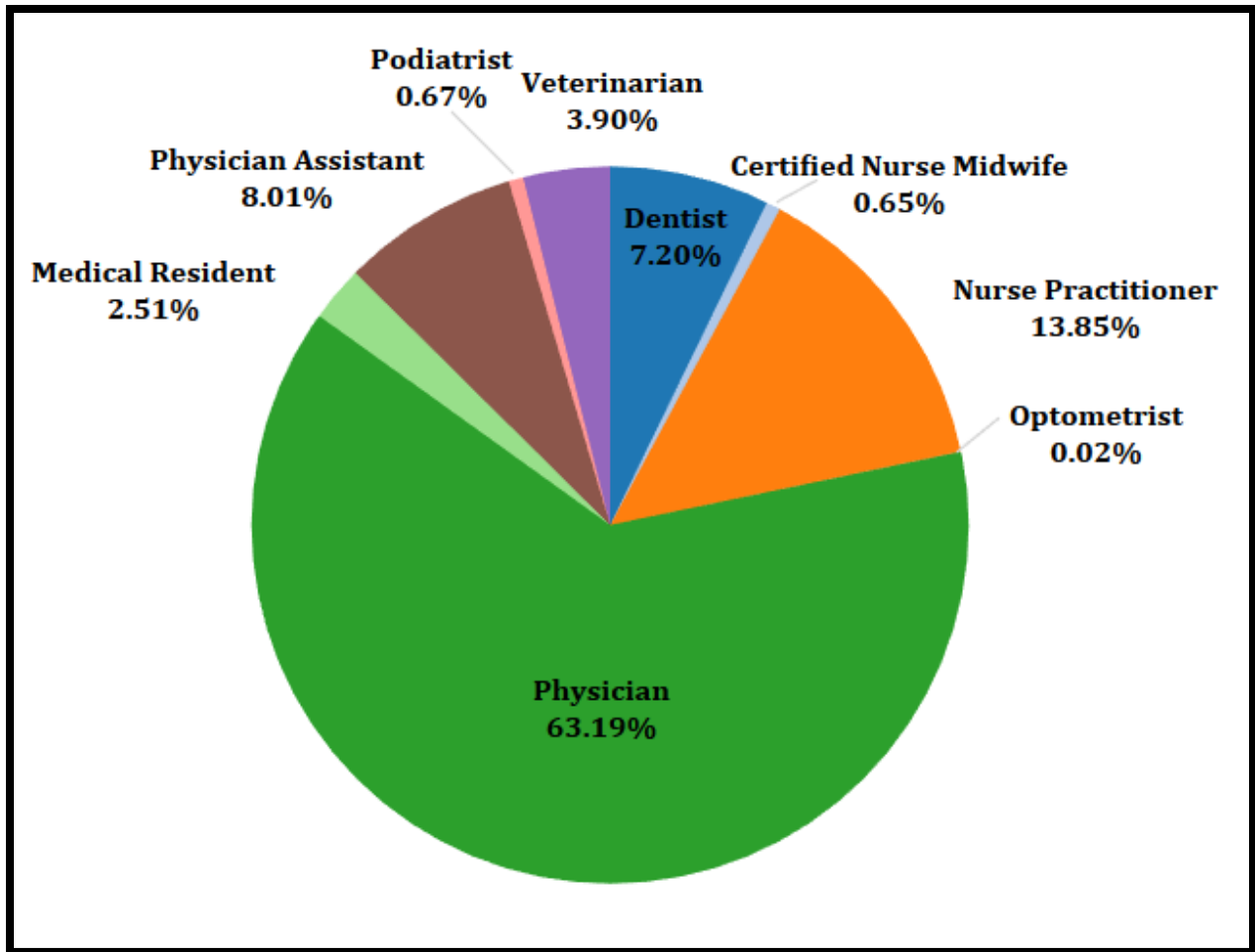
Similar Prescriber – Individuals with matching roles and specialties

Total Quantity – The total number of doses for a specific medication. (*Doses include patches, liquids, tablets and capsules*)

