

KASPER- Challenges and Legislative Changes in Kentucky

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Kentucky
UNBRIDLED SPIRIT



Disclosures

Amanda J. Ward:

- No relevant financial relationships.
- No conflicts of interest.

Learning Objectives

1. Describe current prescription drug abuse and diversion challenges for healthcare and law enforcement.
2. Discuss recent legislative changes that affect KASPER usage in Kentucky.

Question #1

Why is accurate data submitted to state Prescription Monitoring Programs important?

- A. Patients are getting dismissed from physician's offices for data that is not theirs on their KASPER.
- B. Physicians are filing complaints against pharmacies for submitting data under their DEA Number for patients that are not theirs.
- C. Law enforcement may be investigating a doctor shopper case that turns out to just be incorrect data.
- D. All of the above

Question #2

Which of the following is not submitted to KASPER?

- A. Date written
- B. Directions
- C. NDC
- D. Days Supply

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TRUE

FALSE

Question #4

Hospitals that dispense controlled substances would NOT be required to report which of the following medication dispensings to KASPER?

- A. 1 Percocet 10/325mg tablet for a 4 hour supply
- B. 6 Lortab 10/500mg tablets for a 24 hour supply
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KASPER

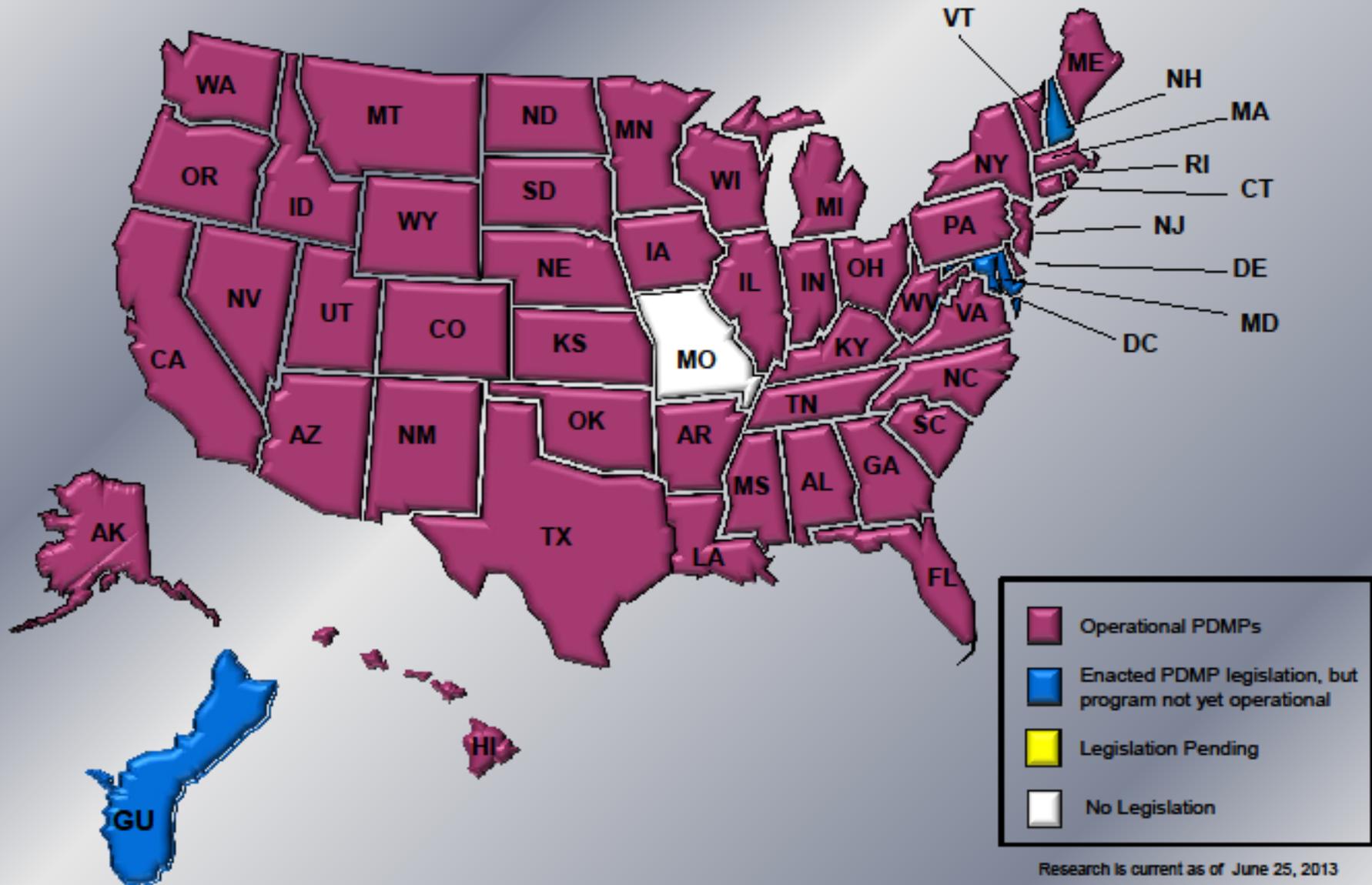
KASPER is Kentucky's Prescription Monitoring Program (PMP). KASPER tracks Schedule II – V controlled substance prescriptions dispensed within the state as reported by pharmacies and other dispensers.

