

# The Role of a Prescription Drug Monitoring Program in Reducing Prescription Drug Diversion, Misuse, and Abuse

Abuse of prescription painkillers claims the lives of more than 40 people daily, eclipsing the number of deaths related to heroin and cocaine use combined.[1] State legislators recognized the need to monitor certain prescription drugs as early as the 1930s. California was the first State to take action, establishing a Prescription Drug Monitoring Program (PDMP) in 1939. Other States have also seen the need to share data to monitor patterns associated with drugs of abuse. As of March 2014, 49 States had passed PDMP legislation to improve patient care and safety, and the one State without a program—Missouri—introduced legislation to establish a PDMP as well.[2] This fact sheet provides an overview of how PDMPs can provide health care prescribers, pharmacists, patients, State regulatory boards, and law enforcement agencies with a collaborative method to reduce prescription drug diversion, misuse and abuse.

A PDMP is a central statewide electronic database that stores prescribing and dispensing records related primarily to medications classified as Federal controlled substances, but it may include any potential drug of abuse. Individuals authorized under State law to receive PDMP data, such as providers, pharmacies, or State law enforcement agencies, may access the database. The design, objectives, and organization of PDMPs vary among States.

## PDMP Utilization

PDMPs may be categorized as reactive, proactive, or some combination of the two.[3] States that use a reactive approach generate reports in response to a specific request or inquiry by an authorized individual or agency, such as a prescriber, dispenser, or regulatory authority. Dispensers report each time a controlled substance is dispensed to an individual. Dispensers may make PDMP database inquiries if an at-risk patient is suspected and the dispenser is authorized by the State to do so. Prescribers may make a specific request or inquiry of a PDMP when obtaining a health history, when developing a treatment plan, and when prescribing controlled substances. Prescribers should make a particular effort to consult the PDMP when prescribing controlled substances to a new patient or for a patient who resides outside of the typical practice area. States that use a proactive approach generate reports based on patterns of behavior that raise red flags and provide this unsolicited data to an authorized individual or agency for further investigation or action.[4]

## Benefits of a PDMP

### For Prescribers

PDMPs contribute to the continuity of care among providers working in a variety of practice settings such as primary care, pain management, and substance abuse care. These databases help providers by increasing awareness of all active controlled substance medications on file for a patient. PDMPs also assist providers' delivery of safe and effective treatment of chronic pain. PDMPs may alert prescribers to patients obtaining prescriptions from multiple doctors or pharmacies (known as "doctor shoppers") and may deter patients from doctor shopping.[5] Prescribers can use PDMP data as a tool to monitor compliance and increase confidence in prescribing decisions.

### For Pharmacists

PDMPs help pharmacists ensure that patients who are treated for legitimate, chronic pain maintain access to essential medications. The databases can help identify at-risk patients who may benefit from a pharmacist-initiated counseling session or patients who may be candidates for a referral for lock-in to one dispenser or provider. PDMPs can raise a red flag that alerts a pharmacist to prescriptions likely to enter the illicit market. PDMPs may also help pharmacists identify questionable prescriber patterns that warrant referral for further investigation.

## For Patients

PDMPs protect patient privacy while decreasing the incidence of opiate exposure or overdose related to misuse and abuse. PDMP data may draw a prescriber or dispenser's attention to life-threatening controlled substance interactions that pose a risk in patients managed by more than one prescriber. Identified at-risk patients may be deterred from drug misuse or abuse. Identification of an at-risk patient may encourage the patient to seek help, and the patient can be referred for treatment if desired. However, proactive analysis and distribution of PDMP data may reduce the need for substance abuse treatment admissions. PDMPs may also alert patients to prescriptions fraudulently billed in their name. PDMPs used effectively may benefit patients by preserving access to appropriately utilized prescription-based therapy.[6]

