



### DEA Diversion Control Mission and Overview

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

### Overview

- A Public Health Epidemic
- The Controlled Substances Act
- Diversion Control Program
- The Impact of Prescriptions
- Responsible Drug Disposal
- DEA Take Back Day





## Public Health Epidemic

#### National Statistics: 2017

- 130 opioid-related deaths per day
- 12% increase in death rate from 2016
- Males aged 25-34 experienced the highest rate of drug overdose deaths in

2017

Estimated \$504 billion in economic costs (2016)

## Annual Drug-Related Deaths



## Annual Opioid-Related Deaths



#### National Statistics

- An estimated 21-29 percent of patients prescribed opioids for chronic pain misuse them
  - Between 8 and 12 percent develop an opioid use disorder
  - Approximately 4 to 6 percent who misuse prescriptions transition to heroin
  - About 80 percent of heroin users first misused prescription opioids



#### How Did We Get Here?



# Heroin use is part of a larger substance abuse problem.

Nearly all people who used heroin also used at least one other drug.

Most used at least three other drugs.

Heroin is a highly addictive opioid drug with a high risk of overdose and death for users.

#### People who are addicted to...



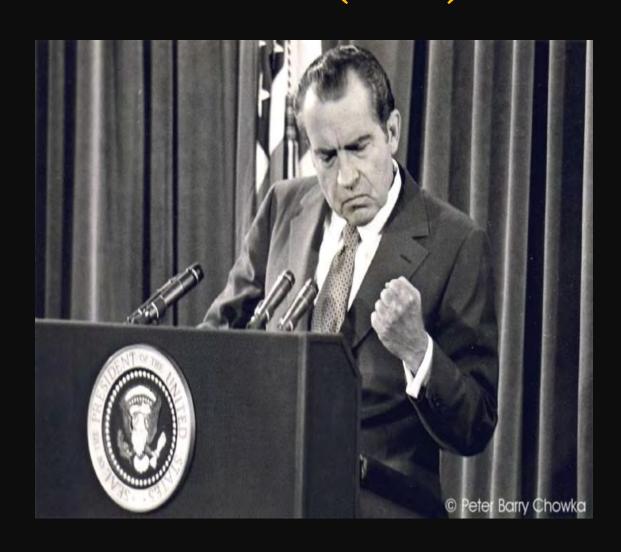
...more likely to be addicted to heroin.