Within Specialty – Individuals with matching specialties

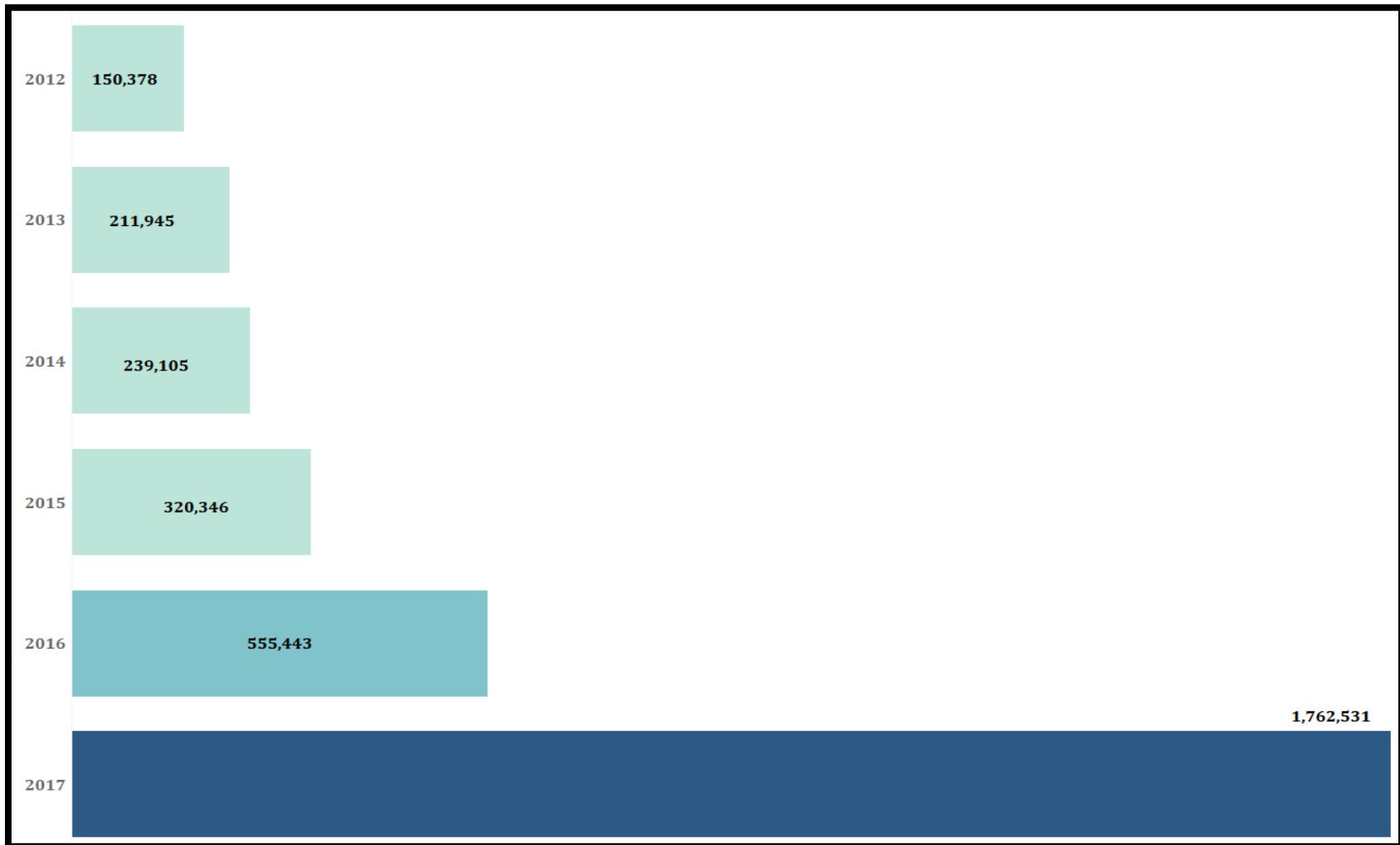
Registration of prescribers and dispensers in the Controlled Substances Prescription Monitoring Program under the Maine Revised Statutes, Title 22, chapter 1603;

As of December 31, 2017, there are 11,528 active prescribers and 1,499 active dispensers registered in the PMP.