Enhanced KASPER (eKASPER) is the real-time web accessed database that provides a tool to help address the misuse, abuse and diversion of controlled pharmaceutical substances.

PDMP Training & Technical Assistance Center

Status of Prescription Drug Monitoring Programs (PDMPs)

** To view PDMP Contact information, hover the mouse pointer over the state abbreviation*



Research is current as of June 25, 2013

KASPER Data Collected

- Patient identification:
 - First & Last Name
 - Date of Birth
 - Social Security Number
 - Address
 - Gender
- Prescription Number
 - Refill Number
- Quantity dispensed
- Days Supply – **CAUTION!!!**
- NDC of drug dispensed

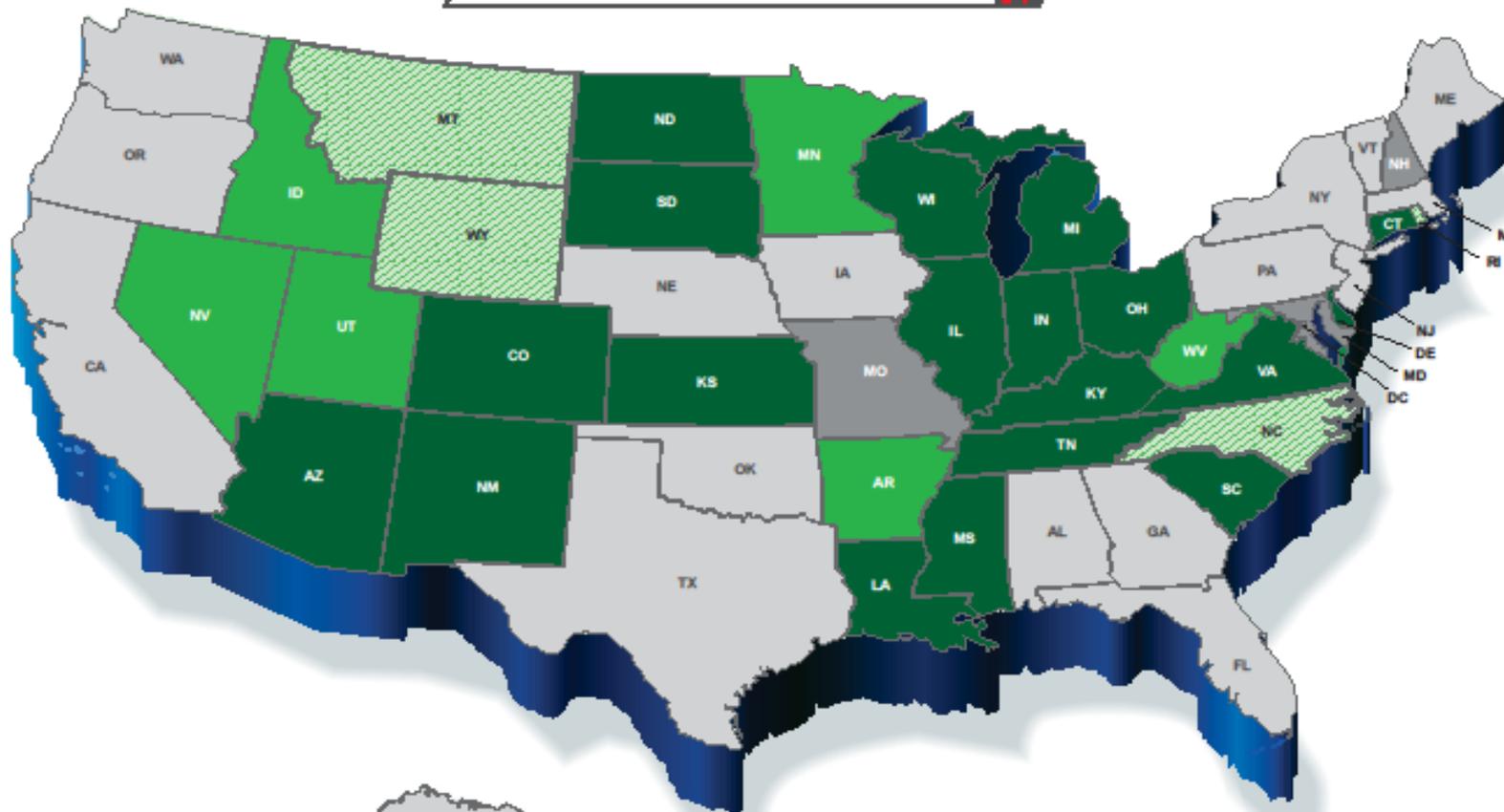
KASPER Data Collected

- Date dispensed
- Date written – **CAUTION!!!**
- Prescriber – **CAUTION!!!**
- Dispenser
- Payment method

