

A Publication of the IDPH Bureau of Substance Abuse January 2019 Quarterly Publication Bureau of Substance Abuse

IDPH • Lucas State Office Building • 321 East 12th St., Des Moines, IA 50319 • www.idph.iowa.gov

Integrated Provider Network

Tn August 2018, IDPH released a competitive Request for Proposals (RFP) to establish an IDPH Integrated Provider Network to deliver comprehensive and high quality substance use disorder and problem gambling prevention and treatment services in Iowa. The department's goals include:

- Establish and maintain a comprehensive and effective system of care for substance use and gambling problems through a statewide, integrated network of services and providers.
- Reduce substance use and gambling problems through public education, evidence-based prevention and early intervention services.
- ✓ Increase remission and recovery from substance use disorders and problem gambling through timely, accessible, ongoing and effective treatment services.

On December 12, 2018 the Notice of Award was posted indicating the selected IDPH Integrated Provider Network (Network) contractors. Contracts were effective January 1, 2019. The Network brings together three previously separate service systems: Substance Abuse Prevention, Substance Use Disorder Treatment, and Problem Gambling Prevention and Treatment as directed in legislation beginning in 2009.

The IDPH Integrated Provider Network provides substance use and problem gambling education, prevention, early intervention, treatment and recovery support services statewide. Click here for the service area map. Network services are funded by the State General Fund appropriation to IDPH for substance abuse and problem gambling services under the Addictive Disorders appropriation, and through the SAMHSA Substance Abuse Prevention and Treatment Block Grant.

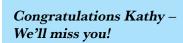
Questions about the Integrated Provider Network may be emailed to ipn@idph.iowa.gov.

Department News

Kathy Stone Retiring

The staff at IDPH would like to recognize the retirement of Kathy Stone, Director of the Division of Behavioral Health and the Single State Authority on Substance Abuse (SSA) for Iowa.

For more than 11 years Kathy has led the division's efforts to address substance misuse in Iowa. Under her leadership a variety of grants, efforts and approaches have been introduced, including: Access to Recovery (ATR), Screening, Brief Intervention and Referral to Treatment (SBIRT); Strategic Prevention Framework (SPF); Recovery Oriented Systems of Care (ROSC); and the new Integrated Provider Network (IPN). You don't have to look hard to see, Kathy has definitely left her mark on Iowa's substance use field. Kathy's last day at IDPH was December 31.











Take Note

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- Tuesday, January 29, 2019 1:00 2:00 pm A Toolkit for Adolescent Screening, Brief Intervention, Referral and Treatment (SBIRT), Tracy McPherson, PhD. Register here.
- Tuesday, February 12, 2019 1:00 2:00 pm
 Medication Assisted Treatment for Adolescents with Opioid Use Disorder, Ned Presnall, MSW, LISW. Register here.
- Tuesday, March 5, 2019 1:00 2:00 pm
 Understanding the Social and Biological Aspects of Adolescent Development and Substance Use Disorders, Jason Burrow-Sanchez, PhD. Register here.
- Tuesday, March 19, 2019 1:00 3:00 pm
 Using the ASAM Criteria to Guide Assessment and Treatment of Youth,
 Marc Fishman, PhD. Register here.

Visit the <u>website</u> for more information. Contact <u>Cara.Weis@idph.iowa.gov</u> with questions.

Sponsored by the Iowa Department of Public Health, Division of Behavioral Health and funded by the State Youth Treatment Implementation grant through the Substance Abuse and Mental Health Services Administration.









Multiple Pathways of Recovery

DPH employees, Jennifer Robertson-Hill, Monica Wilke-Brown and Kevin Gabbert, attended the Multiple Pathways of Recovery Conference on October 24-26, 2018 in Punta Gorda, Florida. The conference, sponsored by Connecticut Community for Addiction Recovery, provided an opportunity to engage people across the country in discussions about the numerous pathways of recovery. Presentation topics focused on the value of integrating pathways to recovery and strategic approaches for doing so. Presentations educated participants about the ways people in recovery may be supported, such as therapeutic communities, fitness based programs, medication assisted recovery, shamanic healing and peer-run programs.