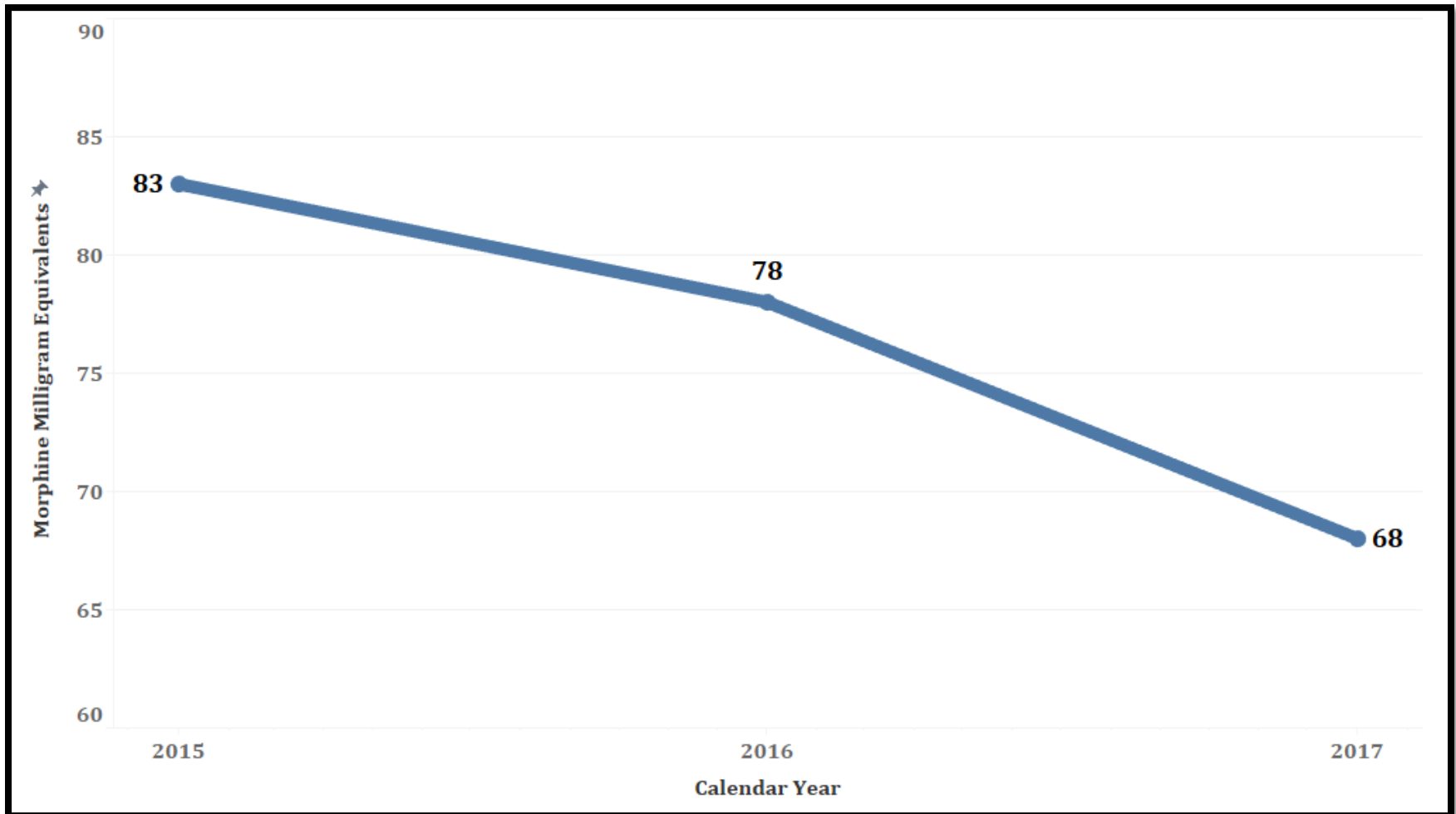
Data regarding the checking and using of the Controlled Substances Prescription Monitoring Program by data requesters;

In 2016, there were a total of 555,443 PMP checks. As of December 31, 2017, there were a total of 1,762,531 PMP checks.



