Implementation of Florida’s PDMP

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Electronic-Florida Online Reporting of Controlled Substances Evaluation
I have no relevant financial relationships or commercial interest in the content presented in this program.
Learning Objectives:

- Provide overview of Florida's Prescription Drug Monitoring Program regulations
- Discuss data reporting requirements
- Demonstrate practitioner/pharmacist registration
- Demonstrate Pharmacist/Practitioner Query for Patient Advisory Report
- Discuss performance measures and outcomes
Frequency of Occurrence of Drugs in Decedents
January – December 2010

- Ethyl Alcohol: 23%
- Benzodiazepines: 21%
- Oxycodone: 14%
- Cocaine: 8%
- Methadone: 5%
- Hydrocodone: 6%
- Hydrocodone: 3%
- Cannabinoids: 5%
- Carisoprodol: 3%
- Oxymorphone: 3%
- Tramadol: 2%
- Zolpidem: 1%
- Hydromorphone: 1%
- Methylated Amphetamines: 2%
- Fentanyl: 1%
- Morphine: 4%
The purpose of the PDMP is to provide the information collected in the database to health care practitioners to guide their decisions in prescribing and dispensing these highly-abused prescription drugs.
Definitions:

- Section 893.055(1), F.S.:
  - A “dispenser” means a pharmacy, a dispensing pharmacist, or a dispensing health care practitioner.
  - A “health care practitioner” means any practitioner who is subject to licensure or regulation by the department under chapters 458, 459, 461, 462, 464, 465, or 466, F.S.
Definitions (cont.):

• Section 893.02(1), F.S.:
  – “Administer” means the direct application of a controlled substance, whether by injection, inhalation, ingestion, or any other means, to the body of a person or animal.
Reporting Requirements:

- Beginning September 1, 2011, ALL dispensers of scheduled controlled substance prescriptions in schedules II, III, & IV began to report weekly.
- The PDMP program requested that dispensers report retroactive data, from December 1, 2010 to August 31, 2011.
Reporting Requirements (cont.):

The following information must be reported for each controlled substance dispensed to a patient:

- **Patient Info:**
  - Demographics
  - Date of Birth
  - Gender

- **Prescriber Info:**
  - Demographics
  - NPI number
  - DEA Number
  - License Number
Reporting Requirements (cont.):

- Dispensing Info:
  - Dispenser’s DEA number
  - Rx Number
  - Date written, date filled
  - Refill number (if applicable)
  - NDC
  - Quantity/Strength Dispensed
  - Payment Type
Exemptions:

- When **administering** a controlled substance directly to a patient if the amount is adequate to treat the patient during that particular treatment session.
- When **administering** a controlled substance dispensed to a patient receiving care in a:
  - Hospital
  - Nursing home
  - Ambulatory Surgical Center
  - Hospice
  - Intermediate care facility for the developmentally disabled
Exemptions (cont.):

- When a controlled substance is **administered** or **dispensed** in the health care system of the Department of Corrections
- When **administering** a controlled substance directly to the patient during treatment or in the emergency room of a hospital
Exemptions (cont.):

- When a controlled substance **administered or dispensed** to a patient under the age of 16 years old

- When **dispensing** of a one-time 72 hour emergency resupply of a controlled substance to a patient
Zero Reports:

- If a dispenser usually dispenses controlled substances in Florida but has no dispensing transactions to report for the preceding seven (7) day period, the dispenser must report this information to E-FORCSE by filing a zero report.
Exemption from Reporting – if a dispenser is registered as a “dispensing practitioner” in the state of Florida, but does not dispense controlled substances.