Agency Spotlight – ADDS

Alcohol and Drug Dependency Services of Southeast Iowa (ADDS) gambling treatment services started utilizing the Gambling Pathways Questionnaire (GPQ) in their admissions process almost two years ago. With this assessment, the counselor and patient identify and learn about the thought processes and behaviors that may occur when gambling, to assist in the treatment planning process. The GPQ provides a snapshot of eight areas that may interact with the gambling behaviors: mood pre- and post- problem gambling, childhood trauma, abuse and neglect, meaning motivation, stress-coping motivation, impulsivity, risk-taking, sexual risk-taking and antisocial traits/behaviors.

The GPQ takes about 10-15 minutes to fill out and can be given to the patient to complete; it takes approximately 5 minutes to score and provide feedback to the patient. The GPQ has been a useful tool for ADDS problem gambling treatment staff to personalize the patient's treatment planning to assist the patient in meeting their recovery goals. ADDS has found that the use of the eight domains as a guide, patient participation, retention, and meeting patient treatment expectations have increased. Additionally, the GPQ provides the counselor with specifics about the populations seeking problem gambling treatment services, including an average time frame of how long, based on a GPQ scoring, a patient may expect to engage in services.

The GPQ has been a beneficial "tool" in the tool belt for ADDS problem gambling treatment staff resulting in improved treatment planning. By identifying with each patient areas in their life that might otherwise have

been overlooked, the GPQ has improved the ability of problem gambling treatment staff and patients to identify, discuss and provide feedback on the underlying reasons that led to the patient's problem gambling. Read more and find the GPQ here. For more information about how ADDS has integrated the GPQ into problem gambling treatment services,

please contact, Nic Foss at ndfoss@addsiowa.org.



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Important Information!

Your Life Iowa and the Agricultural Community

DPH is working on two fronts to assist the agricultural community in Iowa. On one front, representatives from Landus Cooperative reached out through a Contact Form on the Your Life Iowa website. This led to several discussions on how Your Life Iowa can assist Iowa farmers by providing support and assistance for concerns regarding substance use, problem gambling and suicide. This resulted in the use of the "Lean on Us" graphic in their October payroll stuffer.

This effort has included ensuring that Your Life Iowa staff (Foundation 2) understand agricultural-related issues and know what other resources are available. In March, IDPH will help facilitate at a Landus Cooperative event, a session for women in agriculture on behavioral health and how to access information and assistance.

The second front, with the newly procured Integrated Provider Network members in partnership with IDPH, will work on efforts to reach out to the agricultural community by engaging key community-based farm organizations in assessing local needs as it relates to substance use, problem gambling and suicide.

For more information, please contact Eric Preuss at eric.preuss@idph.iowa.gov.





Licensure Standards FAQ

Please submit any licensure questions to SUD.PG.License@idph.iowa.gov.

What is the purpose of the Substance Abuse and Problem Gambling Treatment Program Committee (Committee)?

The Committee was created in 2010 as part of the revisions made to Chapter 136 by House File 2183 (2010). The State Board of Health appointed a Substance Abuse and Problem Gambling Treatment Program Committee "to approve or deny applications for licensure received from substance abuse programs pursuant to chapter 125 and gambling treatment programs pursuant to chapter 135 and to perform any other function

authorized by chapter 125 or 135 and delegated to the Committee." The Committee meets the second Wednesday of every month to review and act on IDPH recommendations on regulation of treatment programs. Committee members include Jay Hansen (Chairperson), Michael Wolnerman and Vickie Lewis. Past meeting agendas and minutes for the Substance Abuse and Problem Gambling Treatment Program Committee can be found at https://idph.iowa.gov/board-of-health/committee/meeting-info

For more information please contact Lori Hancock-Muck at lori.hancock-muck@idph.iowa.gov.