Changes in the average Daily MME by Year;

2015: 83.1 2016: 77.6 2017: 68.1

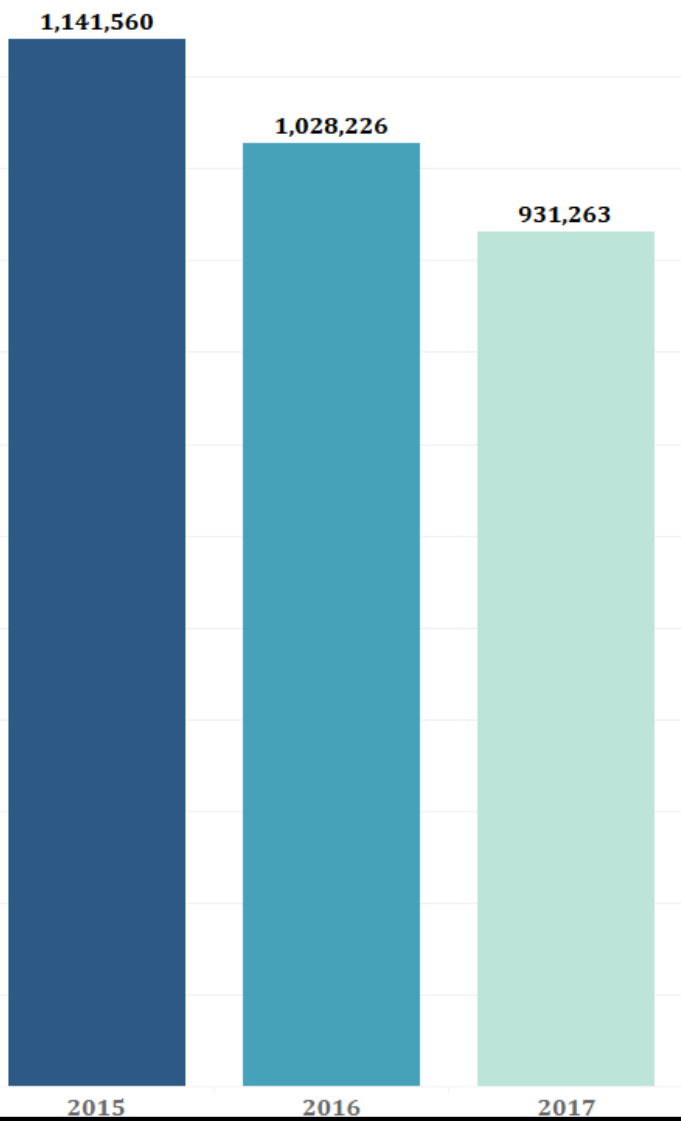


Data regarding the total number of opioid doses prescribed;

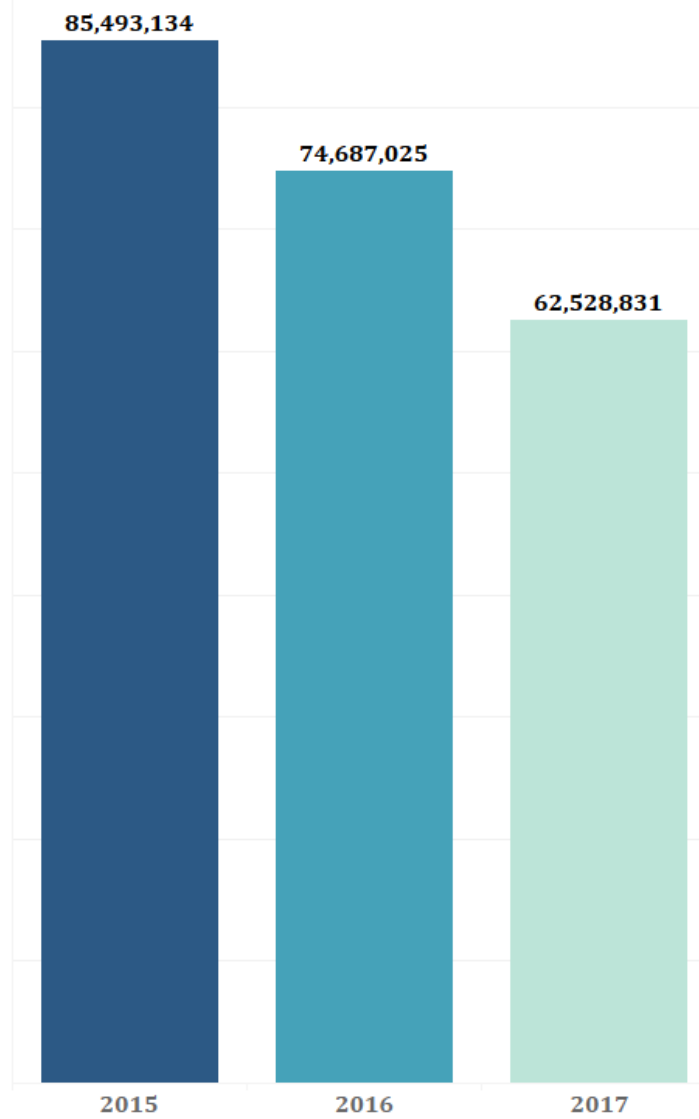
** Note: The totals below include opiate agonists only.*

