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Prescription Drug Monitoring Program Interstate Information Exchange Project

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Presentation Topics

- ☐ The Problem Domain
- **□**Trends
- ☐ The Project and Challenges
- □ Anticipated Solution
- □ Project Status
- □ Future Activities
- □Question/Answer



Today's Presenters

- ☐George Shemas
 - Chair, IJIS PMP Exchange Committee
- □Vickie B. Seeger, RPh
 - DEA Office of Diversion Control
- ☐Steve Bruck
 - Member, IJIS PMP Exchange Committee



The Problem Domain

- □ Win-lose: Declines in Alcohol and Illicit Drug use have been offset by increases in prescription drug abuse
- ☐ Controlled prescription drugs like OxyContin, Ritalin and Valium are now the fourth most abused substance in America behind only marijuana, alcohol and tobacco
- □ Dramatic increase from 1992 to 2003 in the number of 12- to 17-year olds abusing controlled prescription drugs
- □'Pill-popping' culture



The Problem Domain

□Why Prescription Drug Abuse?

- It's 'safer' because prescription drugs are cleaner than illicit drugs
- Prescriptions are legal
- Prescription drugs are easier to obtain since patients can see many doctors
- Little/no communication or information sharing between doctors and pharmacies regarding patient activity



The Problem Domain

- □Types of Prescription Drug Crime Diversion
 - Illegal prescription drug sales:
 pharmacists, doctors, 'dealers', Internet ...
 - Doctor shopping: patient sees many doctors to get many prescriptions
 - Forged prescriptions: may involve stolen prescription pads
 - Theft





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Prescription Drug Abuse Trends

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National Survey on Drug Use and Health

- □ Conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA)
- □Between 2002 and 2003, lifetime nonmedical use of pain relievers among persons age 12 and older increased significantly from 29.6 million to 31.2 million

Source: 2003 National Survey on Drug Use and Health (NSDUH) (latest data available) (formerly the National Household Survey on Drug Abuse) published Sept 2004 Dept of HHS / Substance Abuse and Mental Health Services Administration (SAMHSA)



In 2003, 6.3 million Americans used one or more prescription drugs for *nonmedical* purposes*

0.3 million Sedatives

1.2 million Stimulants

1.8 million

Anti-Anxiety Medication

4.7 million

Narcotic Pain Relievers

Only category that showed an increase; all others decreased or remained the same

*Number of persons age 12 and older reporting nonmedical use of prescription drugs during 2003

Source: 2003 National Survey on Drug Use and Health (NSDUH) (latest data available) formerly the National Household Survey on Drug Abuse) published Sept 2004 Dept of HHS / Substance Abuse and Mental Health Services Administration (SAMHSA)

Specific pain relievers with statistically significant increases in *lifetime use**

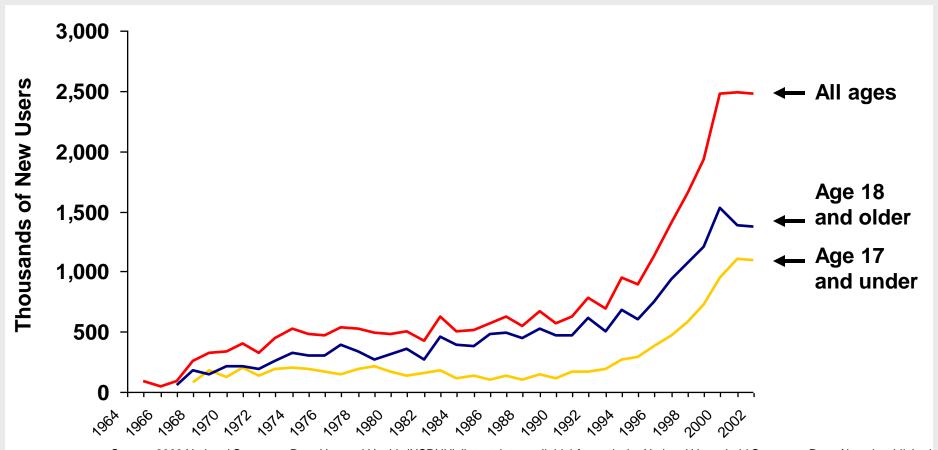
DRUG NAME	% INCREASE 2002 to 2003
Vicodin [®] , Lortab [®] , Lorcet [®]	19.85%
Percocet [®] , Percodan [®] , Tylox [®]	11.34%
Hydrocodone	26.67%
OxyContin®	47.37%
Methadone	33.33%

^{*} Persons age 12 and older reporting nonmedical use of these prescription drugs at least once during their lifetime