Accurate KASPER Data

- Submitting correct data to the KASPER system is imperative for:
 - Law enforcement
 - Patients
 - Prescribers
 - Pharmacists
 - Data sharing

PMP INTERCONNECT®



- Legend**
- NABSP PMP InterConnect Participant (System Live)
 - Memorandum of Understanding Executed
 - Pending NABSP PMP InterConnect Participant
 - Prospective NABSP PMP InterConnect Participant
 - No PMP in Place



eKASPER Report Request - Master

KENTUCKY
CABINET FOR HEALTH AND FAMILY SERVICES
KENTUCKY ALL SCHEDULE PRESCRIPTION ELECTRONIC REPORTING

- Request Report
- Summary Report
- Status of Requests
- Administration

Request Report - For Single Patient

* Required Field

Patient / Subject Details

First Name *	<input type="text"/>	Last Name *	<input type="text"/>
ID Type	SSN	SSN *	<input type="text"/>
DOB(mm/dd/yyyy) *	<input type="text"/>	Click here for Aliases	<input type="text"/>

Patient / Subject Address Info

Address *	<input type="text"/>	City *	<input type="text"/>
State	KY	Zip Code	<input type="text"/>
		Click here for Other Addresses	<input type="text"/>

Report Details (Date in mm/dd/yyyy format)

From Date *	04/16/2012
To Date *	04/16/2013

Other States ([Help](#)) AL

A separate request must be submitted for Alabama data

- IN
- OH
- MI
- SC

Facility	FACILITY 2, 6666666666
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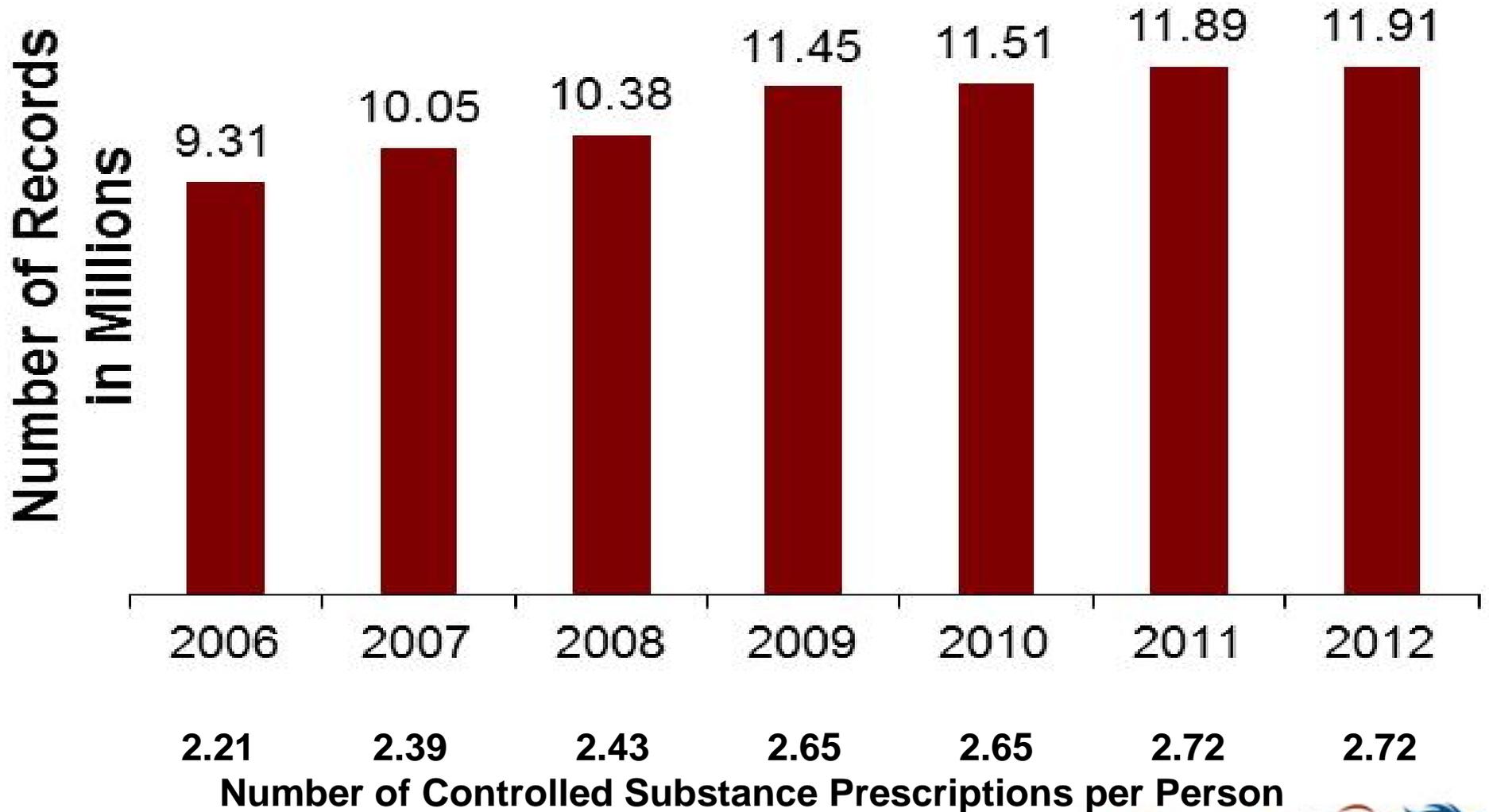
Email Notification

