

Counting the Ballots on Prescription Drug Abuse — Are We Winning?

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The United States' Opioid Epidemic by the Numbers:

- CDC reported 46,471 US citizens died of a drug overdose in 2013 equating to more than 120 people each day
- Of these deaths, 16,235, involved opioid analgesics which surpasses the deaths due to cocaine and heroin combined
- Drug overdose deaths are now the leading cause of injury death in the US surpassing the number of deaths by motor vehicles and by firearms every year since 2008
- The US makes up about 4.6% of the world's population but consumes 80% of its opioids and 99% of the world's hydrocodone

SD PDMP History and General Information

The SD Prescription Drug Monitoring Program was established by the State Legislature in 2010 (SDCL 34-20E) to improve patient care and to reduce diversion of dangerous drugs; operations began in March 2012 with data submitted retroactive to July 2011

PDMP Program Highlights

- Dispensers “must” submit reports at least weekly to the database – with the exception of federal facilities (VA, AFB, IHS) – which are not required to submit, although IHS and VA do submit
- Reports may be generated to aid prescribers and dispensers to “improve patient care” and to aid prescribers, dispensers and law enforcement in preventing illicit use of prescription controlled drugs
- Overarching “Ultimate Goal” – prevent overdose deaths due to prescription drugs while preserving access for those in need of narcotic pain relievers and other controlled substances

Hal, Hal he's Our Man!

Hal Rogers Grants



- Without these grants we would not exist!
- Chair of House Appropriations Committee from KY
- Opioid addiction requires action, not silver bullet
- The lack of any easy solution requires all of us to treat the opioid crisis as a nonpartisan issue and adopt an "all hands on deck" approach. That is why I am proud that my colleagues in the U.S. House of Representatives have made it a priority to respond to this crisis. In an effort to cast a wide net on the epidemic, we are voting this week on a comprehensive package of more than a dozen opioid-related bills to help save lives and prevent addiction from directly or indirectly harming our loved ones.

SD PDMP Timeline – Grants and Vendors

- 2009 – Hal Rogers Research Grant
- 2010 – Law Passed
- 2011 – Rules Promulgated
- 2011 – Hal Rogers Implementation Grant - Operations
- 2012 - Contracted with Health Information Designs
- 2013 – NASCSA Grant – to Fund Unsolicited Report Upgrade
- 2013 – Hal Rogers Enhancement Grant – Integration, Operations
- 2015 – Contracted with Appriss through NABP grant
- 2016 – State Contracted with Appriss
- 2016 – Hal Rogers Enhancement Grant

How is South Dakota Doing?

- Enough doses of opiates were prescribed to South Dakotans in 2015 to medicate every SD adult around-the-clock for 19 straight days
- Between 2004-2011: 82 Opioid Deaths (approximately 10 per year)
- 2013: 17 Opioid Deaths
- 2014: 16 Opioid Deaths (including one death where heroin was present)
- In the last year, controlled substances were prescribed by 3,847 prescribers of which 15.9% are registered with the SD PDMP for online access
- LE is telling us that they are seeing much more heroin

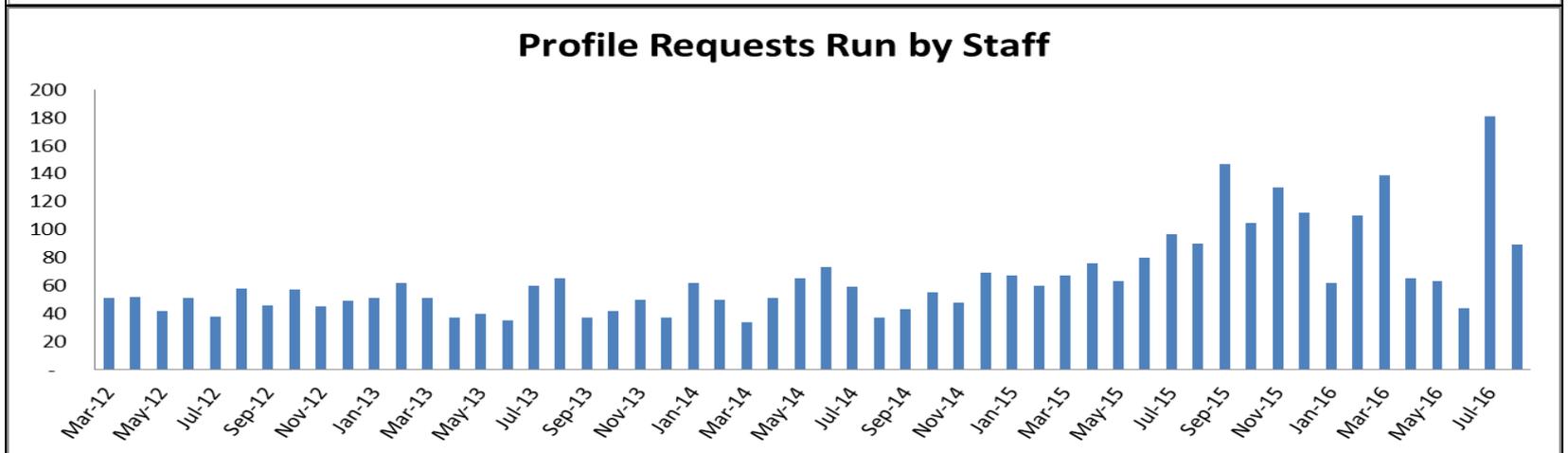
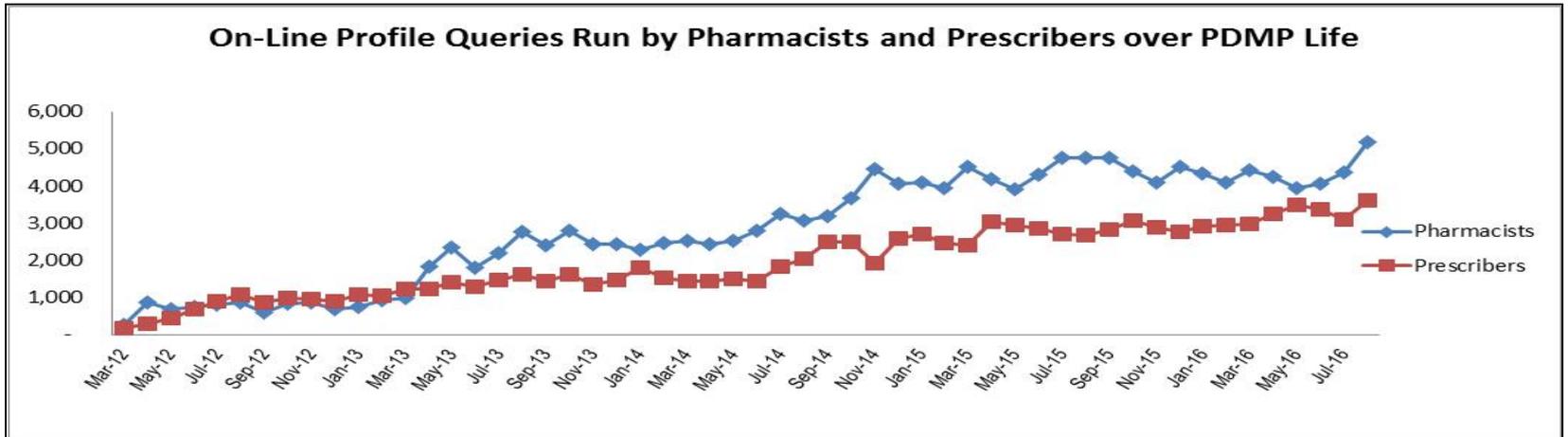
SD PDMP Statistical Information

