



Michigan Practitioner Diversion Awareness Training

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Disclosure

I do not have any relevant financial relationships with any commercial interests or any other conflicts of interests to disclose





Drugs of Abuse

Schedules of Controlled Substances

Schedule I

• No accepted medical use/high potential for abuse/dependency (e.g., heroin, marihuana, ecstasy, "bath salts")

Schedule II

• Accepted medical use/high potential for abuse/dependency (e.g., morphine, hydrocodone, oxycodone, cocaine, methamphetamine, methadone, meperidine, fentanyl, Adderall, and Ritalin)

Schedule III

• Accepted medical use/less potential for abuse/dependency (e.g., products containing <90 mL codeine per dosage unit, ketamine, anabolic steroids, testosterone)

Schedule IV

• Accepted medical use/less potential for abuse/dependency (e.g., benzodiazepines)

Schedule V

• Accepted medical use/less potential for abuse/dependency (e.g., codeine cough syrup)

Most commonly prescribed prescription medicine?

Hydrocodone/acetaminophen (Norco, Vicodin, Lorcet)

State Ranking* - Hydrocodone January – June 2018

| RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL |
|------|-------|-------------|------|-------|------------|------|-------|------------|------|-------|------------|------|-------|-----------|
| 1 | СА | 300,735,070 | 12 | MO | 61,715,300 | 23 | OR | 34,665,810 | 34 | NE | 12,105,440 | 45 | WY | 3,778,470 |
| 2 | ΤX | 203,625,310 | 13 | NC | 61,121,220 | 24 | MS | 33,323,910 | 35 | NM | 12,069,670 | 46 | NH | 3,374,030 |
| 3 | MI | 123,951,710 | 14 | NY | 59,125,900 | 25 | WI | 30,798,730 | 36 | MD | 12,003,380 | 47 | AK | 3,373,040 |
| 4 | FL | 122,585,450 | 15 | PA | 57,819,460 | 26 | KS | 28,277,090 | 37 | MA | 11,967,800 | 48 | ND | 3,034,000 |
| 5 | IL | 101,720,110 | 16 | OK | 56,558,450 | 27 | NV | 26,962,370 | 38 | NJ | 11,491,850 | 49 | DE | 2,084,460 |
| 6 | ΤN | 79,717,910 | 17 | LA | 49,520,040 | 28 | IA | 21,629,630 | 39 | MT | 8,414,000 | 50 | VT | 1,749,710 |
| 7 | IN | 79,619,500 | 18 | WA | 48,045,730 | 29 | СО | 21,568,020 | 40 | СТ | 7,057,280 | 51 | DC | 488,540 |
| 8 | GA | 79,106,640 | 19 | SC | 44,737,490 | 30 | UT | 19,385,390 | 41 | ME | 6,591,520 | 52 | VI | 103,120 |
| 9 | AL | 77,435,200 | 20 | AR | 42,918,010 | 31 | ID | 18,767,820 | 42 | HI | 5,721,600 | 53 | PR | 84,040 |
| 10 | ΚY | 70,665,710 | 21 | AZ | 36,513,980 | 32 | WV | 18,715,100 | 43 | SD | 4,778,270 | 54 | GU | 42,200 |
| 11 | OH | 69,628,750 | 22 | VA | 34,866,490 | 33 | MN | 17,958,770 | 44 | RI | 3,962,020 | 55 | AS | (|

State Populations (2018)

 California
 39.8M (#1)

 Texas
 28.7M (#2)

 Michigan
 10.0M (#10)