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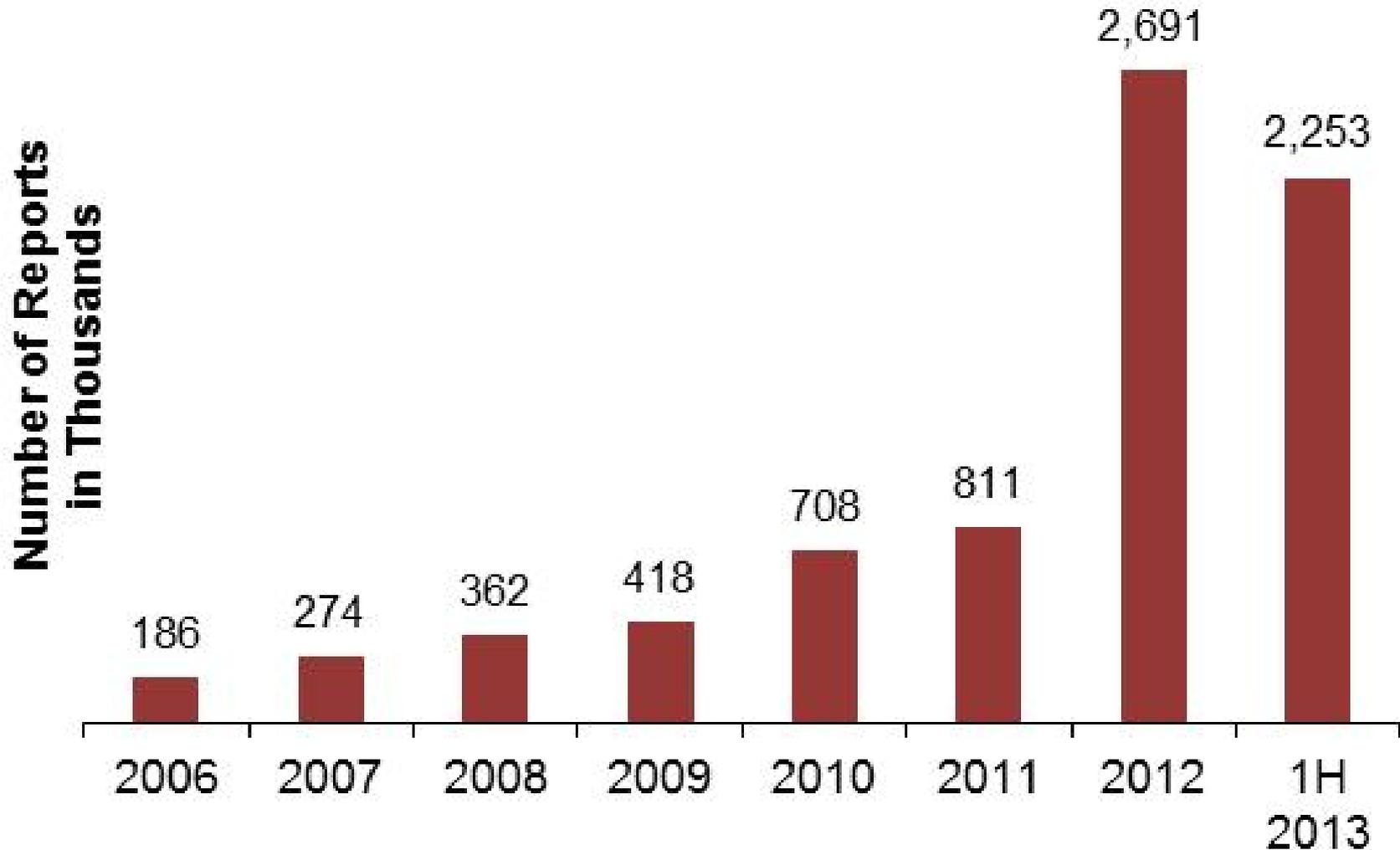