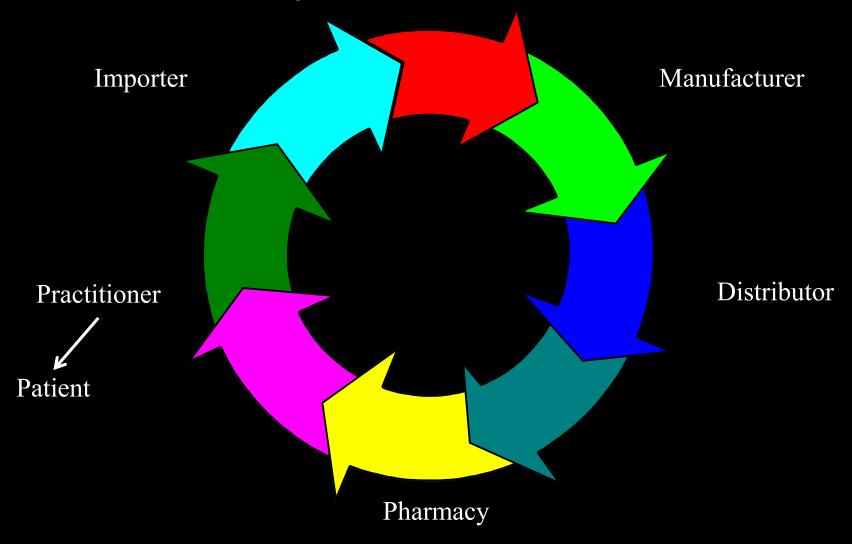


## The Controlled Substances Act of 1970

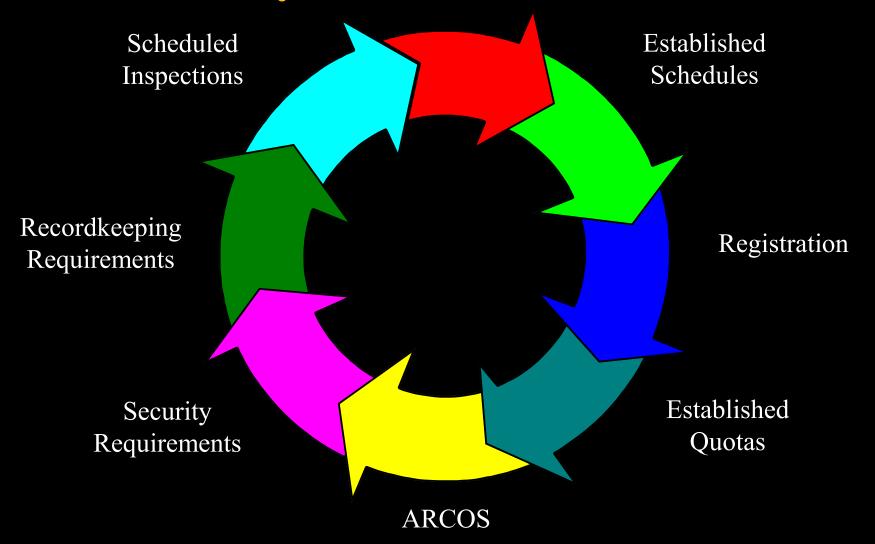
# Uniform Controlled Substances Act of 1970 (CSA)



# The CSA's Closed System of Distribution



# Maintaining the CSA's Closed System of Distribution





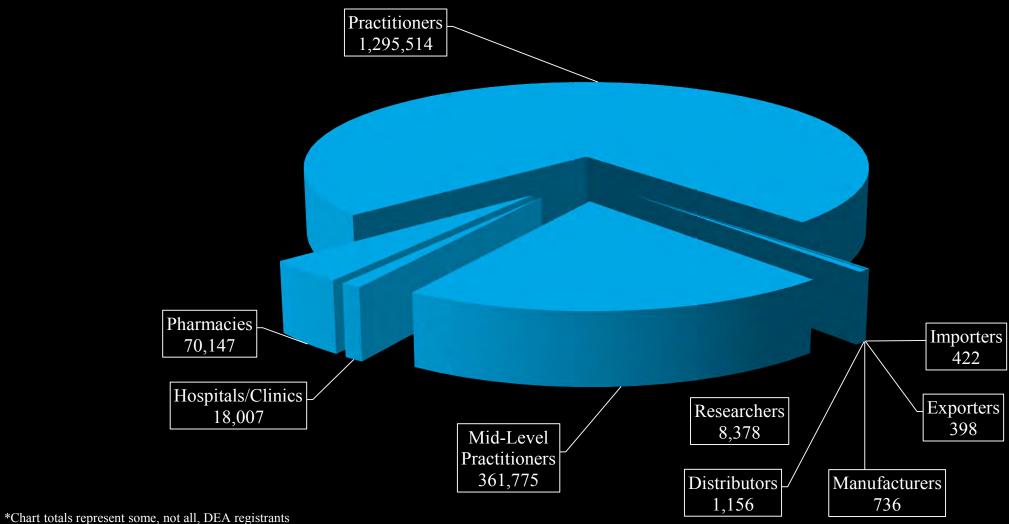
## Closed System of Distribution

## The DEA is responsible for:

- The *oversight* of the system
- The *integrity* of the system
- The *protection* of the public health and safety

DEA does NOT regulate the practice of medicine

# Active Registrants 1,797,258\* total (nationwide)



\*Source: RICS

Date Prepared: 06/03/2019

## Michigan Registrant Population

(53,680 registrants\*)