* Business Activity-Retail Pharmacies

State Ranking* - Oxycodone January – June 2018

| RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL |
|------|-------|-------------|------|-------|------------|------|-------|------------|------|-------|------------|------|-------------------|-----------|
| 1 | FL | 157,368,130 | 12 | MD | 50,726,140 | 23 | СО | 34,524,920 | 34 | MS | 16,206,340 | 45 | MT | 6,025,280 |
| 2 | CA | 117,344,970 | 13 | VA | 47,188,950 | 24 | WI | 33,774,150 | 35 | NM | 14,456,950 | 46 | AK | 4,595,300 |
| 3 | PA | 108,837,030 | 14 | МО | 44,189,280 | 25 | ОК | 31,751,880 | 36 | WV | 12,553,630 | 47 | WY | 4,101,250 |
| 4 | NY | 106,999,130 | 15 | MA | 42,549,170 | 26 | LA | 28,667,580 | 37 | DE | 9,946,480 | 48 | VT | 3,520,520 |
| 5 | NC | 93,771,180 | 16 | TX | 41,643,220 | 27 | MN | 28,137,210 | 38 | ID | 9,808,410 | 49 | SD | 2,783,070 |
| 6 | OH | 89,924,210 | | MI | 38,497,140 | 28 | UT | 25,119,550 | 39 | IA | 9,466,720 | 50 | DC | 2,558,370 |
| 7 | TN | 72,406,400 | | IN | 38,085,700 | 29 | NV | 24,680,980 | 40 | NH | 9,394,600 | 51 | ND | 2,448,080 |
| 8 | GA | 68,209,870 | 19 | KY | 37,508,880 | 30 | СТ | 24,090,920 | 41 | ME | 9,176,620 | 52 | PR | 2,340,900 |
| 9 | AZ | 65,575,970 | 20 | AL | 36,250,210 | 31 | | 22,658,560 | 42 | NE | 7,454,340 | 53 | GU | 167,000 |
| 10 | NJ | 65,129,650 | 20 | SC | | 32 | AR | | 43 | HI | | 54 | VI | 113,000 |
| | | | | | 36,205,760 | | | 19,989,750 | | | 6,476,220 | | | |
| 11 | WA | 55,672,390 | 22 | OR | 35,712,570 | 33 | KS | 19,465,910 | 44 | RI | 6,064,370 | 55 | AS Detail Disc | C |

* Business Activity-Retail Pharmacies

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State Ranking* - Oxymorphone January – June 2018

| RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL |
|------|-------|-----------|------|-------|---------|------|-------|---------|------|-------|---------|------|-------|--------|
| 1 | ΤN | 1,885,040 | 12 | SC | 478,420 | 23 | WA | 259,260 | 34 | KS | 124,560 | 45 | MT | 27,280 |
| 2 | PA | 1,732,820 | 13 | LA | 462,140 | 24 | MO | 243,380 | 35 | ID | 114,060 | 46 | RI | 24,680 |
| 3 | FL | 1,415,380 | 14 | GA | 411,400 | 25 | CO | 235,060 | 36 | AR | 94,980 | 47 | AK | 22,060 |
| 4 | NC | 1,370,620 | 15 | NJ | 410,200 | 26 | NV | 230,160 | 37 | ME | 88,320 | 48 | WY | 21,680 |
| 5 | NY | 1,225,800 | 16 | AL | 367,640 | 27 | СТ | 207,540 | 38 | NH | 75,320 | 49 | VT | 16,480 |
| 6 | MI | 934,580 | 17 | AZ | 357,520 | 28 | OR | 181,640 | 39 | NM | 74,800 | 50 | ND | 13,220 |
| 7 | VA | 809,820 | 18 | OK | 347,160 | 29 | MS | 177,880 | 40 | NE | 69,420 | 51 | DC | 11,300 |
| 8 | ΤX | 797,720 | 19 | UT | 345,458 | 30 | WV | 158,040 | 41 | IA | 67,580 | 52 | AS | (|
| 9 | MD | 797,680 | 20 | IN | 325,800 | 31 | WI | 153,460 | 42 | SD | 40,800 | 53 | GU | (|
| 10 | СА | 787,840 | 21 | IL | 316,400 | 32 | DE | 140,760 | 43 | MN | 36,320 | 54 | PR | (|
| 11 | OH | 656,880 | 22 | KY | 283,040 | 33 | MA | 135,920 | 44 | HI | 31,640 | 55 | VI | 0 |

* Business Activity-Retail Pharmacies

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State Ranking* - Methadone January – June 2018

| RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL | RANK | STATE | TOTAL |
|------|-------|------------|------|-------|-----------|------|-------|-----------|------|-------|-----------|------|-------|---------|
| 1 | СА | 16,985,900 | 12 | AL | 3,430,300 | 23 | TN | 1,955,900 | 34 | СТ | 1,129,500 | 45 | NM | 440,600 |
| 2 | FL | 11,198,040 | 13 | IN | 3,256,600 | 24 | SC | 1,899,500 | 35 | NH | 1,123,800 | 46 | MT | 378,200 |
| 3 | NY | 7,266,400 | 14 | VA | 3,086,000 | 25 | UT | 1,879,800 | 36 | ME | 925,900 | 47 | RI | 332,500 |
| 4 | ΤX | 7,077,040 | 15 | OR | 3,034,600 | 26 | MN | 1,692,200 | 37 | IA | 836,000 | 48 | SD | 252,200 |
| 5 | MI | 6,583,000 | 16 | MD | 2,688,200 | 27 | WI | 1,622,900 | 38 | AK | 788,400 | 49 | WY | 206,000 |
| 6 | PA | 5,679,300 | 17 | MO | 2,508,000 | 28 | LA | 1,600,500 | 39 | VT | 713,400 | 50 | ND | 197,900 |
| 7 | WA | 5,247,800 | 18 | KY | 2,459,000 | 29 | СО | 1,536,000 | 40 | WV | 678,880 | 51 | DC | 64,100 |
| 8 | NC | 5,125,860 | 19 | IL | 2,407,200 | 30 | ОК | 1,521,400 | 41 | HI | 615,700 | 52 | PR | 7,500 |
| 9 | GA | 4,928,500 | 20 | AZ | 2,258,800 | 31 | AR | 1,475,400 | 42 | NE | 566,400 | 53 | GU | 7,400 |
| 10 | ОН | 4,562,500 | 21 | NJ | 2,122,000 | 32 | KS | 1,346,200 | 43 | MS | 555,000 | 54 | VI | 600 |
| 11 | MA | 3,497,700 | 22 | NV | 1,985,500 | 33 | ID | 1,254,900 | 44 | DE | 528,800 | 55 | AS | 0 |

* Business Activity-Retail Pharmacies

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Opioid Usage in the U.S.



Opioid Usage in the U.S.



Prescription Opiates

Heroin

Pharmaceutical Trends: Most Abused – Michigan

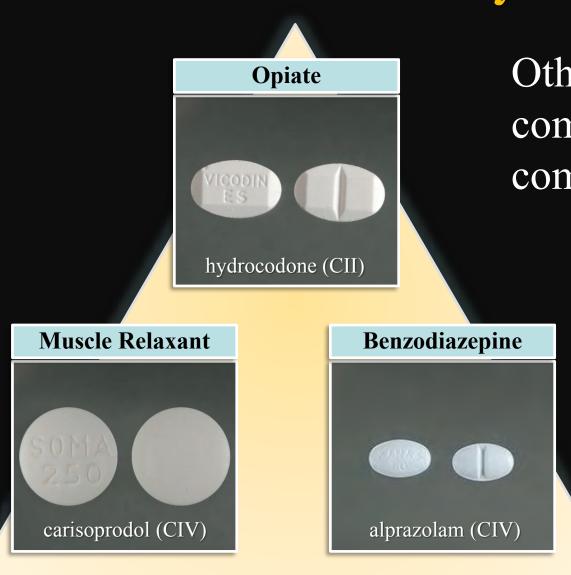








The Trinity



Other drugs that may comprise a "trinity" combination:

- Oxycodone
- Tramadol
- Gabapentin
- Others



Fentanyl

- Synthetic opioid
- Fentanyl patches
- Fentanyl citrate dispensed in a berry-flavored lollipop-type unit
- Fentanyl is 50-100 times more potent than morphine and 30-50 times more potent than heroin
- Intended to be used for chronic cancer pain & only for people who are tolerant to prescription opioid (narcotic) pain medicines
- Abused for its intense euphoric effects