Waiver from Electronic Reporting - if a dispenser is unable to report to the FL RxSentry database electronically.
• A health care practitioner who willfully and knowingly fails to report the dispensing of a controlled substance as required by section 893.055, F.S., commits a **first degree misdemeanor**.
Dispenser’s Implementation Guide:

- Reporting requirements
- Submission methods
- Creating an upload account
- Creating a data file
- Reporting data
- Errors & Definitions
Accessing the Database:

• Section 893.055(7)(b), F.S.:
  – A pharmacy, prescriber, or dispenser shall have access to information in the prescription drug monitoring program’s database which relates to a patient of that pharmacy, prescriber, or dispenser for the purpose of reviewing the patient’s controlled substance prescription history.
Patient Advisory Reports (PARs):

- Section 893.055(1)(a):
  - “information provided by the department in writing, or as determined by the department, to a prescriber, dispenser, pharmacy, or patient concerning the dispensing of controlled substances.”
  - Provided for informational purposes only and impose no obligations of any nature or any legal duty on a prescriber, dispenser, pharmacy, or patient.
  - Not subject to discovery or introduction into evidence in any civil or administrative action.
Patient Advisory Reports (PARs):

- Section 893.055(2)(a), F.S.:
  - Requires DOH to provide prescription information to a patient’s health care practitioner and pharmacist who inform the department that they wish the PAR provided to them.
  - The system shall be designed to provide information regarding dispensed prescriptions of controlled substances and shall not infringe upon the legitimate prescribing or dispensing of a controlled substance by a prescriber or dispenser acting in good faith and in the course of professional practice.
Welcome to E-FORCSE, the State of Florida’s Prescription Drug Monitoring Program!

The Electronic – Florida Online Reporting of Controlled Substances Evaluation program (E-FORCSE) is Florida’s Prescription Drug Monitoring Program (PDMP). The PDMP was created by the 2009 legislature in an initiative to encourage safer prescribing of controlled substances and to reduce drug abuse and diversion within the state of Florida.

E-FORCSE has selected Health Information Designs, Inc., to develop a database that will collect and store prescribing and dispensing data for controlled substances in Schedules II, III, and IV. The purpose of the PDMP is to provide the information that will be collected in the database to health care practitioners to guide their decisions in prescribing and dispensing these highly-abused prescription drugs.

Section 893.055, Florida Statutes, requires health care practitioners to report to the PDMP each time a controlled substance is dispensed to an individual. This information is to be reported through the electronic system as soon as possible but not more than 7 days after dispensing. This reporting timeframe ensures that health care practitioners have the most up-to-date information available.

E-FORCSE will comply with the Health Insurance Portability and Accountability Act (HIPAA) as it pertains to protected health information (PHI), electronic protected health information (EPHI), and all other relevant state and federal privacy and security laws and regulations. The information collected in the system will be used by the PDMP to encourage safer prescribing of controlled substances and reduce drug abuse and diversion within the state of Florida.
Practitioner/Pharmacist Site:

- Terms and Conditions
- Access Request Site
- User's Guide for Practitioners & Pharmacists
- Practitioner & Pharmacist Query Site
Training Guide for Practitioners & Pharmacists:

- Requesting an Account
- Creating query requests
- Viewing query request status
- Generating reports
- Viewing patient reports
Logging on to FL RxSentry® (cont.):

- User Name: newacct
- Password: welcome
Provider/Pharmacist Account Request Form

* Name (as used for licensure and DEA registration):

* Date of Birth (MM/DD/YYYY):

* State License Number: * License Type: Select type

* Date Licensure Expires (MM/DD/YYYY):

* DEA Number (Practitioners): NPI (If applicable):

* Facility/Practice Name:

* Mailing Address:

* City: * State: Select a state * Zip Code:

County:

* Email Address: * Phone #: Fax #:

Submit
Logging on to FL RxSentry®:

Practitioner/Pharmacist

Terms and Conditions

Access Request Site

User's Guide for Practitioners & Pharmacists

Practitioner & Pharmacist Query Site
Logging on to FL RxSentry®

Welcome to the Health Information Designs system for monitoring Opioid and Substance Use for Florida.
Practitioner/Pharmacist Query:

Practitioner/Pharmacist Certification Statement

I certify that I am licensed to prescribe, dispense, or administer controlled substances in the State of Alabama and have been approved by the Alabama Department of Public Health to access information in the controlled substance database.