Manufacturers: 19
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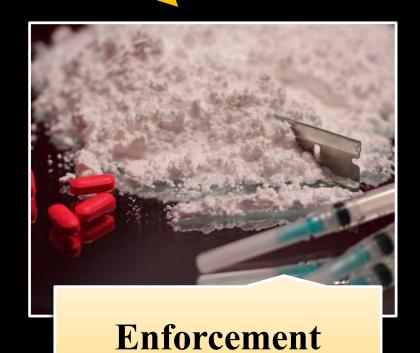
\*2.9%

## Enforcing the CSA...



## DEA







### **Diversion Control Division Mission**

To prevent, detect, and investigate the diversion of controlled substances from legitimate sources



while



ensuring an adequate and uninterrupted supply for legitimate medical and scientific purposes

#### **Diversion Control Division**

Target: DIVERSION





Goal: COMPLIANCE

## Compliance: Life or Death Issue

# UM Health System pays record \$4.3 million settlement in drug diversion case

The DEA began its investigation after two tragic incidents occurred in December 2013 involving two UMHS employees - a nurse and an anesthesiology resident.

On a single day that December, a nurse and doctor both overdosed on stolen pain medication in different areas of the sprawling University of Michigan Health System.

Both were found in hospital bathrooms with drugs meant for patients injected into their own bodies.

The DEA concluded that UMHS' deficient record keeping negatively impacted UMHS' ability to guard against the theft and diversion of controlled substances.



## Inspection Authority

- Notice of Inspection DEA Form 82
- Administrative Inspection Warrant
- Search Warrant



## Potential Consequences





### **DEA Actions**

- Administrative actions
- Civil litigation
- Criminal prosecutions





#### Administrative Actions

Letter of Admonition (LOA)

Memorandum of Agreement (MOA)

Order to Show Cause (OTSC)





### Civil Penalties USC 842

- Registrant has refused or negligently failed to make, keep or furnish any information required to be kept
- As of 8/1/2016: Each violation can be assessed up to \$14,502 or \$62,500 per instance
- No intent necessary









## Criminal Penalties USC 843

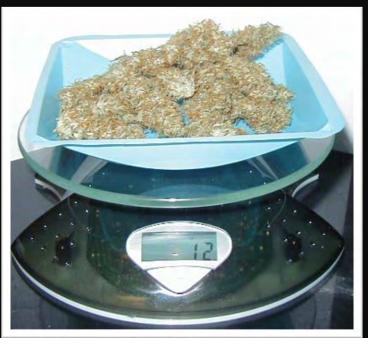
- Distributes a Schedule 2 w/oOrder Form
- Obtain a CS by fraud, misrepresentation, forgery, deception, or subterfuge
- Furnish false or fraudulent or omit material information from a required record



### Criminal Penalties

Title 21 US Code 841:





Sentencing is based on marijuana equivalents

## Prescription Requirements



## In order to be legal, a prescription must be issued:

- By a registered practitioner;
- For a legitimate medical purpose;
- In the usual course of professional practice.