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Over the last five months, staff from the Bureau of HIV, STD, and Hepatitis have developed the Health Initiative for People Who Use Drugs. This initiative seeks to address a number of public health concerns surrounding substance use, such as:

- ✓ Outbreak potential of HIV and HCV
- ✓ Barriers to treatment for those using substances
- ✓ Prevention of substance use related harms
- Housing and employment limitations for people who use substances
- ✓ Access to public services for those who use substances

In an effort to address the wide variety of public health concerns stemming from substance use, the current Health Initiative for People Who Use Drugs operates on three levels of engagement: Micro-, Mezzo-, and Macro-.

At the Micro-level, the AmeriCorps VISTA Client Engagement Specialist is developing tools for engaging people who previously or currently use or inject drugs. This level seeks to better understand how people who use drugs access medical and social services and acquire feedback on the effectiveness or accessibility of services. At the Mezzo-level, the AmeriCorps VISTA Care and Prevention Support Specialist is developing resources on the intersections of HIV and Hepatitis C with various public and private sectors. At the Macro-level, a steering committee and workgroup structure have been established in order to facilitate a statewide discussion on public health and substance use between a variety of public and private sectors. Topics of discussion will revolve around community safety, structural determinants of health, linkage to care and drug user health.

If you would like more information on this initiative, to request capacity building assistance, or join a statewide workgroup, please email Richard Nesselroad, the AmeriCorps VISTA Systems

Engagement Specialist



What is "Resilience?"

The Social Ecological Model (or SEM) is a framework to understand the multiple levels of a social system in which a person exists and interacts. The SEM consists of four levels: individual, relationship, community and society. The SEM can help understand how personal and environmental factors affect behaviors and norms from the individual, to the community and societal levels. The risk and protective factors that exist within communities can impact the capacity of individuals to demonstrate resilience, and resilient individuals can strengthen a community's resilience when faced with adversity. Community resilience is defined by the RAND Corporation as "a measure of the sustained ability of a community to utilize available resources to respond to, withstand and recover from adverse situations." For more information on community resilience, please visit https://www.rand.org/topics/community-resilience.html.

This is the fourth in a continuing series of commentaries about resilience, and how resiliency might support overall health and wellbeing.



Iowa Substance Abuse Brief

Did you know that in 2017, drugs - including prescription medications, illicit drugs, and overthe-counter medications - were the underlying cause of death for 77 percent of all poisoning deaths? Learn this and more in the recently released IDPH Iowa Substance Abuse Brief on Drug Overdose. Click here.





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Take Note

Ohio's Approach to Opioid Use

n October 8 and 9, Amanda McCurley, Program Director for the IDPH AmeriCorps Substance Abuse Prevention Program, visited the Ohio Association of County Behavioral Health Authorities (OACBHA) AmeriCorps VISTA Project in Columbus, Ohio that focuses on addressing Ohio's opioid epidemic. Amanda met with Liz Henrich, Associate Chief Executive Officer and Director of the VISTA Project, to discuss how the AmeriCorps members of OACBHA address the opioid epidemic. Most members serving in the OACBHA VISTA Project serve on county Alcohol, Drug Addiction and Mental Health (ADAMH) Boards to develop community outreach opportunities; research and write educational materials and papers related to opioid addiction, promising prevention approaches, treatment and recovery supports; build partnerships with other community organizations working to address the opioid epidemic by supporting the implementation of the County Hubs to combat opioid addiction; and conduct philanthropic research on potential supporters for community organizations working to address the opioid epidemic and participate in grant development and grant

writing processes. Amanda also visited with three AmeriCorps members currently serving at different agencies in Columbus to discuss their service activities and service experience. Amanda was able to learn about legislation and policy in Ohio to address their opioid epidemic, and well-supported prevention efforts in Ohio such as the Good Behavior Game in Ohio community schools. During the visit Amanda also shared information about the Iowa Department of Public Health, the IDPH AmeriCorps Substance Abuse Prevention Program, and Iowa's current legislation and policies addressing the opioid crisis in Iowa. The visit provided a great opportunity for the two AmeriCorps programs to connect to share ideas, resources and information. Contact amanda.mccurley@idph.iowa.gov for more information.