Fentanyl Trends



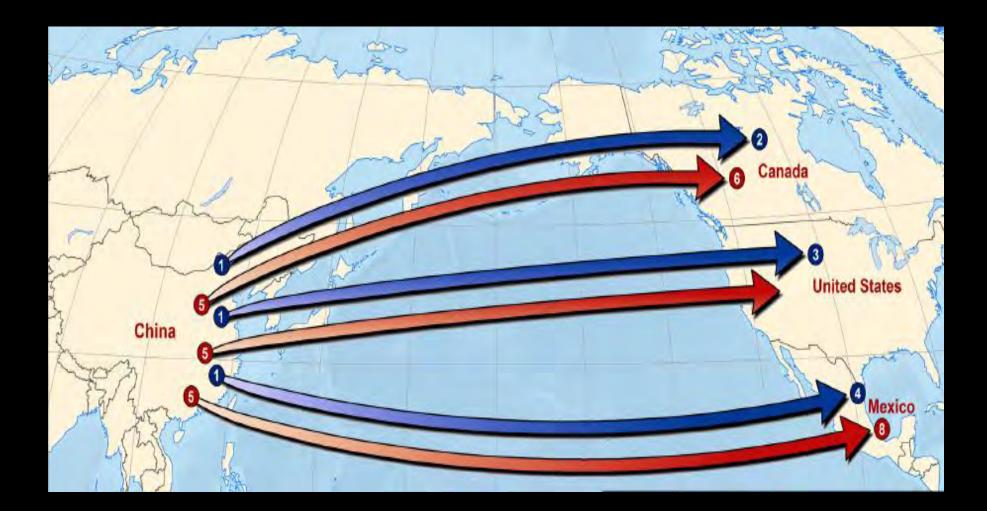
- Lethal dose: ~2 mg for nonopioid dependent individuals
- Illicit drugs are being laced with fentanyl
- 500,000 pills can be manufactured from 1 kg of pure fentanyl
- Mexico and China: major source countries for illegal fentanyl
- Illicitly produced fentanyl is sold alone or in combination with heroin/other drugs and can mimic pharmaceutical drugs in appearance

Fentanyl Trends

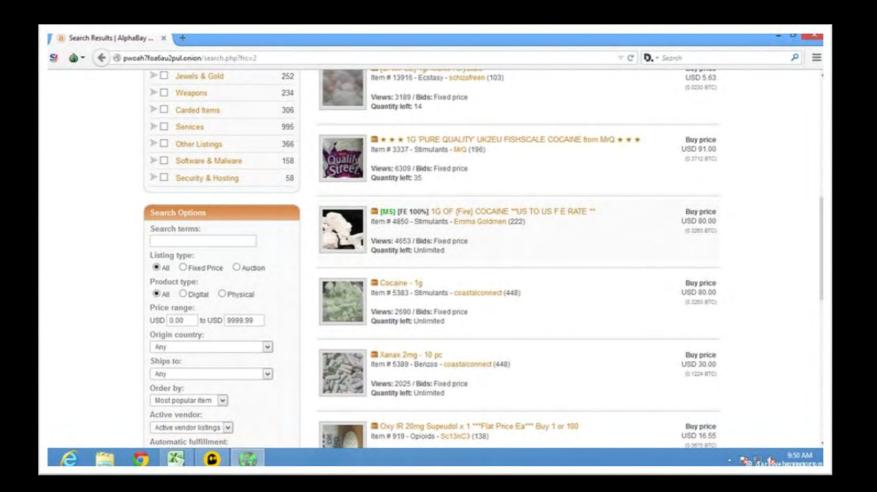




Fentanyl



Fentanyl Trends



Fentanyl Trends





Fentanyl: Dangers to Practitioners

- Be cautious when inventorying personal items in ED or the hospital
- Be cautious when touching patients
- Be cautions when going through a patient's personal items
- Don't ever take back a patient's medications



Methamphetamine

- Stimulant that speeds up body's system
- Pill or powder form
- Available as prescription as Desoxyn® to treat obesity or ADHD
- Illegally altered form of prescription (crystal meth) resembles glass fragments
- Effects
 - Highly addictive
 - Agitation, increased heart rate, blood pressure
 - Increased respiration and body temperature
 - Anxiety, paranoia
 - High doses can cause convulsions, cardiovascular collapse, stroke, or death







Methods of Diversion

Methods of Diversion

- Employee pilferageHospitals/ambulance services
 - Practitioners' offices
 - Nursing homes
 - Retail pharmacies
 - Manufacturing/distribution facilities