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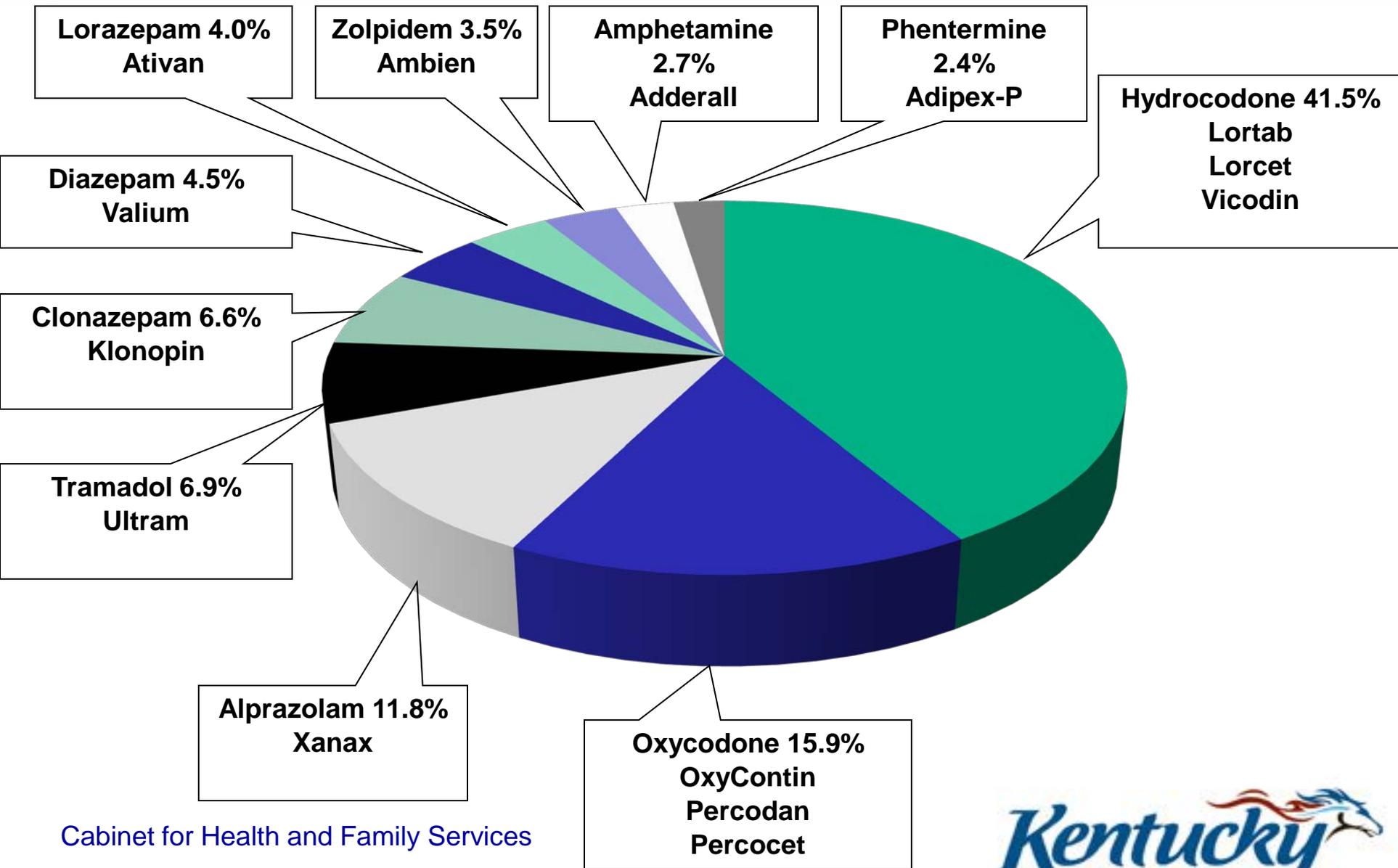
Annual KASPER Records Total / Per Person



