

# \* Delaware Division of Professional Regulation: Updates – Opioids, Regulations, and Discipline

DEA Prescriber Diversion Awareness Conference (PDAC) 2019

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### \*Objectives

- \*State at least 3 requirements found in the Delaware Safe Prescribing Regulations when prescribing opioids for an acute episode
- \* State Delaware's current ranking among states regarding opioid overdose death rates
- \*Name at least one high-risk opioid prescribing indicator currently reported to the Governor's Office
- \*Name one of the five areas in which Delaware was evaluated regarding oversight of physician discipline and sexual abuse of patients
- \* Identify what percent of discipline cases of nurses are related to diversion and/or substance use disorder



# \*Updates

Safe Prescribing Regulations

and

**Opioid Prescribing** 

\*While accounting for a little more than 4% of the world's population, the United States consumes more than 80% of all opioids in the world, and Delaware has been consistently reported by the CDC as having one of the highest rates of prescribing of certain categories of opioids in the U.S.



- \*Delaware opioid-related overdose deaths have risen consistently year after year over at least the last four years
- \*Delaware opioid-related overdose death rate is currently in the top five states in the U.S. per 100 residents



- \*Four of five individuals report their first encounter with an opioid to be as a prescription related to an acute injury or procedure.
- \*Recognizing also that heroin users will typically report that their dependence and abuse of opioids is traceable to an acute procedure or injury and an opiate prescription, the decision to publish regulations around the use of opioids for acute pain in addition to the use for the treatment of chronic pain was made.



## \*Safe Prescribing Regulations

- \* ~ 4 months of drafting and discussions
- \* ~ 5 months of formal Rule-Making
- \*became final December 1, 216 with an effective date of April 11, 2017



### \*Safe Prescribing Regulations

- \*Work began in early 2016 at the direction of the Secretary of State
- \* Regulations aimed at BOTH
  - \* short-term, prescribing for an acute episode or injury, and
  - \* chronic use
- \*CDC had just released guidelines for chronic use



### \*Safe Prescribing Regulations

- \* Regulation 9.0 in the *Uniform Controlled*Substance Act Regulations became final in
  December 2016, with an April 2017 effective date.
- \*The Rules apply in any instance in which an opioid is being considered and/or prescribed.
- \*The Rules apply to ANY prescriber holding a state-issued controlled substance registration (exceptions), and apply more broadly than Regulation 18.0 found in the *Delaware Medical Practice Act*.



- \*In an acute prescribing situation, the prescriber can prescribe no more than a 7-day supply.
- \* A fluid drug screen is required when writing a onetime prescription for a 3-day supply.
- \* A non-opioid alternative has to be considered before prescribing an opioid.
- \* You must obtain an informed consent prior to prescribing an opioid



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# \*Opioid prescriptions

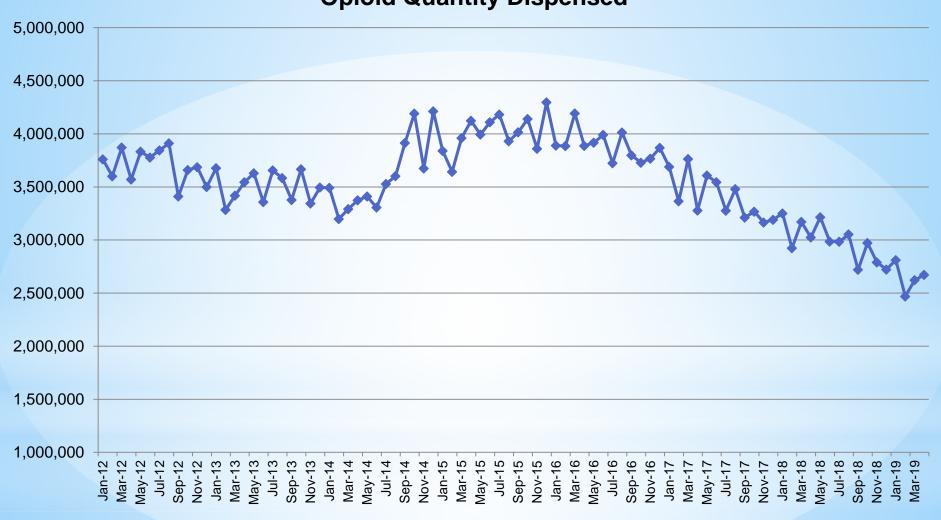
- \*Governor's monthly report January 2012 to present
  - \* Indictors used
  - \* Patterns



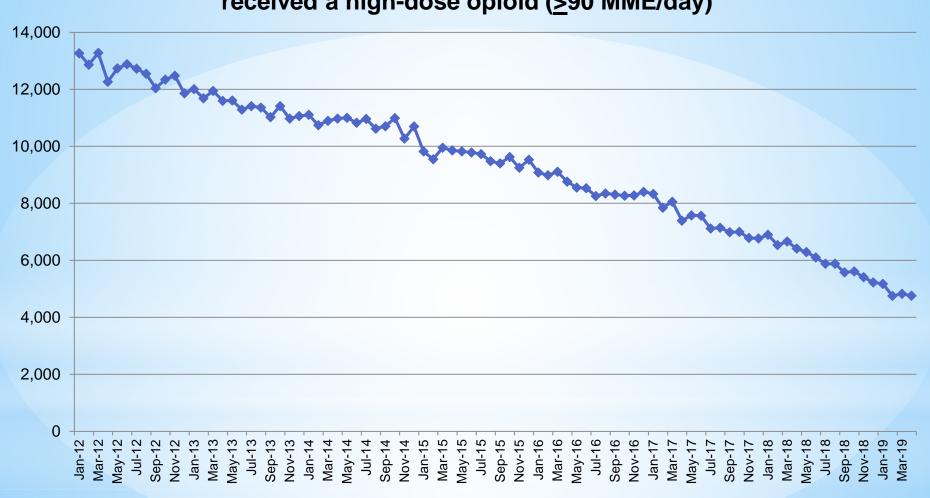
# Number of unique patients having one or more opioid Rxs filled



#### **Opioid Quantity Dispensed**



# Number of distinct DE residents that received a high-dose opioid (>90 MME/day)



# \*Updates

Discipline of physicians, nurses, pharmacists

- \*Over time, substance use/opioid use disorder accounts for approximately 30% of all disciplinary action taken against nurses by the Board of Nursing.
  - \*There is a disproportionately high rate of reporting of nurses for diversion compared to the rate of reporting for physicians and pharmacists



## \*Disciplinary Actions - Physicians

- \*Questionable Prescribing Practices
  - \* Suspension; Probation; Re-Education; Revocation
- \* Inappropriate/Unethical Behavior
  - \* Suspension; Probation; Restriction; Revocation



## \*Disciplinary Actions – Nurses

- \* Diversion/Substance Use
  - \* Suspension; Probation; Referral/Monitoring
- \* Practice Breakdown/Failure to Act
  - \* Probation; Remedial education; Supervision/Monitoring



- \* Prior to 2010 Delaware's Board of Medicine was ranked 47<sup>th</sup> in the U.S. in terms of outcomes related to investigations/disciplinary actions
- \*2017 Delaware and the Board of Medical Licensure and Discipline was **ranked #1 in the U.S.** with an overall score of 91 in an overall rating public protection related to sexual abuse and discipline in a comprehensive study of all 50 states.
  - \*Transparency = 74
  - \* Duty-to-Report law = 100
  - \* Board Composition = 93
  - \* Criminal Acts = 98
  - \* Discipline Laws = 90





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