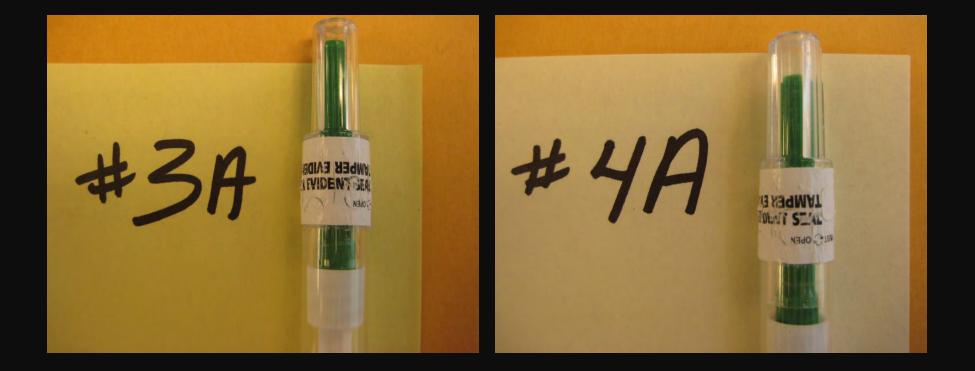




Intact Seal



Tampered Morphine



Methods of Diversion

- Pharmacy / other theft
 - Armed robbery/ night break-ins
 - In-transit loss (hijacking)
 - Smurfing (pseudoephedrine)
 - Various schemes to divert from Pharmacy



Methods of Diversion

- Practitioners / Pharmacists
 - Self abuse
 - Illegal distribution
 - Trading drugs for sex
 - Faking inventory







Tampered Boxes



Tampered Midazolam Box



Don't Forget the Bottom...







Egregious Activity

Diversion Red Flags: Patients



Wanting appointments late/after hours



Demands immediate attention



Uninterested in exam/diagnostic tests



Refusal to obtain past medical records



Recites textbook symptoms



Very vague medical history



Exaggerates medical condition



Claims medication, lost or stolen

Diversion Red Flags: Patients



Claims that past hospital /clinic is out of business or burned down



Deceives alternate practitioners while normal physician is out



Solicits Medicaid recipients to use Medicaid cards as payment method



Targets a lax doctor



Takes some, sells remaining medication



Offers to buy other patients' pills



Looks for employment where drugs or prescriptions are exposed



Alters prescriptions

Potential Diversion: Practitioners*



State laws ignored



Cursory medical exams



Lack of diagnostic testing/referrals



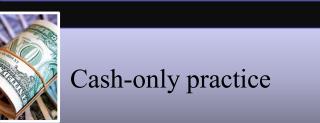
Extremely high patient volume

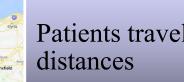


Brief visits



Multiple drugs within the same drug category





Patients travel long

*Doing one or more of these does not make prescribing illegal. It is the totality of the circumstances. This list is not allinclusive.

Potential Diversion: Practitioners*



Starting patients on high doses



Prescribing ineffective controlled substances continually



Non-medical staff determining prescription



Coaching patients what to say



Treating patients with controlled substances only



Excessive quantities or inappropriate meds relative to condition





*Doing one or more of these does not make prescribing illegal. It is the totality of the circumstances. This list is not allinclusive.

Potential Diversion: Practitioners*



Violation of own pain management policies and guidelines



Warnings from insurance companies, law enforcement, other practitioners, etc.



Receiving compensation for narcotic prescriptions (sex, guns, drugs, etc)



Charging excessive fees for office visits and/or prescriptions



Patient deaths



Practitioner using inventory for personal use



Patient suggests/directs medication to be prescribed



Patient trades services for prescriptions

*Doing one or more of these does not make prescribing illegal. It is the totality of the circumstances. This list is not allinclusive.

Does the Practitioner Ignore Signs of Abuse?