Save the Date

The Prevention of Opioid Misuse Regional Training series will begin in February 2019. This series is sponsored by the Iowa Prevention of Opioid Misuse in Women grant, funded by the Office of Women's Health, Department of Health and Human Services.

February 7 - Mason City February 11 - Osceola

March 7 - Council Bluffs

April 4 - Waterloo

May 7 - Burlington

May 16 - Cedar Rapids

June 3 - Sioux City Watch your in-box for registration details.



Grant Funds Integrated Care Team

The Iowa Department of Public Health was awarded a Promoting the Integration of Primary and Behavioral Health Care (PIPBHC) grant by the Substance Abuse and Mental Health Services Administration -Center for Mental Health Services (SAMHSA-CMHS) for five years (09/30/2018-09/29/2023). IDPH will implement the grant with Iowa's Integration Project, a joint partnership between substance use disorder (SUD) treatment programs across the state and Federally Qualified Health Centers (FQHC's) in Polk, Scott and Woodbury counties, and at Camp Dodge, home to the Iowa Army National Guard. The purpose of this project is to provide an Integrated Care Team, co-located between the SUD treatment programs, the FQHCs and the Iowa Army National Guard. The Integrated Care Team will address areas of mental health, primary health care and SUD treatment services for adults with substance use disorders.

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Summit Addresses Stimulant Use

TDPH employees, Katie Bee, Michele Tilotta, and ▲ Cara Weis, attended the National Cocaine, Meth & Stimulant Summit (the Summit) on November 12-14, 2018, in Fort Lauderdale, Florida. The Summit, sponsored by The Institute for the Advancement of Behavioral Healthcare, provided an opportunity to engage stakeholders across the country in discussions about the cocaine, methamphetamine and stimulant epidemic. The information shared included topics focused on the changing patterns of stimulants, the rising challenge of psychostimulant use disorder in young adults, and High-Intensity Drug Trafficking Areas (HIDTA) program updates. One of the highlights was a keynote presentation from Jim Carroll, Deputy Director of the National Drug Control Policy Department, who addressed his agency's priorities addressing stimulants.

Some of the key takeaways from the conference included the following:

- ✓ Leading researchers and professionals suggest the current state of the nation is a poly-drug epidemic.
- ✓ Clinical professionals are in an ideal position to discuss with their clients why stimulants are dangerous, as well as address the trauma histories that often lead to substance use.
- ✓ The market is inundated with pure, low-cost and lethal methamphetamine.
- ✓ United States border agents are seizing 10 to 20 times the amounts they did a decade ago.
- ✓ Fentanyl contaminated methamphetamine and cocaine are on the rise.
- ✓ Stimulants include amphetamine, cocaine, methamphetamines and prescription medications for attention deficit hyperactivity disorder.

- ✓ In 2016, 667,000 people were current users of methamphetamine, 1.7 million were current misusers of stimulants, and 1.9 million were current users of cocaine (National Survey on Drug Use and Health).
- ✓ Cocaine or methamphetamine was involved in 18,000 of the more than 64,000 drug overdose deaths occurring in 2016 (Center for Disease Control).
- ✓ Through 2018, the United States will likely continue to experience the highest cocaine supply and usage levels in a decade (Drug Enforcement Administration).