## Pharmacist's corresponding responsibility:

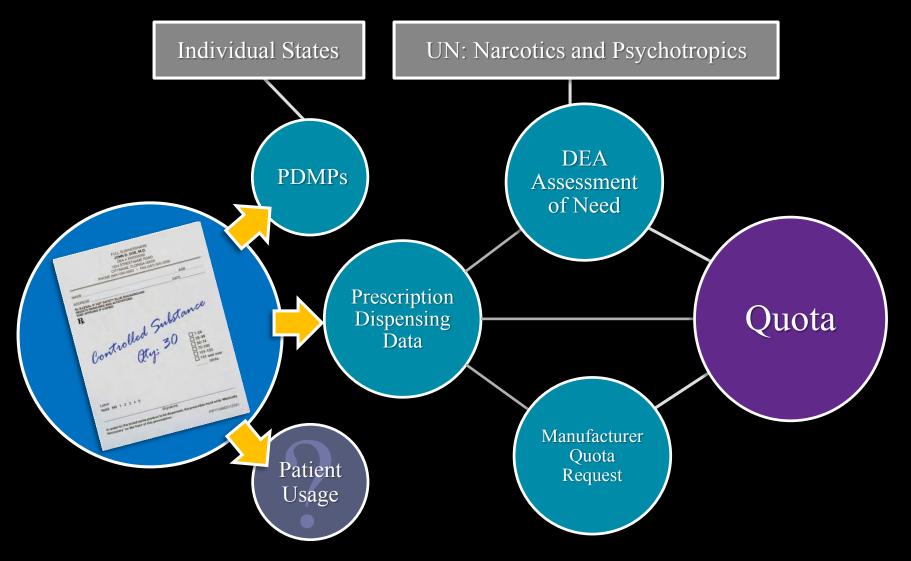
 Corresponding responsibility rests with the pharmacist who fills the prescription.

21 C.F.R. § 1306.04(a)

### Prescription Requirements

- DEA does <u>not</u> define nor regulate medical practice standards
- There are no federal laws or regulations that put limits on the quantity of controlled substances that may be prescribed
- Some states or insurance providers may limit the quantities of controlled substances prescribed or dispensed

## Impact of a Prescription



## Research: Opioid Prescribing

- Michigan Opioid Prescribing Engagement Network (OPEN)
  - Online at Michigan-OPEN.org and opioidprescribing.info
  - Printable resources for providers and patients



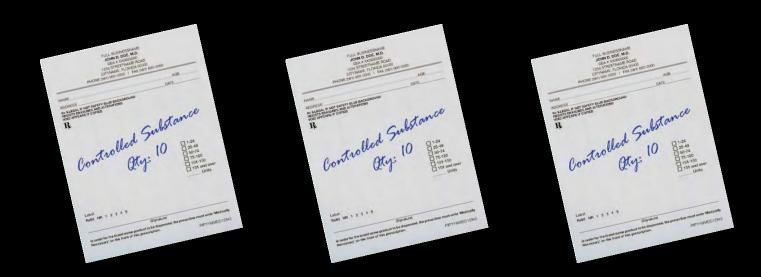






## Issuing Multiple Prescriptions

- A practitioner may provide individual patients with multiple prescriptions for the same Schedule II controlled substance, to be filled sequentially
- The combined effect of these multiple prescriptions is to allow the patient to receive, over time, up to a 90-day supply of that controlled substance



#### CARA: Partial Fills

#### Section 702 amended 21 U.S.C. 829



- It is not prohibited by state law;
- The prescription is written and filled in accordance with federal and state law and regulations
- The partial fill is requested by the patient, or the practitioner that wrote the prescription; and
- The total quantity dispensed in all partial fillings does not exceed the total quantity prescribed



#### **CARA:** Partial Fills

- Remaining portions of a partially filled prescription for a controlled substance in Schedule II:
  - May be filled; and
  - Shall be filled not later than 30 days after the date on which the prescription is written



### Cause and Effect

Reducing the prescribing of controlled substances to legitimate patients

### Pharmacists Blame Patient Fears on DEA

DEA Inflicts Harm on Chronic Pain Patients

Suffering and abandoned: Chronic pain patients cut off in the opioid era

The War On Doctors: How The DEA is Scaring Doctors from Prescribing Pain Medications

'The other opioid crisis': Doctors weaning patients off much-needed painkillers

One local pharmacist told WESH 2 the DEA instructed him not to fill certain drug combinations.

