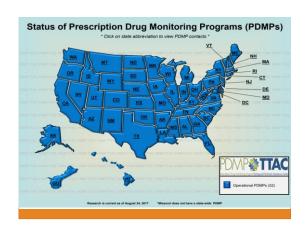
2018 IACME Fall Meeting

NAVIGATING IOWA'S
ENHANCED
PRESCRIPTION
MONITORING PROGRAM
(PMP)

Meet the Speaker Jennifer Tiffany, R.Ph Associate Director – Iowa Board of Pharmacy Prescription Monitoring Program

What is a Prescription Drug Monitoring Program?

A PDMP/PMP IS A STATEWIDE ELECTRONIC DATABASE WHICH COLLECTS DESIGNATED DATA ON SPECIFIED SUBSTANCES DISPENSED TO OR FOR PATIENTS. THE PDMP IS HOUSED BY A STATE REGULATORY, ADMINISTRATIVE OR LAW ENFORCEMENT AGENCY. THE HOUSING AGENCY DISSEMINATES INFORMATION FROM THE DATABASE TO INDIVIDUALS WHO ARE AUTHORIZED UNDER STATE LAW TO RECEIVE THE INFORMATION FOR PURPOSES IDENTIFIED BY STATE LAW.

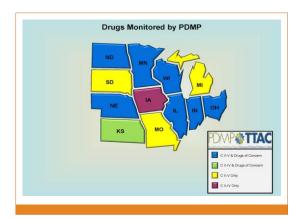


State PDMP Overview

- Created through legislation in 2008
- Iowa's Prescription Monitoring Program (PMP) became operational on March 25, 2009, and is housed within the Iowa Board of Pharmacy.
- Guidance is provided to the Board of Pharmacy by a PMP Advisory Council comprised of 4 physicians, 3 pharmacists, and 1 non-physician prescriber.
- The advisory council meets as needed to review the progress of the Iowa PMP, the cost of maintaining the Iowa PMP and the benefits of the program, possible enhancements to the program, and information, comments, and suggestions received from program users and the public.

State PDMP Overview

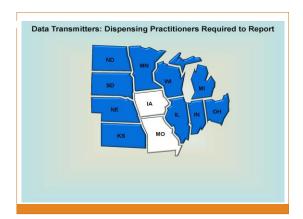
- In-state pharmacies are required to report all Schedule II, III, and IV controlled substance prescriptions dispensed to patients regardless of the location of the patient.
- Nonresident pharmacies are required to report all Schedule II, III, and IV controlled substance prescriptions dispensed to patients physically located in Iowa.



Data Exchange Time Period

All Iowa licensed pharmacies, whether the pharmacy is located within or outside the state of Iowa, are required to report to the Iowa PMF. Reports are to be submitted no later than the next regular business day following dispensing of the prescription.

If no applicable substances are dispensed for the preceding reporting period the pharmacy must file a "zero report" for that reporting period or be considered non-compliant.



Approved Users

- •Registered Practitioners = Prescribers and Dispensers
- "Prescriber" means a licensed health care professional with the authority to prescribe prescription drugs including controlled substances (eligible MDs, DOs, ARNPs, PAs, optometrists, psychologists, dentists, podiatrists, veterinarians)
- ·"Dispenser" means pharmacist
- -Registered practitioners may designate up to six (6) health care professionals, such as RN, LPN, CMA, or certified pharmacy technician, to register for PMP access as an agent of the practitioner.
- •1AC 657-37-4(9) Medical examiner or medical examiner investigator. A medical examiner or medical examiner investigator may obtain PMP information when the information requested by the examiner or investigator relates to an investigation being conducted by the examiner or investigator.

Approved Users

A prescriber or pharmacist is authorized to request a Patient Rx History Report on an individual only if:

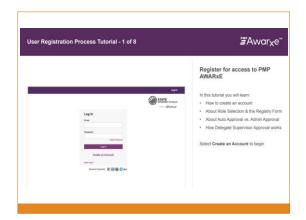
- ${\tt 1}.$ The request is for the purpose of providing medical treatment or pharmaceutical services and
- 2. The prescriber or pharmacist has a current practitioner-patient relationship, or is initiating a practitioner-patient relationship, with the individual named in the request.

As with all persons granted PMP access agent users shall not share PMP login ID & password with any other person or entity

Upgraded PMP Platform

AWARXE - Launched April 4, 2018

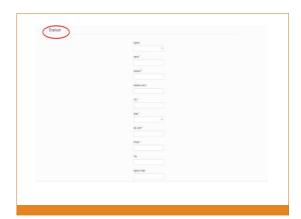
- × Online application process for all user groups
- × Online password resets
- ▼ Upgraded user interface
- Unlimited integration capacity