I certify that the patient on whom I am requesting information is a current or prospective patient of mine. I understand inappropriate access or disclosure of this information is a violation of Alabama law and may result in disciplinary action by my licensing board and/or revocation of database access privileges.

I understand that the Prescription Monitoring Program data is for informational purposes and users should not make a determination without verifying the information with the prescribers and dispensers due to the fact that the information is only as accurate as reported to the program.

[ ] I accept the above conditions

You must accept the above conditions before you can continue.
## Practitioner/Pharmacist Query

### Report Format

<table>
<thead>
<tr>
<th>Name Selection</th>
<th>Demographic Focus</th>
<th>County Selection</th>
<th>Zipcode Selection (blank for all)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Recipient</strong></td>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Last Name</em></td>
<td><em>Target DOB</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>First Name</em></td>
<td>within <em>Exact Match</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>Statewide</em></td>
<td>Baldwin</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Barbour</td>
<td></td>
</tr>
</tbody>
</table>

### Name Selection

- **Recipient**
  - Last Name: [Input Field]
  - First Name: [Input Field]

### Demographic Focus

- **Gender**
  - [Dropdown]

### County Selection

- *Statewide*
- Autauga
- Baldwin
- Barbour

### Zipcode Selection (blank for all)

### Alias Details

- **Alias #1 Name**
  - Last: [Input Field]
  - First: [Input Field]
  - DOB: [Input Field]

- **Alias #2 Name**
  - Last: [Input Field]
  - First: [Input Field]
  - DOB: [Input Field]

- **Alias #3 Name**
  - Last: [Input Field]
  - First: [Input Field]
  - DOB: [Input Field]

### Address Details

- **Primary Address**
  - City: [Input Field]

- **Other Address 1**
  - City: [Input Field]

- **Other Address 2**
  - City: [Input Field]

### Dispensed Timeframe

- **Dispensed Timeframe From:** 12/03/2010
- **Dispensed Timeframe To:** 08/01/2011

### Preset Timeframe Ranges

- Custom Timeframe
- Past Month
- Past Three Months
- Past Six Months
- Past Year

### Required Field

- All required fields must be filled in.

### Submit Button

- [Submit Button]

---

*Required Field*  
All required fields must be filled in. However, for the best search results, fill in as many fields as possible.
<table>
<thead>
<tr>
<th>Report Format:</th>
<th>Recipient Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recipient Name Equals</td>
<td>Smith, First Name Begins</td>
</tr>
<tr>
<td>DOB 01/25/83</td>
<td>For Zip codes beginning</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Zip</th>
<th>Address 1</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/06/84</td>
<td>2</td>
<td>6229 Sonhaven Dr, Shreveport LA 71119</td>
<td>Caddo</td>
</tr>
<tr>
<td>06/13/82</td>
<td>2</td>
<td>32387 cane Market Rd, Walker LA 70785</td>
<td>Livingston</td>
</tr>
<tr>
<td>06/09/84</td>
<td>2</td>
<td>7852 Vennie Dr, Denham Springs LA 70706</td>
<td>Livingston</td>
</tr>
<tr>
<td>11/25/81</td>
<td>2</td>
<td>105 Cole Pl, Sterlington LA 71280</td>
<td>Ouachita</td>
</tr>
<tr>
<td>11/25/81</td>
<td>2</td>
<td>2870 smartz Fairbanks Rd, Monroe LA 71203</td>
<td>Ouachita</td>
</tr>
</tbody>
</table>

Recipient Query Limit (50) Reached

Dispensed Timeframe To: 01/20/2011

Primary Address: City:

Other Address 1: City:

Other Address 2: City:

Select sort by: "by Date Only" or "by Recipient by Date"
<table>
<thead>
<tr>
<th>Date Dispensed</th>
<th>Date Prescribed</th>
<th>Quantity Dispensed</th>
<th>Days of Supply</th>
<th>Authorized Refills</th>
<th>NDC</th>
<th>Drug Name</th>
<th>Prescriber</th>
<th>Prescription Number</th>
<th>Dispenser</th>
<th>Dispenser City</th>
<th>Recipient Last Name</th>
<th>Recipient First Name</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/19/07</td>
<td></td>
<td>30</td>
<td>0</td>
<td>0</td>
<td>66993071602</td>
<td>ZOLPIDEM TARTRATE 10 MG TABLET</td>
<td></td>
<td>0000205</td>
<td>RITE AID PHARMACY #11366</td>
<td>CHAPEL HILL</td>
<td></td>
<td></td>
<td>04/13/63</td>
</tr>
</tbody>
</table>

Query 14121 has been created. View Query Status to retrieve report when query finishes running.
View Query Status:

- Approved/Queued – the query has been approved and is processing.
- Approved/Done – the query has been approved, processed, and is available for viewing.
View Patient Advisory Report:

- **Open** – open the PAR for viewing and printing (if desired)
- **Save** – save the PAR to a specific location for viewing and printing (if desired) at a later time.
- **Cancel**
Patient Rx History Report

Search Criteria: Last Name 'doe' and First Name 'jane' and D.O.B. = '01/01/83' and Address = '123 Main' and Request Period = '12/01/10' to '02/01/12' - 1 out of 1 Recipient(s) Selected.

<table>
<thead>
<tr>
<th>Fill Date</th>
<th>Product, Str, Form</th>
<th>Qty</th>
<th>Days</th>
<th>Pt ID</th>
<th>Prescriber</th>
<th>Written</th>
<th>RX#</th>
<th>N/R</th>
<th>Pharm</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/03/2011</td>
<td>DIAZEPAM 5 MG TABLET</td>
<td>30.00</td>
<td>7</td>
<td>00000000001</td>
<td>BS8292651</td>
<td>03/02/2011</td>
<td>4028684</td>
<td>N</td>
<td>BP8575461</td>
</tr>
<tr>
<td>02/09/2011</td>
<td>OXYCODONE HCL 30 MG TABLET</td>
<td>180.00</td>
<td>30</td>
<td>00000000001</td>
<td>FG1128443</td>
<td>02/09/2011</td>
<td>620807</td>
<td>N</td>
<td>BW7758759</td>
</tr>
<tr>
<td>02/09/2011</td>
<td>HYDROMORPHONE 8 MG TABLET</td>
<td>60.00</td>
<td>30</td>
<td>00000000001</td>
<td>FG1128443</td>
<td>02/09/2011</td>
<td>620806</td>
<td>N</td>
<td>BW7758759</td>
</tr>
<tr>
<td>02/03/2011</td>
<td>ALPRAZOLAM 1 MG TABLET</td>
<td>60.00</td>
<td>30</td>
<td>00000000001</td>
<td>BS8292651</td>
<td>02/03/2011</td>
<td>591314</td>
<td>N</td>
<td>BW7852569</td>
</tr>
<tr>
<td>01/28/2011</td>
<td>ZOLPIDEM TARTRATE 10 MG TABLET</td>
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<td>30</td>
<td>00000000001</td>
<td>BS8292651</td>
<td>12/03/2010</td>
<td>120205</td>
<td>R</td>
<td>BG9194527</td>
</tr>
<tr>
<td>01/12/2011</td>
<td>OXYCODONE HCL 30 MG TABLET</td>
<td>180.00</td>
<td>30</td>
<td>00000000001</td>
<td>FG1128443</td>
<td>01/12/2011</td>
<td>586661</td>
<td>N</td>
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</tr>
<tr>
<td>01/12/2011</td>
<td>HYDROMORPHONE 4 MG TABLET</td>
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<td>00000000001</td>
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<td>01/12/2011</td>
<td>586658</td>
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<td>BW7852569</td>
</tr>
<tr>
<td>12/31/2010</td>
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<td>15</td>
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<td>12/03/2010</td>
<td>120207</td>
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</tr>
<tr>
<td>12/30/2010</td>
<td>ZOLPIDEM TARTRATE 10 MG TABLET</td>
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<td>30</td>
<td>00000000001</td>
<td>BS8292651</td>
<td>12/03/2010</td>
<td>120205</td>
<td>R</td>
<td>BG9194527</td>
</tr>
<tr>
<td>12/22/2010</td>
<td>DIAZEPAM 10 MG TABLET</td>
<td>30.00</td>
<td>15</td>
<td>00000000001</td>
<td>BS8292651</td>
<td>12/03/2010</td>
<td>120207</td>
<td>R</td>
<td>BG9194527</td>
</tr>
<tr>
<td>12/15/2010</td>
<td>OXYCODONE HCL 30 MG TABLET</td>
<td>180.00</td>
<td>15</td>
<td>00000000001</td>
<td>FG1128443</td>
<td>12/15/2010</td>
<td>2097679</td>
<td>R</td>
<td>AW2058887</td>
</tr>
<tr>
<td>12/03/2010</td>
<td>DIAZEPAM 10 MG TABLET</td>
<td>30.00</td>
<td>15</td>
<td>00000000001</td>
<td>BS8292651</td>
<td>12/03/2010</td>
<td>120207</td>
<td>R</td>
<td>BG9194527</td>
</tr>
<tr>
<td>12/03/2010</td>
<td>ZOLPIDEM TARTRATE 10 MG TABLET</td>
<td>30.00</td>
<td>30</td>
<td>00000000001</td>
<td>BS8292651</td>
<td>12/03/2010</td>
<td>120205</td>
<td>N</td>
<td>BG9194527</td>
</tr>
</tbody>
</table>