Source: 2003 National Survey on Drug Use and Health (NSDUH) (latest data available) (formerly the National Household Survey on Drug Abuse) published Sept 2004 Dept of HHS / Substance Abuse and Mental Health Services Administration (SAMHSA)



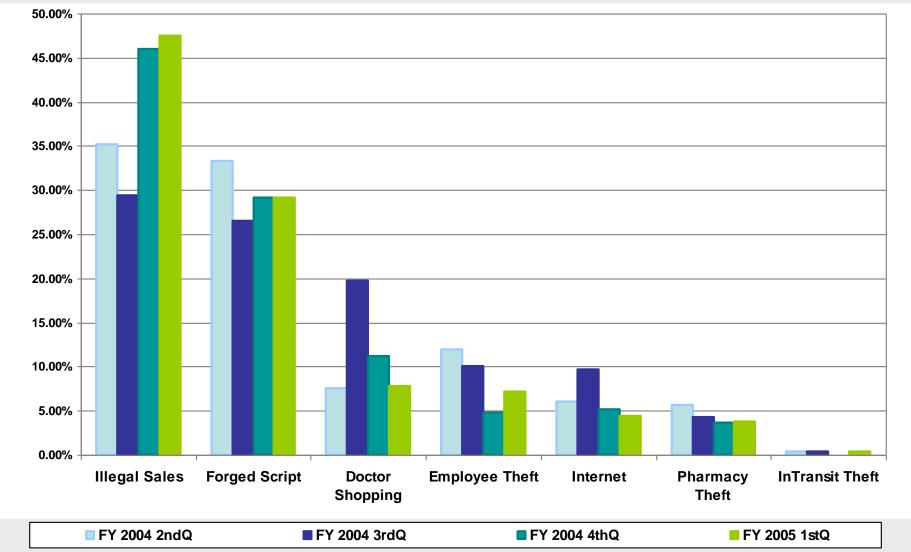
Annual numbers of new nonmedical users of pain relievers: 1965-2002



Source: 2003 National Survey on Drug Use and Health (NSDUH) (latest data available) formerly the National Household Survey on Drug Abuse) published Sept 2004 Dept of HHS / Substance Abuse and Mental Health Services Administration (SAMHSA)



Methods of Diversion - Controlled Pharmaceuticals*



^{*} Expressed as % of all pharmaceutical criminal/complaint cases opened for which the Reporting Unit identified diversion method.



Status of State PMPs

- □ 21 states are currently operating a Prescription Monitoring Program (PMP)
 - 4 states are in the process of implementing a PMP
 - Programs collect prescription dispensing information and look for abuse trends
- □ Program Highlights
 - Educational programs
 - Interventions referral to treatment
 - Web based access
 - Investigations



Why Interstate PMP Exchange?

- □States need to communicate prescription dispensing information
 - 'Crime has no borders'
 - Pharmacies fill out-of-state prescriptions for customer convenience
 - Mail-order and Internet pharmacies make it difficult to detect abuse





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About the PMP Interstate Information Exchange (PMIX) Project

Today's Challenges

- □ Agencies managing PMPs are generally small, not well funded, and have little IT support
- ☐ Electronic PMP systems are dissimilar in technology, age and functionality
- ☐ Sharing Expectations
 - Degree of Use, Reliability, Timeliness factors
- ☐ Sharing Exchange Mechanisms
 - Method of communications, Data model, Security
- Managing Cost
 - Start-up, Ongoing maintenance, Enhancements



The Project

- BJA/IJIS PMP Information Exchange Project Goal
 - Create a model standard for the exchange of PMP information among states
- Objectives
 - 1. Develop a *Concept of Operations* document to support the existing model standards and describe the exchange of PMP information between states
 - 2. Develop system architecture for states to implement in support of such information exchanges
 - 3. Create a set of 'reference documents' that describe a model standard for the exchange, based on the GJXDM
 - 4. Produce a final report that includes recommendations for updates to the GJXDM to support PMP information sharing
 - 5. Create a demonstration of PMP information sharing involving two or more states



The Project – Solutions Considered

- ☐ Central Repository (No)
 - States object to building a massive prescription database and wish to maintain control of own data
- ☐ Brokered Services (No)
 - No desire to host a central broker server
- ☐ Peer-to-Peer (Maybe)
 - Must be secure
- ☐ Federation of Web Services (Likely)
 - Can be used even within legacy applications
- □ States envision <u>regional</u> sharing agreements vs. a nationwide sharing system



Interstate PMP – Types of Requests

☐ Types of Interstate Information Sharing Requests

- Patient Profile
 - A history of prescription drugs dispensed to a patient
 - Detect "doctor shopping"

Practitioner Profile

- A history of dispensed drugs authorized by a practitioner (generally a doctor)
- Detect over-prescribing