Starting patients on high doses



Patient under the influence



Patient asks for controlled substances by name



Patient is doctor shopping



Warnings by patient's family members



Ignoring toxicology reports



No medical history requested/obtained

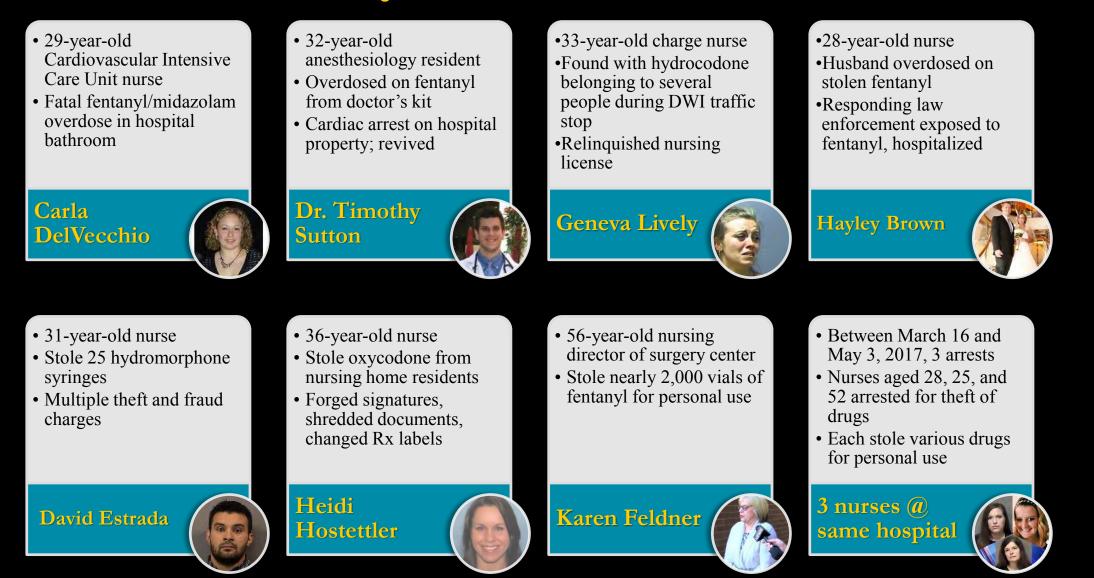


Prescribe to patients who admit to buying pills off the street





Diversion by Healthcare Providers





Egregious Activity: MI Physicians



Dr. Sam Awada

•Warren, MI

•Ran 16-month "pill mill"

•Conspired with another doctor and "marketer" to write 80,000 prescriptions for oxycodone and roxicodone

•Fraudulently billed Medicare and BCBS for services



Dr. Fanny dela Cruz

•Livonia, MI

- •Signed blank prescription forms for controlled substances
- •Medical testing, office visits billed to Medicare
- •No medical examinations

•Pills prescribed by dela Cruz sold in metro Detroit



•Detroit, MI

•Wrote controlled substance prescription "cocktails" to patients without legitimate medical needs at a coconspirator's home

•Fraudulently billed Medicare and Blue Cross



Dr. Mark Buzzard

- •W Bloomfield, MI
- •Involved in \$13 million prescription drug ring diverting drugs within Michigan and to Tennessee
- •Wrote prescriptions for cash payments
- •Wrote more than 2 million dosage units of controlled substances

Egregious Activity: Physician Assistants



Kelly Beelman

•Bay City, MI

•Wrote and sold bogus prescriptions for "patients" to sell

•Addiction to Ambien

•Wrote Ambien prescriptions; "patients" would fill prescription and sell Beelman the pills



Mark Flores

•San Ramon, CA

•Promoted self as "personal medical quarterback"

•Sold multiple controlled substances to undercover agents

•Told undercover agent that he didn't usually offer prescriptions to strangers unless they were "hot"



Leonard Marchetta

•Staten Island, NY

•Ran large oxycodone distribution ring

•Wrote approximately 4,109 oxycodone prescriptions over twoyear period

•Received \$250 cash from "patients" in addition to billing Medicaid/insurance



Michael Troyan

•Riverhead, NY

•Operated two urgent care clinics

•Issued prescriptions for thousands of oxycodone pills for illegal re-sale

•Involved in 4-year drug conspiracy with 20 others to support pill habit



Marketing Scheme

Marketer:

- Brings "patients" to conspiring doctor, receives payment from doctor
 - Often by van or busload
 - Multiple patients per day
 - May solicit "patients" from soup kitchens and shelters
 - Looks for patients with "red white and blue" cards
- Purchases prescription drugs from "patients" to sell on the street

Patient":

- Insurance/Medicare/Medicaid billed by doctor, pharmacy
- Sells prescription pills to marketer

Contact Information

Complaints

- Local Police: Immediate threats to human health/safety
- Consumer complaints (LARA): 517-373-9196; BPLhelp@michigan.gov
- <u>DEA</u>: Report prescription drug diversion by doctor/pharmacy www.deadiversion.usdoj.gov/tips_online.htm
- <u>HHS</u>: Hotline 1-800-HHS-TIPS; <u>OIG.HHS.gov/report-fraud</u>
- State PDMP
 - <u>Michigan Automated Prescription System</u> (MAPS) help: www.michigan.gov/mimapsinfo
- Recovery
 - 1-800-662-HELP (4357)
 - https://findtreatment.samhsa.gov