*N/R N=New R=Refill

Prescribers for prescriptions listed

BS8292651 Doctor 1, address, city, state, zip
FG1128443 Doctor 2, address, city, state, zip
AS1837383 Doctor 3, address, city, state, zip

Pharmacies that dispensed prescriptions listed

BG9194527 Pharmacy 1, address, city, state, zip
AW2058887 Pharmacy 2, address, city, state, zip
BW7752569 Pharmacy 3, address, city, state, zip
BW7758759 Pharmacy 4, address, city, state, zip
BP8575461 Pharmacy 5, address, city, state, zip
BW8940923 Pharmacy 6, address, city, state, zip
BH313436 Pharmacy 7, address, city, state, zip
BC7975141 Pharmacy 8, address, city, state, zip

Patients that match search criteria

00000001 DOE JANE, DOB 01/01/83; 123 MAIN STREET, ANY CITY FL 33333
Performance Measures

Outcome: Reduction of the rate of inappropriate use of prescription drugs through department education and safety efforts.

Measure: The number of licensed prescribers, dispensers, and individuals authorized to conduct investigations that were trained in the use of the state’s PDM system.
## Number of PDMP Registered Users

<table>
<thead>
<tr>
<th>License Type</th>
<th>Number of Registered Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacists</td>
<td>4,453</td>
</tr>
<tr>
<td>Medical Doctors</td>
<td>3,575</td>
</tr>
<tr>
<td>Osteopathic Physicians</td>
<td>653</td>
</tr>
<tr>
<td>Podiatric Physicians</td>
<td>43</td>
</tr>
<tr>
<td>Physician Assistants</td>
<td>415</td>
</tr>
<tr>
<td>Advanced Registered Nurse Practitioners</td>
<td>469</td>
</tr>
<tr>
<td>Dentists</td>
<td>318</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>9,926</strong></td>
</tr>
</tbody>
</table>
# Number of Users Trained on Use of PDMP

<table>
<thead>
<tr>
<th>Question</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many licensed PRESCRIBERS were trained formally (in a classroom setting) in the use of the PDM system?</td>
<td>265</td>
</tr>
<tr>
<td>How many licensed PRESCRIBERS were trained informally (e.g., via the Internet, mass mailings, and so on) in the use of the PDM system?</td>
<td>80,376</td>
</tr>
<tr>
<td>How many licensed DISPENSERS were trained formally (in a classroom setting) in the use of the PDM system?</td>
<td>1,785</td>
</tr>
<tr>
<td>How many licensed DISPENSERS were trained informally (e.g., via the Internet, mass mailings, and so on) in the use of the PDM system?</td>
<td>30,625</td>
</tr>
</tbody>
</table>
Measure: The number of coroner reports that indicate controlled substance prescription drug use as the primary or contributing cause of death.