## For Regulatory and Law Enforcement

PDMP data may help regulatory and law enforcement agencies in a variety of ways. Identification of patterns provides a resource to target areas for further investigation. Data may identify patients who exhibit questionable patterns of obtaining and filling controlled substances or prescribers who exhibit patterns of over-prescribing controlled substances. Over-prescribing indicators may reveal a pill mill—a medical practice or other health care facility “that routinely conspires in the prescribing and dispensing of controlled substances outside the scope of the prevailing standards of medical practice”[7]—or may expose patterns of insurance fraud. In addition, PDMP data may reduce the amount of time spent on drug diversion or fraud investigations. As a result, the costs of regulatory and law enforcement agencies are reduced. PDMP data may also assist regulatory and law enforcement agencies in monitoring compliance and abstinence.[8]

## Maximize Efficiency and Improve Patient Care by Using a PDMP

To maximize the efficiency and effectiveness of PDMPs, consider the following actions:

- Become familiar with the State's specific compliance and reporting requirements and follow them;
- Offer data submission and retrieval training to qualified personnel;
- Incorporate PDMP database screening into workflow schematics to maximize efficiency of the PDMP; and
- Integrate PDMP monitoring into voluntary, comprehensive compliance programs to maximize PDMP use and improve patient care by reducing prescription drug diversion, misuse, and abuse.

## PDMP Resource Guide

For more information on PDMPs, consult these sources:

- **Alliance of States with Prescription Monitoring Programs:** Provides a forum for State and Federal agencies to share information on prescription monitoring programs. The Alliance supports the establishment, operation, and enhancement of PDMPs; enhances drug abuse intervention and prevention programs through information exchange; conducts research on and provides training on the use of prescription controlled substances to protect public health and safety; and develops guidance documents to help States develop and operate their PDMPs.[9] For more information, visit <http://www.pmpalliance.org/> on the Alliance of States with Prescription Monitoring Programs website.
- **Council of State Governments (CSG):** CSG's National Center for Interstate Compacts works to develop a comprehensive policy approach to interstate sharing of prescription drug data through the Prescription Drug Monitoring Compact.[10] For more information, visit <http://www.csg.org/NCIC/PrescriptionMonitoringProgramCompact.aspx> on the Council of State Governments website.
- **Drug Enforcement Administration (DEA) Office of Diversion Control:** Helps prevent, detect, and investigate diversion of controlled pharmaceuticals and listed chemicals from lawful purposes to the illicit drug market.[11] For more information, visit <http://www.deadiversion.usdoj.gov/> on the Drug Enforcement Administration website.