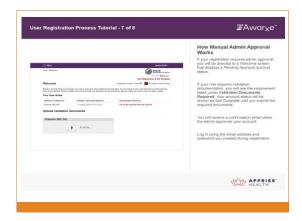












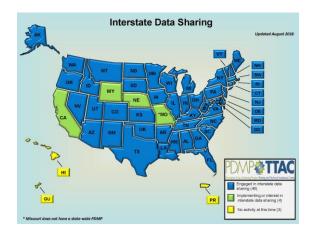


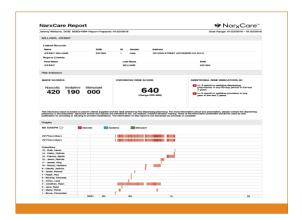


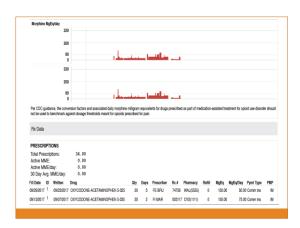


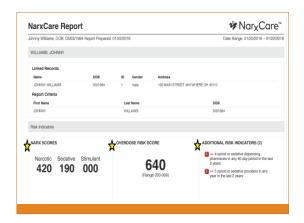


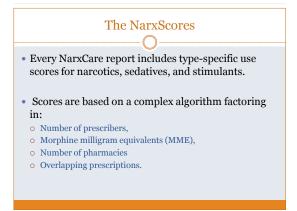




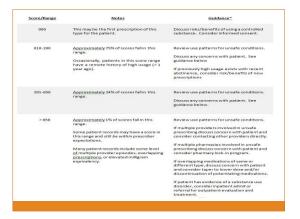








• Scores are quantified representations of the data in PDMP and range from 000-999 with higher scores equating to higher risk and misuse, and the last digit always represents the number of active prescriptions.



Overdose Risk Score (ORS)

- Based on an Ohio study that evaluated almost 1700 unintentional overdose deaths
- ORS ranges from ooo-999
- Risk of unintentional overdose death approximately doubles for every 100 point increase in ORS

PRESCRIPT	IONS											
Total Prescriptions:		34.00										
Active MME: Active MME/day:		0.00										
active mme. 30 Day Avg.		0.00										
ill Date ID	Written	Drug	Otv	Davs	Prescriber	Rx#	Pharmacy	Refill	MaEa	MaEa/Day F	vmt Type	Pf
9/29/2017 1	09/23/2017	OXYCODONE-ACETAMINOPHEN 5-325	20	3	FE BRU	74756	WAL(5555)	0	150.00	50.00	Comm Ins	
9/13/2017 1	09/07/2017	OXYCODONE-ACETAMINOPHEN 5-325	20	2	FIMAR	002117	CVS(1111)	0	150.00	75.00	Comm Ins	
9/08/2017 1	09/02/2017	OXYCODONE-ACETAMINOPHEN 5-325	20	7	FIMAR	77891	WAL(5555)	0	150.00	21.431	Vedicare	
8/31/2017 1	08/25/2017	MORPHINE 4 MG/ML SYRINGE	1	2	RY JER	688016	WAL(1111)	0	12.00	6.001	Medicare	
8/31/2017 1	08/25/2017	MORPHINE 2 MG/ML SYRINGE	1	2	RYJER	689213	WAL(1111)	0	6.00	3.001	Medicare	
8/24/2017 1	08/18/2017	HYDROCODON-ACETAMINOPHN 10-325	60	30	RYJON	001923	CVS(1111)	0	600.00	20.00	Comm Ins	
8/02/2017 1	07/27/2017	HYDROCODON-ACETAMINOPHEN 5-325	1	2	LA ART	686007	WAL(1111)	0	5.00	2.50	Medicare	
8/01/2017 1	07/26/2017	HYDROCODON-ACETAMINOPHEN 5-325	1	2	LA ART	686982	WAL(1111)	0	5.00	2.50	Medicare	
7/23/2017	07/17/2017	HYDROCODON-ACETAMINOPHN 10-325	60	30	RYJON	001884	CVS(1111)	0	600.00	20.00	Comm Ins	
7/21/2017	07/15/2017	HYDROCODON-ACETAMINOPHEN 5-325	10	3	KE BEV	21305	WAL(7120)	0	50.00	16.67	Comm Ins	
7/20/2017 1	07/14/2017	HYDROCODON-ACETAMINOPHEN 5-325	8	1	RA RAL	001783	CVS(1111)	0	40.00	40.00	Comm Ins	
7/20/2017 1	07/14/2017	DEMEROL 75 MG/ML SYRINGE	1	2	RA RAL	685222	WAL(1111)	0	22.50	11.25	Medicare	
7/05/2017 1	06/29/2017	DEMEROL 50 MG/ML CARPLUECT	1	2	RAJES	684945	WALITITI	0	15.00	7.50	Vedicare	



Exceptions/Exclusions for Reporting

- A pharmacy that does not dispense Schedule II, III, or IV controlled substances to
 patients in Iowa, or that believes the pharmacy should be exempt from reporting to the
 Iowa PMP as provided by law (i.e. a pharmacy dispensing only for inpatient hospital care,
 inpatient hospite care, or long-term residential facility patient care), is exempt from
 reporting to the Iowa PMP.
- Methadone dispensed or administered at federally run Opioid Treatment Programs



Opioid Bill - HF 2377

- Prescriber must apply for PMP account at time of Controlled Substance Registration application or renewal
- Prescriber reporting to the PMP of controlled substances dispensed directly by prescriber to the patient
- Ability for the Board of Pharmacy to disseminate "Proactive Notifications" to prescribers and dispensers when patients meet specified criteria or threshold

Opioid Bill - HF 2377

- Naloxone dispensed by pharmacies under statewide protocol
- Naloxone/opioid antagonsist administrations by all First Responders
 - × EMS
 - × Fire
 - × Law Enforcement

What to Expect in the Next Year

- Board of Pharmacy will introduce a bill for the legislature to consider during the 2019 session.
 - Bill, if passed, would require the following:
- \checkmark Schedule V controlled substances dispensed by prescription must be reported
- ✓ "Drugs of Concern" as determined by Advisory Council to be reported