Year	2013	2014	2015	2016	2017
Total Prescriptions	997,097	1,070,442	1,141,560	1,028,226	931,263
Total Doses	70,101,673	77,182,840	85,493,134	74,687,025	62,528,831

Total Prescriptions



Total Doses

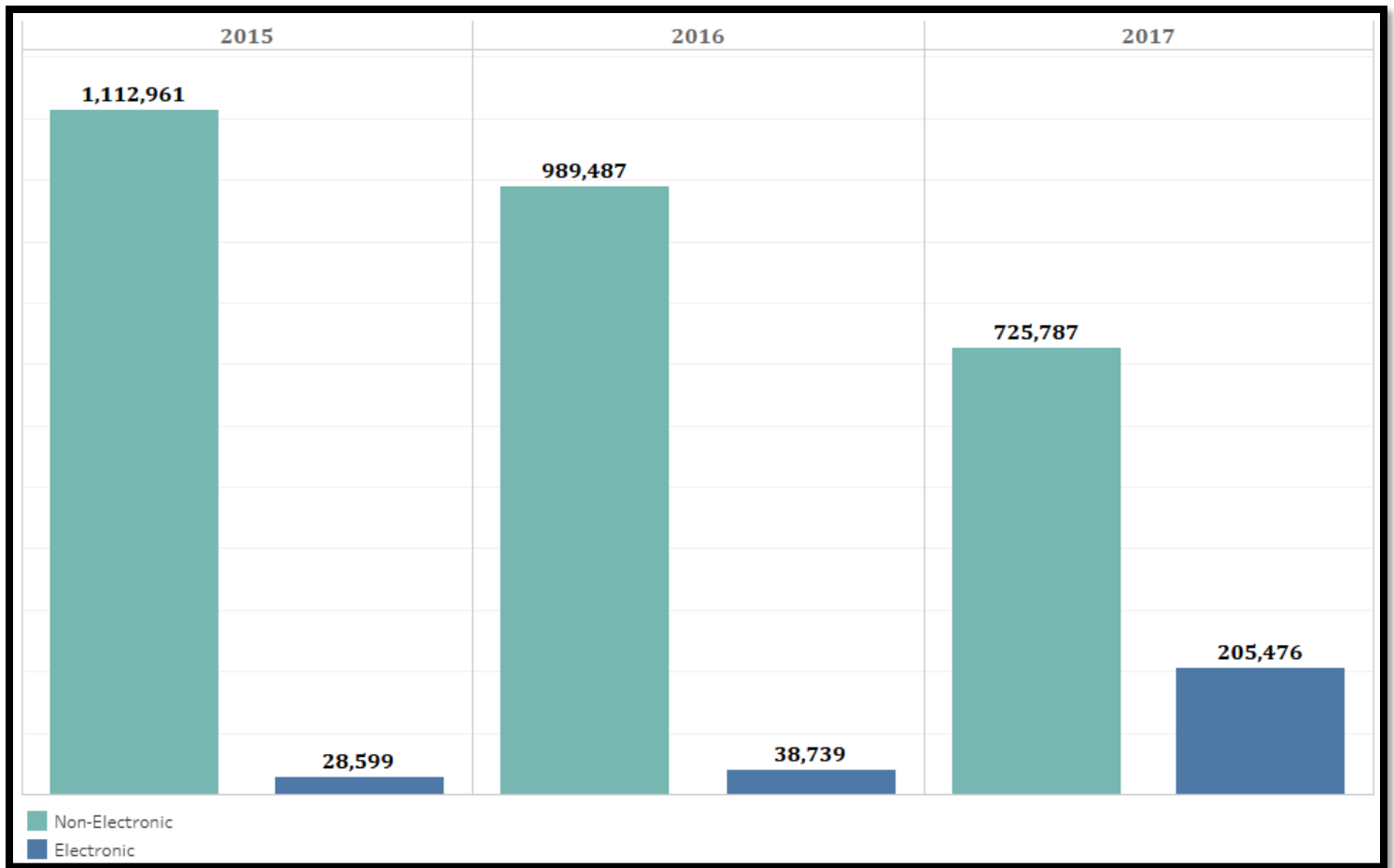


Progress on electronic prescribing of opioid medication;

**Note: Totals below include opiate agonists only.*

**Note: Electronic Prescribing was not required until August 1, 2017*

Year	2015	2016	2017
Electronic	28,599	38,739	205,476
Non-Electronic	1,112,961	989,487	725,787



Improvements to the Controlled Substances Prescription Monitoring Program through the request for proposals process including feedback from prescribers and dispensers on those improvements.

A mechanism or calculator for converting dosages to and from morphine milligram equivalents; (MME)

The PMP system automatically calculates the daily MME for a patient and displays this on their patient report

A mechanism to automatically transmit de-identified peer data on an annual basis to prescribers of opioid medication;

Prescriber Reports are disseminated to prescribers on a quarterly basis. These reports compare the recipient with a similar prescriber and a prescriber within their specialty. A *similar prescriber* is defined as both the role and specialty match the recipient whereas *within specialty* is only based on the specialty matching. The following areas are compared:

- Number of Patients receiving opioids (Monthly Average)
- Number of Prescriptions written for opioids (Monthly Average)
- Top 3 Medications Prescribed
- Percentages of opioid prescriptions written by MME (0-50; 51-90; 91-200; 200+)
- Opioid Treatment Duration in days – Percent of Patients (less than 7; 7-28; 29-90; 90+)
- Prescription Volume by Total MME and Ingredient (Oxycodone, Hydrocodone, all opiates)
- Anxiolytic/Sedative/Hypnotic Prescriptions (Number of Prescriptions and Dosage Units)
- PMP Usage (Number of Requests by recipient and recipient's delegates)
- Patients Exceeding Multiple Provider Threshold (5 prescribers)
- Patients Exceeding Multiple Pharmacy Threshold (5 pharmacies)