- **National Alliance for Model State Drug Laws (NAMSDL):** A model code of laws to help States address the issues of drug and alcohol abuse.[12] NAMSDL assists States with legislative and policy questions related to PDMPs. The NAMSDL Model Prescription Monitoring Program Act was developed to provide States with sample language for developing and implementing a PDMP.[13] For more information, visit <http://www.namsdl.org/index.cfm> on the National Alliance for Model State Drug Laws website.
- **National Association of Boards of Pharmacy (NABP) Prescription Monitoring Program InterConnect:** An exchange overseen by the NABP that allows users of PDMPs in 14 States to securely transfer prescription data across State lines and link participating PDMPs.[14] For more information, visit <http://www.nabp.net/programs/pmp-interconnect/nabp-pmp-interconnect> on the National Association of Boards of Pharmacy website.
- **National Association of State Controlled Substances Authorities (NASCSA):** A nonprofit organization dedicated “to provide a continuing mechanism through which [S]tate and [F]ederal agencies, the pharmaceutical industry, and other interested parties can work to increase the effectiveness and efficiency of [S]tate and national efforts to prevent and control drug diversion and abuse.”[15] For more information, visit <http://www.nascsa.org/about.htm> on the National Association of State Controlled Substances Authorities website.
- **National Association of Drug Diversion Investigators (NADDI):** A nonprofit organization that helps prevent and investigate prescription drug diversion through cooperation efforts of law enforcement, health care professionals, State regulatory agencies and pharmaceutical manufacturers.[16] For more information, visit <http://www.naddi.org> on the National Association of Drug Diversion Investigators website.
- **National Institute on Drug Abuse (NIDA):** A National Institutes of Health, U.S. Department of Health and Human Services program that funds research on drug abuse and addiction to track drug usage trends, understand how drugs affect the brain and body, and develop new drug treatment and prevention approaches. [17] For more information, visit <http://www.drugabuse.gov/> on the National Institute on Drug Abuse website.
- **Office of National Drug Control Policy (ONDCP):** Created by the Anti-Drug Abuse Act of 1988, the ONDCP “advises the President on drug-control issues, coordinates drug-control activities and related funding across the Federal government, and produces the annual National Drug Control Strategy, which outlines Administration efforts to reduce illicit drug use, manufacturing and trafficking, drug-related crime and violence, and drug-related health consequences.”[18] For more information, visit <http://www.whitehouse.gov/ondcp> on the Office of National Drug Control Policy website.
- **PDMP Center of Excellence at Brandeis University:** Works with Federal and State stakeholders to evaluate and analyze the effectiveness of PDMPs. The Center of Excellence identifies PDMP best practices, compiles and analyzes performance measures, improves the methods used to assess PDMP effectiveness, encourages innovative uses of data, and assists States with information analysis and dissemination. It also provides analytical support in using Center of Excellence materials, data, and tools.[19] For more information, visit <http://www.pdmpexcellence.org/> on the PDMP Center of Excellence website.

## Disclaimer

This fact sheet was current at the time it was published or uploaded onto the web. Medicaid and Medicare policies change frequently so links to the source documents have been provided within the document for your reference.

This fact sheet was prepared as a service to the public and is not intended to grant rights or impose obligations. This fact sheet may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. Use of this material is voluntary. Inclusion of a link does not constitute CMS endorsement of the material. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