Count of Prescription Records	Total
July 1, 2011 - December 31, 2011	411,326
January 1, 2012 - December 31, 2012	1,101,417
January 1, 2013 - December 31, 2013	1,152,900
January 1, 2014 - *December 31, 2014	1,211,367
January 1, 2015 - December 31, 2015	1,297,804
January 1, 2016 - August 31, 2016	921,809
Total	6,096,623

Approved for Access		% Of
2012 Total	1,253	
2013 Total	432	
2014 Total	371	
2015 Total	362	
Pharmacists	1047	83%
Physicians	760	24%
Physician Assistants	289	55%
Nurse Practitioners	258	45%
Dentists	96	21%
Other	179	
Designated Agents	274	
Total	2,903	
Prescribers Querying	24%	
Pharmacists Querying	35%	

August Most Prescribed Drugs	RX's	Quantity	Days Supply	Quant/Rx
HYDROCODONE BITARTRATE/ACETAMINOPHEN	21,714	1,435,154	282,011	66
TRAMADOL HCL	14,751	1,112,372	271,863	75
LORAZEPAM	8,298	418,547	201,706	50
ZOLPIDEM TARTRATE	8,293	286,860	284,761	35
CLONAZEPAM	7,900	500,382	257,924	63
DEXTROAMPHETAMINE SULF-SACCHARATE/AMPHETAMINE SULF	7,063	423,696	276,173	60
ALPRAZOLAM	5,903	369,580	171,274	63
METHYLPHENIDATE HCL	5,853	326,272	220,378	56
OXYCODONE HCL	4,717	415,381	97,697	88
OXYCODONE HCL/ACETAMINOPHEN	4,209	280,447	57,480	67

SD PDMP Trending



The Future of SD PDMP

- Integration of PDMP data into health system's electronic health records (EHR) and pharmacy's software systems
 - Addresses a major concern of prescribers and pharmacists which is accessing the PDMP requires additional steps that are not in the clinical workflow
 - Integration benefits include:
 - Immediate improvement in the patient care process
 - User workflows were streamlined and improved
 - Pharmacist and prescriber satisfaction was highest when technology automated the majority of workflow tasks
- Integration of SD PDMP data into Avera Health System's EHR went live May 25, 2016
- Integration with Sanford Health Planned for 2017
- Drug Take Back Program Pending

Drug Take-Back Program

- One of the goals of the PDMP is to deter and reduce diversion of controlled substances in South Dakota
- Occasional nonmedical users of prescription pain relievers are most likely to obtain their drugs for free from a relative or friend
- A disposal program for unused, unwanted, and expired drugs decreases this avenue of diversion
- The SD Board of Pharmacy is proposing a partnership with SD pharmacies in a statewide drug take-back program

Final Rule of the Disposal of Controlled Substances

- Became effective on October 9, 2014 and can be found in Title 21 of the Code of Federal Regulations (CFR) Part 1317
- These regulations implement the Secure and Responsible Drug Disposal Act of 2010 by expanding the options available to collect controlled substances (CS) from ultimate users for the purpose of disposal, including collection receptacle locations at retail pharmacies
- With this final rule, the DEA is implementing a standard of destruction, “non-retrievable”

Available Take-Back Programs

- Yellow Jug Old Drugs Program
- Med Rx Return Drug Collection Units
- Medsafe by Sharps, Inc.
- MEDDRxOP by Assured Waste Solutions

QUESTIONS?

