



Harold Rogers Prescription Drug Monitoring Program

19th National Conference on
Pharmaceutical and Chemical Diversion
June 16-17, 2010



Harold Rogers Prescription Drug Monitoring Program

- Since fiscal year 2002, Congress has appropriated funds to the U.S. Department of Justice to support these programs through the Harold Rogers Prescription Drug Monitoring Program, which is administered by the Bureau of Justice Assistance (BJA).



Purpose of the Program

- The program's purpose is to support states efforts to collect and analyze dispensing pharmaceutical controlled substances data.
- PDMPs enhance the capacity of regulatory and law enforcement agencies and public health officials to prevent and detect the diversion and abuse of pharmaceutical controlled substances, while allowing for legitimate medical use.



Goals of the Program

- Building a data collection and analysis system at the state level
- Enhancing existing programs' ability to analyze and use collected data
- Facilitating the exchange of collected prescription data among states
- Assessing the efficiency and effectiveness of the programs funded under this initiative



Funding History

- FY 2003: \$7,500,000
- FY 2004: \$7,000,000
- FY 2005: \$10,000,000
- FY 2006 & FY 2007: \$7,500,000
- FY 2008: \$7,050,000
- FY 2009 & FY 2010: \$7,000,000



Grant Categories

Through the Harold Rogers Prescription Drug Monitoring Grant Program, BJA offers three types of funding categories:

- **Planning (\$50,000):** Funds may be used to assist states in planning for a data collection and analysis system.
- **Planning & Implementation (\$400,000):** Funds may be used to plan, establish, and build a data collection and analysis system.
- **Enhancement (\$400,000):** Funds may be used to enhance the functioning of a data collection and analysis system.



Grants Awarded

- Since 2003, there have been 131 grant awards made to 47 states and 1 U.S. territory to plan, implement, or enhance a PDMP.
- In fiscal year 2009, BJA awarded \$4,944,639 in direct federal grants to 15 states, with additional support going to support technical assistance and to set up the PMP Center of Excellence.



Performance:

In calendar year 2008, grantees reported that:

- Nearly 9,500 prescribers, dispensers, and law enforcement officials received formal training on the use of the PDMP.
- State PDMPs responded to over 2 million requests for reports made by a prescriber, dispenser, or individuals authorized to conduct investigations.
- State PDMPs generated over 490,000 unsolicited reports to provide prescribers or dispensers with information on patients who may be abusing prescription drugs and/or doctor shopping based on threshold criteria established by the program. This represents a 775% increase over what was reported in by grantees in 2007.



Growth of Program

- As of April 2010, a total of 41 states and 1 U.S. territory have active or planned PDMPs – 266% increase since 2003:
 - This includes 34 states with operational programs and 7 states and 1 U.S. territory with approved legislation.
 - Another 5 (Georgia, Wisconsin, Maryland, Delaware, New Hampshire) states introduced legislation this year to obtain statutory authority to operate a PDMP.



Training and Technical Assistance

- A partnership of:
 - Alliance of States with Prescription Monitoring Programs (the Alliance)
 - Brandeis University
- Regional Events
- National Conference: June 28-30, 2010
- Newsletter, Online Resources (PMP Administrator's Forum)
- Day-to-day technical assistance
- Topic Specific Meetings



PMP Center of Excellence

- Primary Objective: Fill the knowledge gap regarding the operations and effectiveness of PDMPs.
- This is the first time that funding has been dedicated to solely focus on demonstrating effectiveness and impact of PDMPs
- Your input is key to the success of the Center and continuing to demonstrate the value of PDMPs to state, federal, and national stakeholders.



Fiscal Year 2010 Program

- In fiscal year 2010, a total of 21 eligible applications were submitted. Funding decisions are pending and will be made by the end of our fiscal year which is September 30th. Priority for funding on Implementation awards and states proposing to use funding for information sharing.
- Funding will continue to support Brandeis University and the Alliance to provide training and technical assistance and to continue and expand on the work of the PMP Center of Excellence.