2012 KASPER Reports Requested

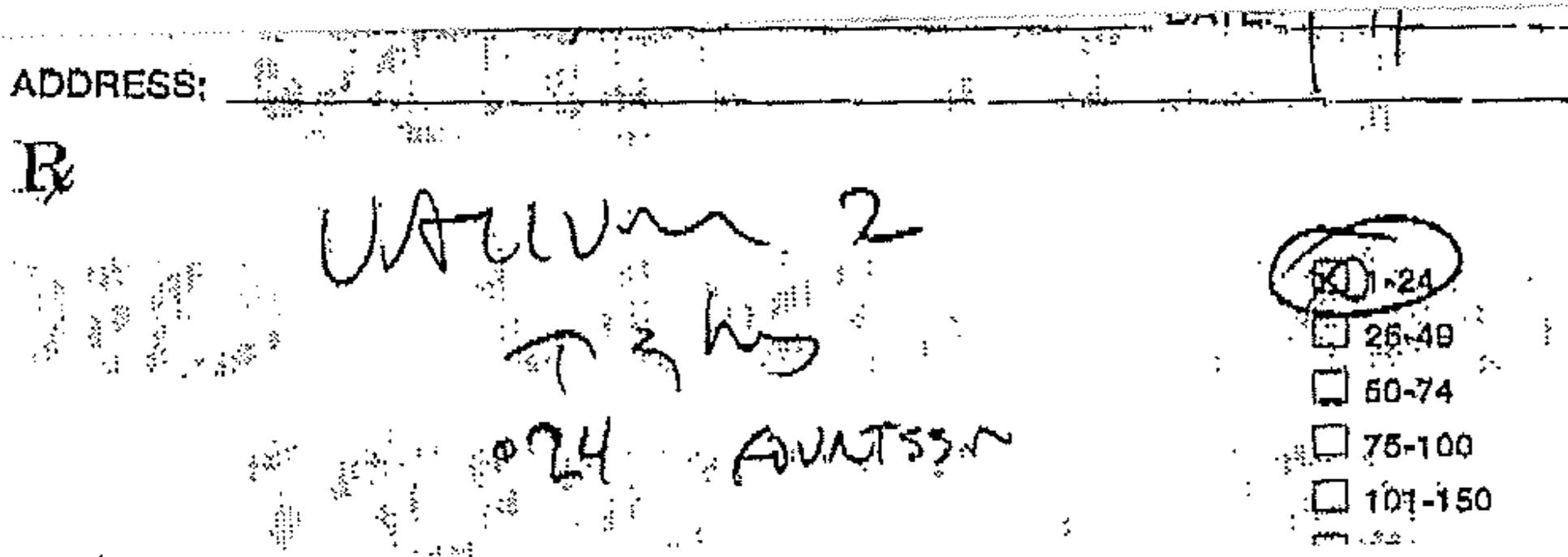


Top Prescribed Controlled Substances by Therapeutic Category by Doses - 2012



How it works

Forgeries



Forgeries

- Stolen rxs
- Scanned or copied rxs

Unlawful prescription - KRS 218A.288

Seizure of unlawful prescription

- (1) A pharmacist, practitioner, or other person authorized by law to dispense controlled substances, or an employee of that person, may seize and retain any prescription which he has reasonable suspicion for believing is forged, altered, or deceitful in violation of KRS 218A.140, 218A.282, or 218A.284.
- (2) Seizure and retention shall be for a reasonable period of time to make reasonable inquiry as to whether the prescription is forged, altered, or deceitful.

Unlawful prescription - KRS 218A.288

Seizure of unlawful prescription

- (3) If after reasonable inquiry the pharmacist, practitioner, or other person determines that the prescription is forged, altered, or deceitful, he shall report the seizure to a law enforcement officer and shall surrender the prescription to the officer upon the request of the officer.
- **This is evidence--** don't shred, throw away, rip, or give back to the patient.

We've all heard...

- Lost or stolen medications
 - Dropped down toilet
 - Dog ate my meds
 - Stolen out of my car
- Shorted by pharmacist

Overprescribing

- Overprescribing by prescribers
 - Older prescribers
 - Bad record keeping
 - Lax prescription writing habits
 - Sympathetic
 - Practitioners writing outside scope of practice

Be Wary

Prescriptions may not be for legitimate use if:

- Prescriber's pattern is different from other prescribers in the area
 - More prescriptions for CS
 - Rx for larger quantities
- Prescriber writes for antagonistic combo
 - phentermine and zolpidem
- Prescriber has multi-specialty practice:
 - Addiction, pain management, and dispensing weight loss drugs at office

Be Wary

Prescriptions may not be for legitimate use if:

- Patient is a frequent flier
 - Wants refills or has new rx before due date
- Patient presents multiple rxs for the same drug for different people
 - And photo IDs for them!

Be Wary

Prescriptions may not be for legitimate use if:

- Large number of patients suddenly show up with the same rxs (drug, qty, etc.) from same prescriber
 - May try to give a non-controlled rx first to see if you will fill it if the prescriber is from out of town. As soon as you do, then they give you the controlled rxs.

Tips from DEPPB

Identify doctor shoppers and avoid becoming a victim!