## References

- 1 Centers for Disease Control and Prevention. (2011, November 1). Prescription Painkiller Overdoses at Epidemic Levels. Retrieved April 17, 2013, from [http://www.cdc.gov/media/releases/2011/p1101\\_flu\\_pain\\_killer\\_overdose.html](http://www.cdc.gov/media/releases/2011/p1101_flu_pain_killer_overdose.html)
- 2 Luebbert, S. (2013, February 4). Missouri PDMP NOW Coalition Applauds Sen. Sater and Rep. Engler for Sponsoring Bills to Combat Prescription Drug Abuse. Retrieved April 12, 2013, from <http://www.thepharmacyblog.com/missouri-pdmp-now-coalition-applauds-sen-sater-and-rep-engler-for-sponsoring-bills-to-combat-prescription-drug-abuse>
- 3 Finklea, K., Bagalman, E., & Sacco, L. (2013, January 3). Congressional Research Service. Prescription Drug Monitoring Programs. Retrieved April 12, 2013, from <http://www.fas.org/sgp/crs/misc/R42593.pdf>
- 4 Finklea, K., Bagalman, E., & Sacco, L. (2013, January 3). Congressional Research Service. Prescription Drug Monitoring Programs. Retrieved April 12, 2013, from <http://www.fas.org/sgp/crs/misc/R42593.pdf>
- 5 Executive Office of the President of the United States. (2011). Epidemic: Responding to America's Prescription Drug Abuse Crisis (pp. 8-9). Retrieved November 5, 2012, from [http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/rx\\_abuse\\_plan.pdf](http://www.whitehouse.gov/sites/default/files/ondcp/policy-and-research/rx_abuse_plan.pdf)
- 6 PMP Center of Excellence. Brandeis University Schneider Institutes for Health Policy. (2011, February). Prescription Monitoring Program Center of Excellence. Briefing on PMP Effectiveness. 2.1 Prescription Monitoring Programs: An Effective Tool in Curbing the Prescription Drug Abuse Epidemic. Retrieved November 9, 2012, from [http://www.pdmpexcellence.org/sites/all/pdfs/pmp\\_effectiveness\\_brief\\_a\\_2\\_24\\_11.pdf](http://www.pdmpexcellence.org/sites/all/pdfs/pmp_effectiveness_brief_a_2_24_11.pdf)
- 7 Florida Office of the Attorney General. (2012, April 2). Florida's Prescription Drug Diversion and Abuse Roadmap 2012–2015. Retrieved February 20, 2013, from [http://myfloridalegal.com/webfiles.nsf/WF/KGRG-8T8L5K/\\$file/PrescriptionDrugDiversionAndAbuseRoadmap.pdf](http://myfloridalegal.com/webfiles.nsf/WF/KGRG-8T8L5K/$file/PrescriptionDrugDiversionAndAbuseRoadmap.pdf)
- 8 PMP Center of Excellence. Brandeis University Schneider Institutes for Health Policy. (2011, February). Prescription Monitoring Program Center of Excellence. Briefing on PMP Effectiveness. 2.1 Prescription Monitoring Programs: An Effective Tool in Curbing the Prescription Drug Abuse Epidemic. Retrieved November 9, 2012, from [http://www.pdmpexcellence.org/sites/all/pdfs/pmp\\_effectiveness\\_brief\\_a\\_2\\_24\\_11.pdf](http://www.pdmpexcellence.org/sites/all/pdfs/pmp_effectiveness_brief_a_2_24_11.pdf)
- 9 Alliance of States With Prescription Monitoring Programs. Home Page. Retrieved February 28, 2014, from <http://www.pmpalliance.org/>
- 10 The Council of State Governments. (2011). Prescription Monitoring Program Compact. Retrieved April 2, 2013, from <http://www.csg.org/NCIC/PrescriptionMonitoringProgramCompact.aspx>
- 11 Drug Enforcement Administration. Office of Diversion Control. Home Page. Retrieved April 2, 2013, from <http://www.deadiversion.usdoj.gov/>
- 12 National Alliance for Model State Drug Laws. About. Retrieved November 8, 2012, from <http://www.namsdl.org/about.cfm>
- 13 National Alliance for Model State Drug Laws. (2011, November 19). National Alliance for Model State Drug Laws (NAMSDL) Model Prescription Monitoring Program (PMP) Act. Retrieved November 8, 2012, from [http://www.namsdl.org/library/Section\\_A\\_Model\\_Prescription\\_Monitoring\\_Program\\_Act\\_Without\\_Commentary\\_/](http://www.namsdl.org/library/Section_A_Model_Prescription_Monitoring_Program_Act_Without_Commentary_/)
- 14 National Association of Boards of Pharmacy. (2013). NABP PMP InterConnect. Retrieved April 1, 2013, from <http://www.nabp.net/programs/pmp-interconnect/nabp-pmp-interconnect>
- 15 National Association of State Controlled Substances Authorities. (2012). About NASCSA. Retrieved April 1, 2013, from <http://www.nascsa.org/about.htm>
- 16 National Association of Drug Diversion Investigators. (2013). About. Retrieved April 1, 2013, from [http://www.associationdatabase.com/aws/NADDI/pt/sp/about\\_us](http://www.associationdatabase.com/aws/NADDI/pt/sp/about_us)
- 17 National Institutes of Health. National Institute on Drug Abuse. The Science of Drug Abuse & Addiction. Retrieved April 1, 2013, from <http://www.drugabuse.gov>
- 18 Office of National Drug Control Policy. About ONDCP. Retrieved April 1, 2013, from <http://www.whitehouse.gov/ondcp/about>
- 19 PDMP Center of Excellence. Brandeis University. The Heller School for Social Policy and Management. (2010-2012). Mission and Scope of Work. Retrieved November 9, 2012, from <http://www.pdmpexcellence.org/content/mission-and-scope-work>