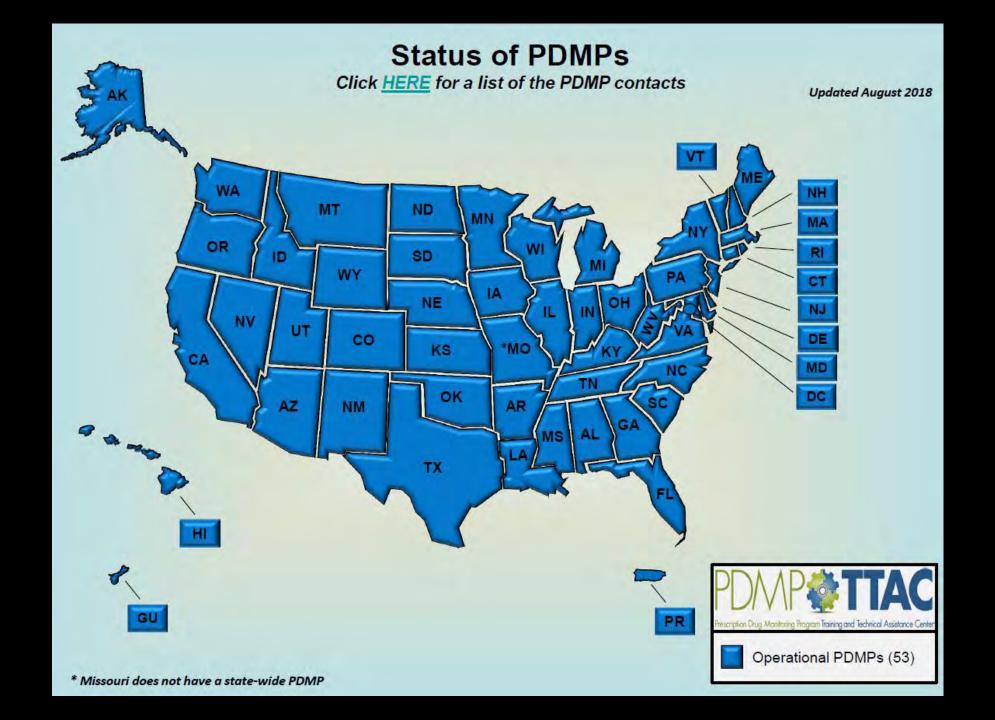
"The DEA is saying, 'No, we don't want you filling this,' so who am I to go against the DEA?" said pharmacist Dele Obaitan.

Chronic pain patients suffering because some doctors too fearful to prescribe opioids





# Prescription Drug Monitoring Programs







# Drug Addiction Treatment Act of 2000

### **DATA Waivers**

- Approximately 2.9% of Michigan practitioners are DATA-waived
- Learn more about buprenorphine and how to qualify for a DATA waiver at:
  - https://www.samhsa.gov/medication-assistedtreatment/buprenorphine-waiver-management/qualify-

for-physician-waiver

# Obtaining a DATA Waiver

SAMHSA verifies physician requirements

DEA assigns a special identification number in addition to a physician's regular DEA number

Individual physician can apply to treat:

Year 1: up to 30 patients

Year 2: up to 100 patients

Year 3 + beyond: up to 275 patients

Source: SAMHSA. (2016).





# Secure and Responsible Drug Disposal Act of 2010

## Patient's Controlled Substances

 A physician cannot take back controlled substances that have been administered, prescribed, or dispensed to the "ultimate user



- It is not authorized by Federal Laws and Regulations
- Do not put yourself or your practice in harm's way by ignoring this

### Patient Education



#### **Monitor**

- Note how many pills are in your home
- Keep track of refills
- Control drugs prescribed to teens
- **NEVER** share



#### Secure

- Protect prescriptions like valuables
- Secure medication in a place only you know about



#### **Dispose**

- Properly dispose of unused or expired medicine
- Practitioners: NEVER take back patient drugs

# Collection Receptacle Locations



### Pharmacies



Long-Term Care Facilities



Hospitals/clinics



Opioid Treatment Programs



Police Departments

# Resources for Drug Disposal

- **DEA Diversion website**: www.deadiversion.usdoj.gov (click "Drug Disposal Information," then "Search for an Authorized Collector Location")
- Rx Drug Drop Box: www.rxdrugdropbox.org
- Dispose My Meds: www.disposemymeds.org
- **U.S. Food and Drug Administration:** www.fda.gov (search "disposal")