Pharmacy Profile

- A history of drugs dispensed by a pharmacy
- Detect fraudulent pharmacies/pharmacists



Interstate PMP – Types of Requests

- □Background Check *returns contact info*
 - Patient Check
 - Does any state 'have something' on this person
 - Practitioner Check
 - Has this practitioner been investigated or reprimanded for improper prescribing
 - Pharmacy Check
 - Has this pharmacy been investigated or has it participated in suspect activity





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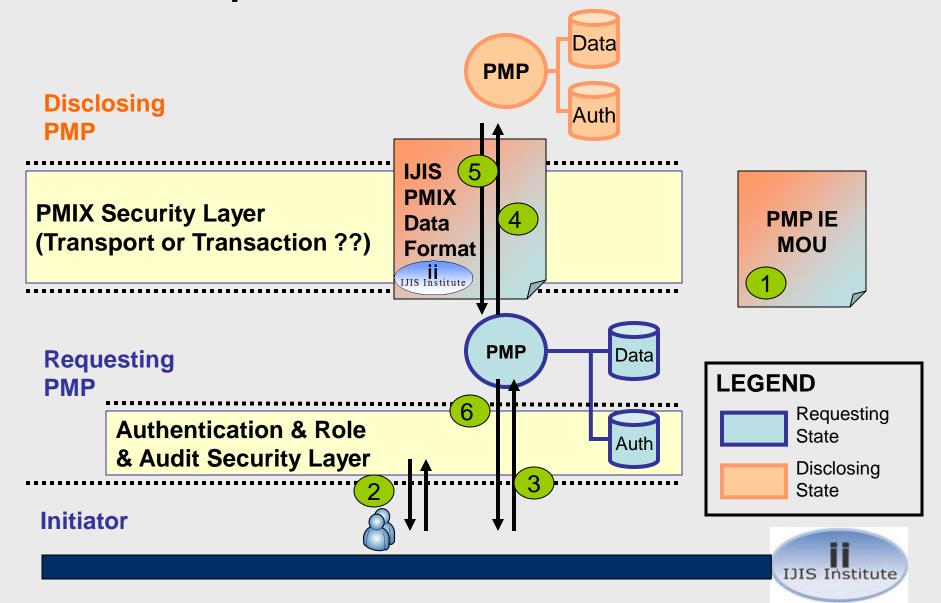
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PMP Interstate Information Exchange Project – Components and Cost Model

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Anticipated Solution Workflow



Anticipated Solution Components

☐ Security Model

- PMPs become 'trusted' via a sharing agreement/ memo of understanding
- Requests for profile information will be funneled through local state PMP program
- Requesting user will be authenticated and authorized by requesting PMP Administrator
- Disclosing state decides <u>what</u> to share but will likely make decisions based on agreement with requesting state
 - Administrators validate requests
 - Filters control exposure of PMP data



Anticipated Solution Components

□ Auditing Requirements

- Capture each sharing request processed, processed with modification or denied
- Capture response data provided...need "official" record of what was shared, when and to whom (HIPAA)
- Provide reporting on all statistics



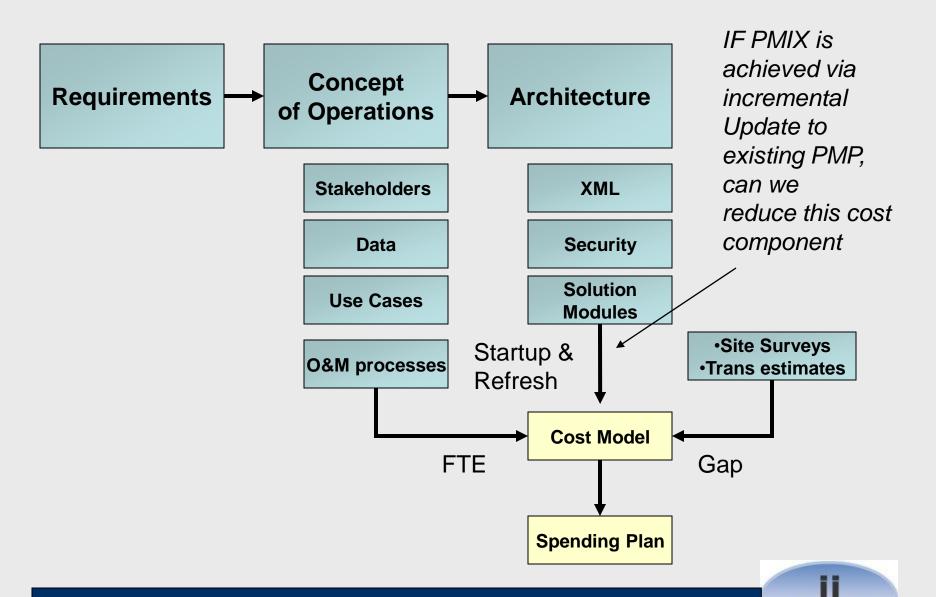
Anticipated Solution Components

□ Technology

- GJXDM for modeling sharing interactions
- Extend the GJXDM model with PMP-specific data types (body surface area, body temperature...)
- Web services will be used as exchange interface technology