- Dangerous Combination Therapy – opioid and benzodiazepine
- Dangerous Combination Therapy – opioid, benzodiazepine and Carisoprodol

Allowance for a broader authorization for staff members of prescribers to access the program including a single annual authorization for staff members at a licensed hospital and a pharmacy;


Prescribers and dispensers can authorize any staff member as their designee. This information was included in all communications regarding the system migration as well as user manuals. Designees must register for the PMP manually and enter the authorizing individual's email address. The prescriber or dispenser must then approve the designee from their account and must re-verify each delegate annually.

Improvements in the speed of the program for prescribers and pharmacists required to submit information and check the program, and the ability for prescribers and pharmacists to tailor the functions of the program to fit into the workflow of the prescribers and pharmacists required to access the program;

For pharmacists required to submit information, PMP Clearinghouse, offers real-time error reports, identifies the fields that errored and the ability to correct any errors immediately. For prescribers required to check the PMP, patient reports provide a summary of the patient's prescription activity as well as a list of each prescription. Please see Appendix H for survey results.

The establishment of a data modifier for information from a veterinarian prescribing opioid medication to an animal that differentiates the recipient of the opioid prescription from people.

An animal icon (🐾) is attributed to any animal prescription listed under a human patient's PMP report enabling prescribers and dispensers to easily identify non-human prescriptions. (See example below)

▼ Prescriptions													
Filled	ID	Written	Drug	QTY	Days	Prescriber	Rx #	Pharmacy *	Refills	MME/D	Pytm Type	PMP	
09/18/2016	09/18/2016	09/18/2016	FENTANYL 12 MCG/HR PATCH		120.0	30	MI BOU	201212	DILLO (7135)	0		Comm Ins	MS
09/18/2016	09/18/2016	09/18/2016	TRAMADOL HCL 50 MG TABLET		45.0	15	MI BOU	201211	DILLO (7135)	0		Comm Ins	MS