And did you know in Iowa:

- ✓ Methamphetamine is now the second most reported drug by adults at admission to treatment, moving ahead of marijuana for the first time. Alcohol remains number one for adults, while marijuana remains the number one drug of choice for juveniles.
- ✓ From 2014-2017, there was a 38 percent increase in methamphetamine treatment admissions in Iowa. Similarly, the IDPH reports there was an eightfold increase in Iowa deaths related to amphetamines, which includes methamphetamine.

For more information on methamphetamine, visit yourlifeiowa.org.

Methamphetamine Awareness Day Proclamation

Towa Governor, Kim Reynolds signed a proclamation declaring November 30, 2018 Methamphetamine Awareness Day. A public proclamation signing was not scheduled. The proclamation is one way the Iowa Department of Public Health hopes to spread awareness of the increase in use of methamphetamine and other amphetamines in Iowa.









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Important Information!

Training Opportunities

The Iowa Department of Public Health, in collaboration with Midwest Counterdrug Training Center (MCTC), provided Substance Abuse Prevention Skills Training (SAPST) on October 10-11 and November 7-8, 2018. SAPST training is a foundational course in substance abuse prevention for Iowa's entry-level prevention practitioners and professionals working in related fields. It is grounded in current research with a focus on the Substance Abuse Mental Health Services Administration's Strategic Prevention Framework (SPF), which is a five-step prevention model with two guiding principles in sustainability and cultural competency. SAPST provides knowledge and skills to implement effective, data-driven prevention programs, practices and policies to reduce behavioral health disparities and improve wellness.

The next trainings will take place March 6-7 and April 3-4, 2019. Participants can register at the MCTC website.



Annual Governor's Conference on Substance Abuse

The Iowa 42nd Annual Governor's Conference on Substance Abuse will be held April 16 and 17, 2019, at Veterans Memorial - Community Choice Credit Union Convention Center in Des Moines. Watch your inbox for a Call for Presentations with guidance on the opportunity to contribute content. The competitive presentation submission process will run December 21, 2018 - January 18, 2019. The Iowa Governor's Conference on Substance Abuse is sponsored by the Iowa Department of Public Health, Division of Behavioral Health.



Brain Injury Services Conference

The Brain Injury Alliance of Iowa is hosting its 27th Annual Best Practices in Brain Injury Services
Conference February 28 through March 1, 2019, at the Sheraton in West Des Moines. This year's theme is
"Coming Together to Improve Outcomes: Weaving Best Practices into the Brain Injury Continuum of Care." For more information, visit https://biai.memberclicks.net/2019-annual-conference-info-page.

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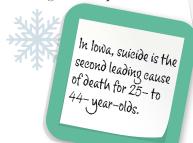
New Suicide Prevention Project Launched

A cross health and behavioral health care settings, there are many opportunities to identify and provide care to those at risk for suicide. Before that can happen, suicide prevention must first be seen as a core responsibility of health care. The Zero Suicide framework is defined by a system-wide, organizational commitment to safer suicide care in health and behavioral health care systems.

IDPH was awarded a five-year grant (9.30.18 - 9.29.23) by the Substance Abuse and Mental Health Services Administration to implement the Zero Suicide framework. The Zero Suicide Iowa project will be implemented with the Integrated Provider Network (IPN) to ensure that patients at prevention and treatment organizations receive services that are suicide safe. IPN providers will implement

the Zero Suicide model with support from IDPH and in collaboration with the Iowa Suicide Prevention Planning Group and Foundation2 (manages Your Life Iowa for IDPH). Find the Zero Suicide overview

form and the fact sheet here. Contact pat.mcgovern@idph. iowa.gov with questions.





Pain Management Approaches Highlighted

DPH sponsored the Approaches to Pain Management Symposium at the Ron Pearson Conference Center in West Des Moines on October 30, 2018. With nearly 100 people in attendance, the symposium provided an overview of a range of non-pharmacological approaches to addressing pain, in addition or as an alternative to the use of opioids. Objectives of the symposium included the following:

- 1. The ability to identify seven approaches to pain management;
- 2. The ability to identify local resources in the state of Iowa for accessing alternative forms of pain management; and
- **3.** The ability to identify the evidence and research that support the various approaches discussed.