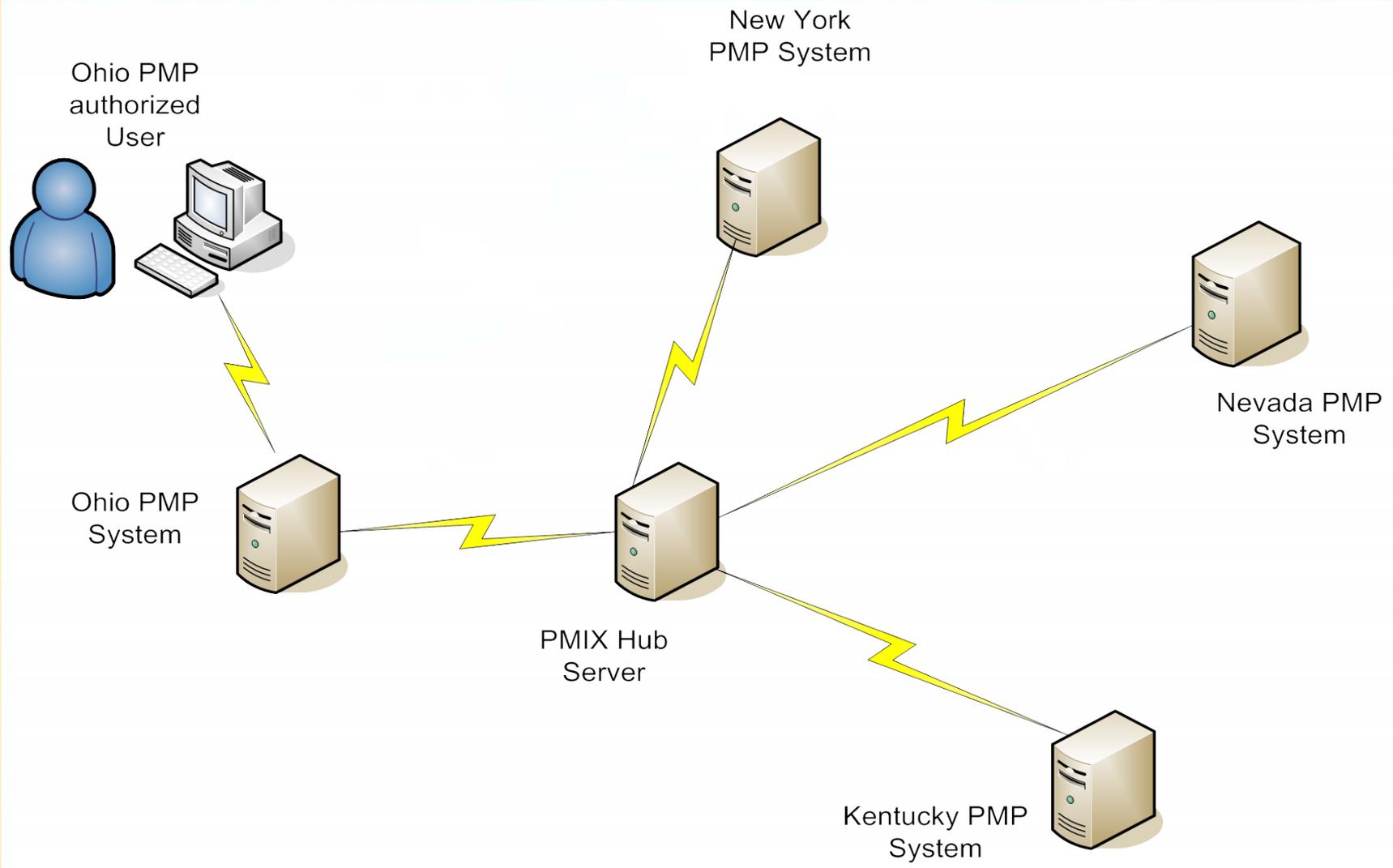
Information Sharing

- Through a partnership with the IJIS Institute and state PDMP representatives, BJA has supported the creation of an innovative way for states to effectively share data in a secure manner.
- Doctor shopping not only occurs within a state, but across state borders which makes it a challenge to properly treat patients and/or investigate cases related to diversion of controlled substances.



PDMP Information Exchange (PMIX) Project

- State PDMPs and BJA have invested significant time and funding on a project that allows interstate exchange of PDMP information across state lines.
- PMIX has resulted in the development of a prototype system that proves the value of a shared hub server used to centrally facilitate and broker PMIX exchanges between states.
- States are encouraged to use HRPDMP grant funding to engage in information exchange via the PMIX Hub Server.





State Success in Information Sharing

- In the fall of 2009, Kentucky and Ohio successfully demonstrated two exchanges (one originating in each state) of simulated patient data demonstrating the success of the project.
- Regional MOU Approach



PDMPs Initiatives

- Web Portal Implementation
- Weekly Reporting
- Expanding schedules to be monitored
- Requiring positive ID for all Rx
- Medical Examiners using PDMP Reports
- Drug Courts utilizing PDMPs
- Integration of PDMP data access into Electronic Health Records
- Medical Education on CS prescribing



Priorities for Intervention Using PDMPs

- Drug Take Back Initiatives
- Substance Abuse Prevention Efforts
- Treatment Programs
- Private Insurance Payers



Future Plans for Program

- Continue to work with TTA provider to assist current activities, support new states, and continue peer-to-peer learning environment through events and other networking opportunities.
- Ensure interstate sharing becomes a reality.
- Continue to work with and coordinate with other federal partners including HHS, DEA, and ONDCP.



Other Related Efforts

- National Initiatives: Addressing Substance Abuse Solicitation
 - BJA seeks a provider under the Pharmaceutical Crime Investigation and Prosecution Training Program to develop a program that will support communities in implementing effective investigative and prosecutorial techniques for cases related to prescription drug diversion.
 - BJA has required that the access and utilization of PDMPs be a required component of the to be developed training program.



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