- Use KASPER
 - New patients
 - Before dispensing a controlled substance
 - Periodically for patients receiving a controlled substance

**** Not mandated by law for pharmacists to do, but a good practice**

Tips from DEPPB

- Be suspicious if a patient requests specific shape or brand name drugs
- Require photo ID for rx drop off or pick up
 - Scan ID into your system or record ID on the rx
- Get signatures of patients at pickup

Tips from DEPPB

Prevention Techniques

- Know the prescriber and signature
 - Know prescriber limitations for controlled substances
 - Enter correct prescriber!
- Know the patient
- Check the date on the prescription
- Contact the prescriber for verification
- Check ID of patient

Tips from DEPPB

- Patient address
 - Is it close to the prescriber or your pharmacy?
- Always going out of town when refill due
- Lost or stolen medications
 - Require a police report
 - If you believe them, limit them to one time

Tips from DEPPB

Check prescription for:

- Date
- Name and address of patient
- Drug Name, strength and dosage form
- Quantity (written and check box)
- Directions for use
- Number of refills (written and circled)
- Name, address and DEA of prescriber

Tips from DEPPB

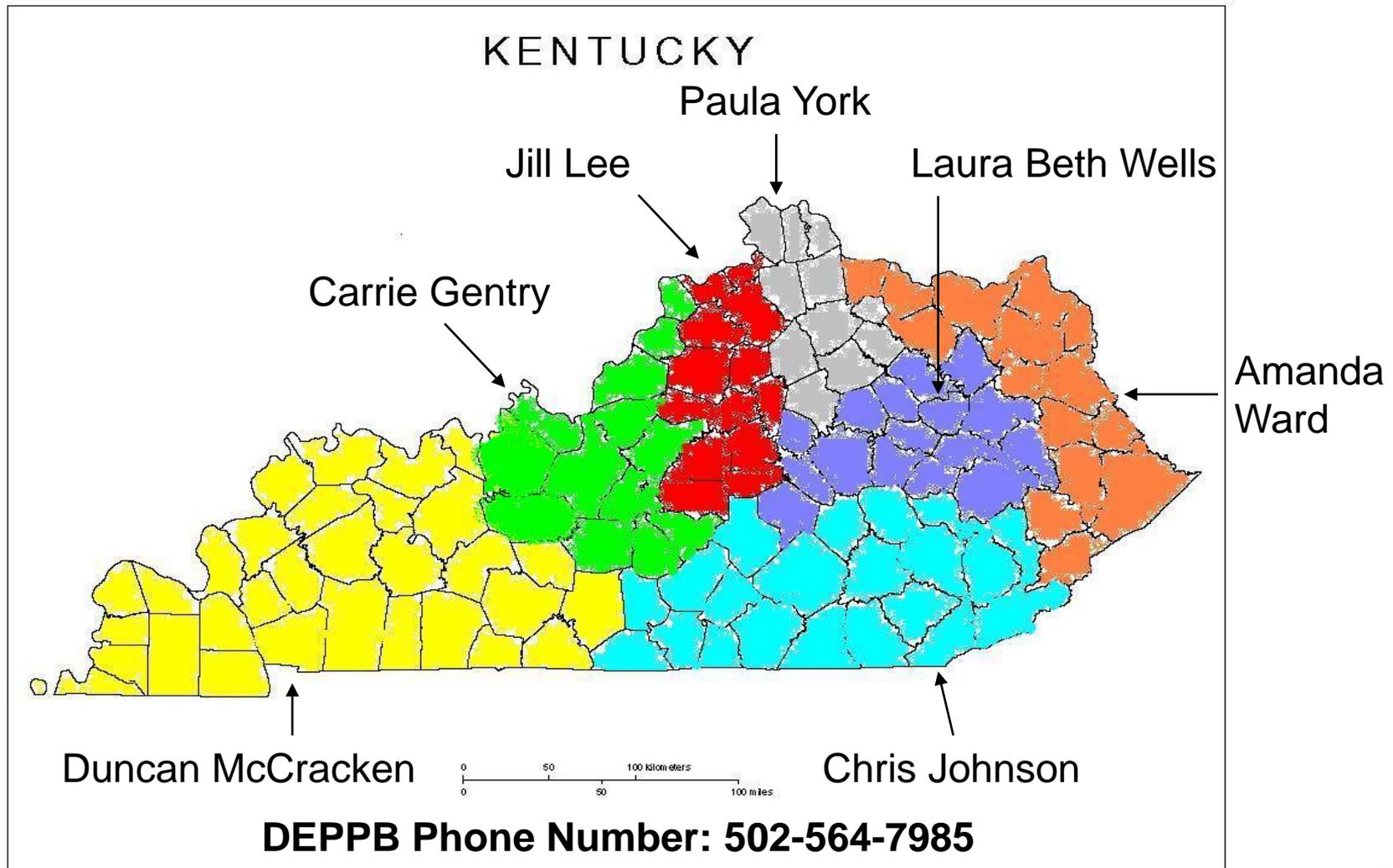
- Pharmacists are the last line of defense against drug diversion
- If you have any questions about the legitimacy of a prescription—
 - FULFILL YOUR CORRESPONDING RESPONSIBILITY!