Presentation topics included a national perspective on approaches to pain management, chiropractic care, mindfulness-based stress reduction, physical therapy, acupuncture and alternative medicine, yoga therapy, nutrition and physical activity, and interventional orthopedics.

The Approaches to Pain Management Symposium is a part of IDPH's opioid initiatives that supports prevention, treatment and recovery from substance use disorders. For more information about IDPH's opioid efforts, please contact Jennifer Robertson-Hill at jennifer. robertson-hill@idph.iowa.gov.











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Take Note

Medication Units in Iowa

separated from where an

OTP is headquartered.

nce considered "resource poor" when it came to statewide availability of methadone as a form of medication-assisted treatment (MAT), Iowa has seen an increase in the number of locations offering this service through an alternative approach. Typically, a certified Opioid Treatment Program (OTP) can only provide methadone as a form of MAT. However, according to the Substance Abuse and Mental Health Services Administration (SAMHSA), a certified OTP may establish what is known as a Medication Unit to administer or dispense medication therapy. As defined by SAMHSA:

A medication unit is a facility that is geographically separated from where an OTP is head-A medication unit is guartered. Medication-assisted a facility that is treatment (MAT) professionals geographically can administer medications, collect samples, and conduct drug testing and analysis from medication units. However, admission services and addiction counseling cannot be conducted by the OTP.

Medication units allow MAT patients to establish a routine and maintain a productive life. This can be especially helpful for people living in rural areas where the nearest OTP site may be 70 miles away or more. Even in major cities, medication units may be needed to help cut down on long wait times at busy OTP sites.



As an OTP with a long history of serving central Iowa, UCS Healthcare is working to expand MAT services to underserved areas of the state through establishment of medication units. These units are co-located within qualified licensed substance use disorder treatment programs that formally partner with UCS. According to Misty Angrick, Medical Services Director at UCS, "By co-locating services, rural communities will have an effective treatment process which combines the therapy services of the partnering agency with the medications provided by the medication unit. In this process we increase the access to life changing medications as well as individualized therapy, and promote recovery in those with an opioid use disorder."

Currently, UCS has medication units in Waterloo, Burlington and Ottumwa, in addition to two new OTP sites in Ankeny and Knoxville. Future medication unit locations include Carroll, Atlantic, Fort Dodge, Cedar Rapids, Osceola, Decorah, Ames and Clinton. For more information contact kevin.gabbert@idph.iowa.gov.

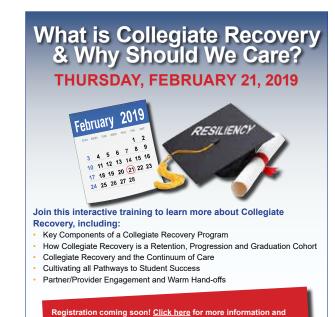


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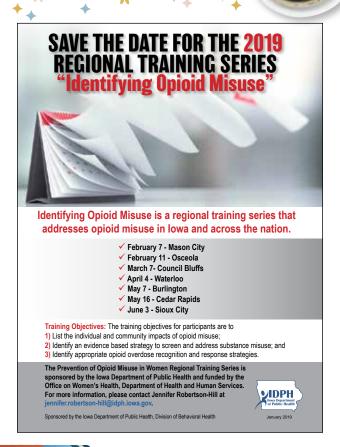
The Iowa Department of Public Health, Criminal and Juvenile Justice Planning Division, and Achieving Maximum Potential, partnered to develop six videos addressing transitional age youth topics. Using a "Got Resources?" theme, the videos may serve as a valuable tool for youth, families and youth serving agencies. The videos provide guidance from a youth perspective for ways to access resources including: substance use and mental health (Got Help?), housing (Got Housing?), medication (Got Meds?), finances (Got Money?), support (Got People?) and education (Got School?). The videos and other resources can be found at a recently developed web page, Iowa Youth Resources. Contact cara.weis@idph.iowa.gov with questions.