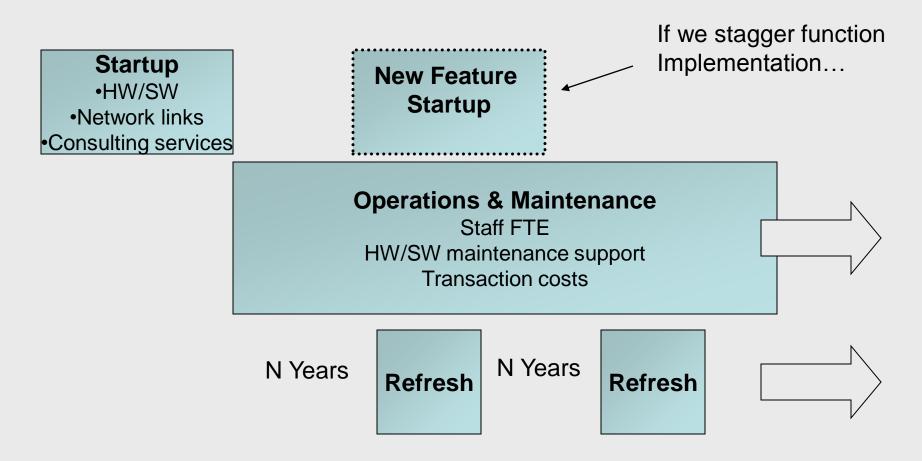


Cost Model – Where does it fit?



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Cost Model – IT Investment Lifecycle





Cost Elements

- □ One time costs
 - Software license, hardware, network links
 - System integration & setup
 - Training
- ☐ Recurring Costs
 - Annual Operation and Maintenance
 - Annual Software / Hardware support agreements
 - Per transaction costs (are these relevant/expected?)
- ☐ Transaction issues
- □ Refresh (3 or 4 year cycle ??)



Transaction Costs

- □Transactions
- ☐ In-state transactions
- ■Number of neighboring state transactions
- □Bandwidth & Disk
 - Size of request
 - Size of response
- **□**0&M
 - Any actions discloser might take (to get FTE)



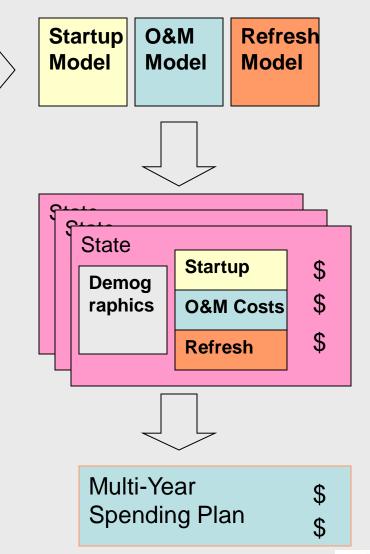
Implementation in Excel



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 Gaming Elements &
 Assumptions-->
- Component Pricing
- •O&M Task FTE
- Refresh Period
- Labor Rates
- Services Estimates



Market Survey of existing products







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PMP Interstate Information Exchange Project – Status

Project Status

□ Committee Composition

- Industry expertise from state PMP operations: large and small states; states with law enforcement focus and prevention/ health intervention focus
- System vendor (IJIS) representation
- Federal support from DEA and BJA

☐ Committee Accomplishments

- Determined main functional requirements for PMP sharing
- Reviewed results of DEA survey on data collected at each state
- Developed drafts of a Concept of Operations document as basis for sharing effort
- Drafting GJXDM reference documents that describe the main PMP exchanges
- Interviewed select states PMP to determine potential software architecture for pilot

Project Status (cont.)

- □Committee Accomplishments continued
 - Potential cost models for states to support an electronic PMP information exchange
- □Under Investigation
 - Security/access requirements to ensure prescription data requestors receive only the data they are allowed to see



Future Activities

☐ Remaining Activities

- Refine and finalize the PMP information exchange
 Concept of Operations document
- Finalize PMP exchange GJXDM reference documents
- Develop viable system architecture for PMP exchange
- Produce final report and committee recommendations
- Develop PMIX demonstration/prototype between at least two states





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Questions?