# DON'T BE THE DEALER STOLEN **MISUSED** Keep them safe. Clean them out. DEA NATIONAL & Take them back.

DEA
National
Take Back
Initiative

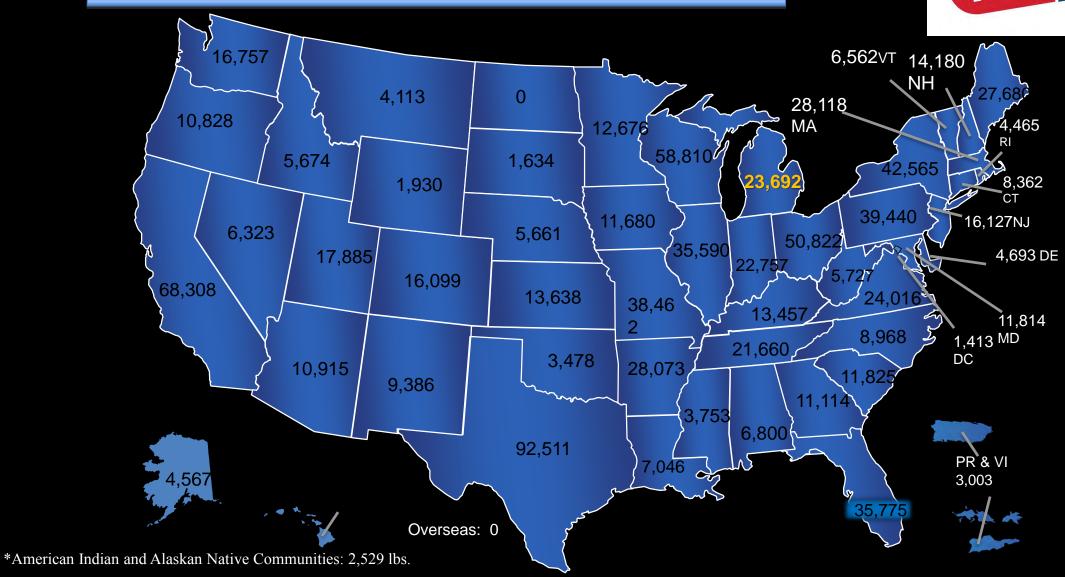
Visit www.dea.gov for downloadable posters, pamphlets, and more information

Visit **DEATake Back.com** for a collection site near you.

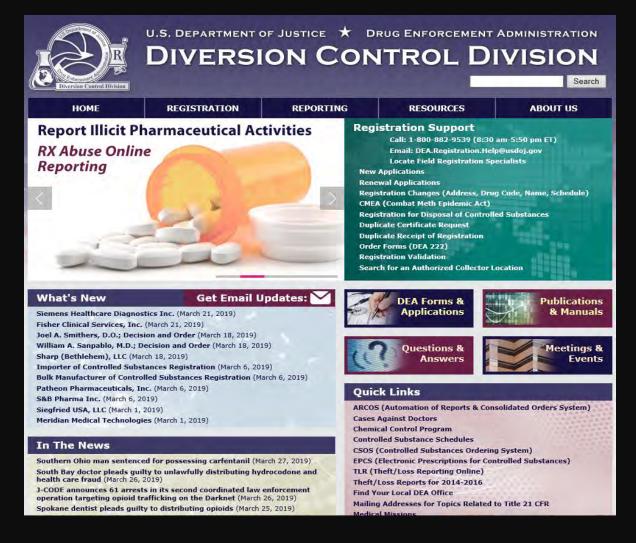
### 17th National Take Back Day: April 27, 2019

Total Weight Collected: 937,443 lbs. (468.72 Tons)





# For Additional Information



### www.DEAdiversion.usdoj.gov

or <u>www.dea.gov</u>



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