to check for registration updates. This training will be held at Greater Des Moines Botanical Gardens, 909 Robert D. Ray Drive,

#CollegiateRecovery #StudentsDoRecover

Sponsored by the lowa Department of Public Health, Division of Behavioral Health



National Survey on Drug Use & Health Coming

The National Survey on Drug Use and Health (NSDUH), sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), will again be conducted in Iowa during calendar year 2019. The NSDUH is an annual scientific, national survey. Each year the NSDUH provides up-to-date information on alcohol, tobacco, and drug use, mental health and other health-related issues across the country and Iowa. Randomly selected households will be sent a letter explaining the study and informing them that an interviewer will soon be visiting their household to ask if an eligible resident will voluntarily participate in the approximately one hour in-home interview. If selected, those completing the interview will receive a \$30 cash incentive. State level estimates of substance use can be found at www.samhsa.gov/data/population-data-nsduh/.

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Take Note

Quarterly PMP Prescriber Activity Reports Coming Soon

The Iowa Prescription Monitoring Program (PMP) is T vital to reducing and preventing prescription drug abuse and drug overdose. As a central depository of information on controlled substance prescribing and dispensing, a major role of the PMP is to make data available to authorized users. Beginning in late January 2019, as mandated by Iowa Code 124.554(3), Iowa PMP information will be disseminated to authorized users via Prescriber Activity Reports (PARs). The PAR provides a health care provider with a prescribing history summary, including their ranking compared to the median of prescribers within the same specialty. The PAR also includes a summary of each health care professional's prescribing history. The PAR is a tool that provides an opportunity for self-examination of a health care professional's practice as it relates to their prescribing of controlled substances. The intent of providing a health care professional with relevant and accurate information is to constructively assist his/her controlled substance prescribing practices. Informing health care professionals of their prescribing behaviors relative to their peers may provide insightful, concise data that may assist with treatment protocols. The PAR is not intended to be an indication that the prescriber or his/her patients have done something wrong and will be for the prescriber's information only.

PARs will be generated and distributed every quarter and sent only to health care professionals who have issued at least one Schedule II, III or IV controlled substance prescription during the previous six months. Each health care professional receives a PAR specific to their prescribing history. According to the Iowa Board of Pharmacy, there are nearly 18,000 registrants with authority to prescribe controlled substances in Iowa. The PAR categorizes each health care professional by specialty. The specialty group is determined using taxonomy codes maintained by the Centers for Medicare and Medicaid Services and the health care specialty selected during the process of registering for a PMP AWARxE user account.





The PAR will identify the following metrics for each prescriber:

- ✓ Opioid related patient and prescription volumes
- ✓ Top 3 medications prescribed
- ✓ Prescribing percentages based on daily Morphine Milligram Equivalents (MME) of opioid prescriptions
- ✓ Patient percentages based on opioid duration of therapy
- ✓ Prescribing volume based on total MME of selected opioids
- ✓ Anxiolytic/sedative/hypnotic prescribing
- ✓ Patient volumes exceeding multiple provider thresholds

✓ Patient volumes receiving dangerous combination therapy

✓ PMP Usage

A Metrics Explanation document will accompany each PAR to assist prescribers to understand how to review and utilize the information. A PAR frequently asked questions (FAQ) document will be posted at pharmacy.iowa.gov/iowa-pmp-awarxe

before dissemination of the first round of reports. The FAQ will be updated as more questions are received.

To register for an Iowa PMP AWARxE account visit iowa.pmpaware.net. Questions on Prescriber Activity Reports can be submitted by email to pmp@iowa.gov.



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For more information about the IDPH Bureau of Substance Abuse, visit http://idph.iowa.gov/bh. For questions related to "A Matter of Substance," contact editors:

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