Measure: The number of emergency room admissions that identify accidental controlled substance overdose as the reasons for admission.
Performance Measures

Outcome: Reduction of the quantity of pharmaceutical controlled substances obtained by individuals attempting to engage in fraud and deceit.

Measure: Increase in reports generated.
<table>
<thead>
<tr>
<th>Month</th>
<th>Number of Queries</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 2011</td>
<td>34,486</td>
</tr>
<tr>
<td>November 2011</td>
<td>142,561</td>
</tr>
<tr>
<td>December 2011</td>
<td>160,588</td>
</tr>
<tr>
<td>January 2012</td>
<td>167,552</td>
</tr>
<tr>
<td>TOTAL</td>
<td>505,157</td>
</tr>
</tbody>
</table>
Outcome: Increased coordination among partners participating in the prescription drug monitoring program.

Measure: The number of licensed prescribers and distributors trained formally in coordination and data sharing.
Performance Measures

Outcome: Involvement of stakeholders in achieving improved patient health care and safety and reduction of prescription drug abuse and prescription drug diversion.

Measure: Percentage of stakeholder (state, federal agencies; professional associations, etc.) involvement
Number of Prescriptions Issued by Florida Prescribers Dispensed Outside the State of Florida

<table>
<thead>
<tr>
<th>Southeastern States</th>
<th>Number of Prescriptions 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama</td>
<td>116,000</td>
</tr>
<tr>
<td>Louisiana</td>
<td>16,000</td>
</tr>
<tr>
<td>North Carolina</td>
<td>48,000</td>
</tr>
<tr>
<td>South Carolina</td>
<td>28,000</td>
</tr>
<tr>
<td><strong>Other States</strong></td>
<td></td>
</tr>
<tr>
<td>Arizona</td>
<td>14,000</td>
</tr>
<tr>
<td>Vermont</td>
<td>1,700</td>
</tr>
<tr>
<td><strong>TOTAL:</strong></td>
<td><strong>223,700</strong></td>
</tr>
</tbody>
</table>

Communication from PMP Center of Excellence dated March 25, 2011.
Questions

How often does a pharmacy need to upload or report dispensing information to the PDMP?

a. 10 days
b. 15 days
c. 7 days
Questions

True or False

A pharmacist, dispensing a controlled substance in schedules II through IV to a patient or resident at a nursing home, is not required to report to the PDMP.
Questions

True or False

I am not required to view my patient’s specific controlled substance history prior to dispensing a controlled substance.
Questions

True or False

The Patient Advisory Report (PAR) is provided for informational purposes only and impose no obligations of any nature or any legal duty on a prescriber, dispenser, pharmacy, or patient.
Question

What is the penalty for a health care practitioner that does not report their schedule II-IV controlled substance dispensing data?

a. Felony
b. Misdemeanor
What is the penalty for disclosure of confidential information in the E-FORCSE database?

a. Felony
b. Misdemeanor
Need Help?

- Technical Support & Assistance: Health Information Designs, Inc.
  Phone: 1-877-719-3120
  Email: flpdmp-info@hidinc.com
  Website: hidinc.com/flpdmp
  8:00 am – 5:00 pm EST
Need Help? (cont.)

• Administrative Assistance: EFORCSE Program Staff
  Phone: 850-245-4797
  E-mail: E-FORCSE@doh.state.fl.us
  Website: www.eforcse.com
Rebecca Poston, Program Manager
Erika Marshall, Program Operations Administrator
Thank you!