Diversion

What do you do when diversion is suspected?

- If you suspect an individual is involved in diverting controlled substances, we ask that you please report them to the proper law enforcement authorities.
- If unsure who to contact please call the Drug Enforcement and Professional Practices Branch of the Office of the Inspector General for assistance.
 - (502) 564-7985
 - <http://www.chfs.ky.gov/os/oig/auditsinv.htm>

DEPPB Investigative Regions



Diversion

Reporting Provider Shoppers/Diverters

- KRS 218A.280 Controlled substances – Communications with practitioner **not** privileged.
 - Information communicated to a practitioner in an effort unlawfully to procure a controlled substance, or unlawfully to procure the administration of any controlled substance, shall not be deemed a privileged communication.

Diversion – 902 KAR 55:110

Reporting Provider Shoppers/Diverters

- 902 KAR 55:110 Section 10 (4) (b): In addition to the purposes authorized under KRS 218A.202(8)(e), and pursuant to KRS 218A.205(2)(a) and (6), a practitioner or pharmacist who obtains KASPER data or a report under KRS 218A.202(6)(e)1. or who in good faith believes that any person, including a patient, has violated the law in **attempting** to obtain a prescription for a controlled substance, **may report** suspected improper or illegal use of a controlled substance to law enforcement or the appropriate licensing board.

HB1 & HB 217

The “Pill Mill Bill” and the cleanup “Pill Mill Bill”



Services

eKASPER Reporting KRS 218A.202

- Controlled substance administration or dispensing must be reported within one day effective July 1, 2013

For Hospitals:

- Schedule II controlled substances and Schedule III controlled substances that contain hydrocodone **dispensed** to a patient
 - Effective July 1, 2013
 - Other controlled substances are not required to be reported to KASPER if dispensing a 48 hour or less supply

eKASPER Accounts – KRS 218A.202

- eKASPER registration is mandatory for Kentucky practitioners or pharmacists authorized to prescribe or dispense controlled substances to humans.

KASPER Master Accounts

	12/31/2011	04/24/2012	07/20/2012	07/31/2013
Doctor*	5,470	5,680	11,923	17,296
APRN	690	781	1,523	2,008
Pharmacist	1,385	1,450	3,602	5,205
Total	7,545	7,911	17,048	24,509

*Includes physicians, dentists, optometrists and podiatrists

eKASPER Prescriber Usage - KRS 218A.172

- Query eKASPER for previous 12 months of data:
 - Prior to initial prescribing or dispensing of a Schedule II controlled substance, or a Schedule III controlled substance containing hydrocodone
 - No less than every three months
 - Review data before issuing a new prescription or refills for a Schedule II controlled substance or a Schedule III controlled substance containing hydrocodone
- Additional rules/exceptions included in licensure board regulations

KASPER Regulations – Licensure Boards

- 201 KAR 5:130
 - Kentucky Board of Optometric Examiners KASPER requirements
- 201 KAR 8:532
 - Kentucky Board of Dentistry KASPER requirements
- 201 KAR 9:230, 201 KAR 9:260
 - Kentucky Board of Medical Licensure KASPER requirements
- 201 KAR 20:057
 - Kentucky Board of Nursing KASPER requirements
- 201 KAR 25:090
 - Kentucky Board of Podiatry KASPER requirements.

- CS prescribers can obtain an eKASPER report on themselves:
 - To review and assess the individual prescribing patterns
 - To determine the accuracy and completeness of information contained in eKASPER
 - To identify fraudulent prescriptions

Providing Reports to Patients – KRS 218A.202

- eKASPER reports can be shared with the patient or person authorized to act on the patient's behalf
- eKASPER reports can be placed in the patient's medical record, with the report then being deemed a medical record subject to disclosure on the same terms and conditions as an ordinary medical record

eKASPER Error Correction - 902 KAR 55:110

- Patient or provider should contact the dispenser to correct records in error
- Correction to be submitted to KASPER within 7 days of complaint
- Inaccurate KASPER reports due to system errors should be reported to the Drug Enforcement and Professional Practices Branch
 - 502-564-7985

Controlled Substance Dispensing – One Year Comparison

Drug	August 2011 through July 2012	August 2012 through July 2013	Change
Hydrocodone	239,037,354	214,349,392	-10.3%
Oxycodone	87,090,503	77,022,586	-11.6%
Oxymorphone	1,753,231	1,138,817	- 35.0%
Alprazolam	71,669,411	62,088,568	-13.4%
Methylphenidate	10,659,840	11,454,025	+ 7.5%
Amphetamine	13,795,147	15,065,833	+ 9.2%
All Controlled Substances	739,263,679	676,303,581	-8.5%

Figures shown in doses dispensed

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QUESTIONS?

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KASPER Web Site: www.chfs.ky.gov/KASPER

