

Iowa Prescription Monitoring Program 2017 Annual Report

Iowa Board of Pharmacy January 2018

Governor: Kim Reynolds

Lieutenant Governor: Adam Gregg IDPH Director: Gerd W. Clabaugh

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Honorable Governor and Members:

Pursuant to the requirements of section 124.554, subsection 2, of the Iowa Uniform Controlled Substances Act, the Board of Pharmacy (Board) submits the following information.

The Iowa Prescription Monitoring Program (PMP) provides authorized prescribers and pharmacists with information regarding their patients' use of controlled substances and is used as a tool in determining appropriate prescribing and treatment of patients without fear of contributing to a patient's abuse of or dependence on addictive drugs or diversion of those drugs to illicit use. Iowa licensed pharmacies, both in-state and nonresident pharmacies, are required to report to the Iowa PMP all Schedule II, III, and IV controlled substances dispensed by the pharmacy to ambulatory patients.

The Iowa PMP became fully operational on March 25, 2009. The cost of initial implementation of the Iowa PMP was paid by federal grant and amounted to \$411,250. Costs since implementation, amounting to approximately \$112,000 annually, provide for the receipt and delivery of pharmacy data and software maintenance. Annual costs are paid from license fees retained by the Board for the support of Board programs and activities. No additional user fees or surcharges have been imposed to pay for the activities or support of the Iowa PMP.

The Iowa PMP is administered by the Board with the assistance and guidance of an advisory council consisting of pharmacists and prescribers appointed by the governor. The advisory council meets as needed to review the progress of the Iowa PMP; the cost of maintaining the Iowa PMP and the benefits of the program; possible enhancements to the program; and information, comments and suggestions received from program users and the public.

The Board and the PMP Advisory Council also review statistics regarding the use of the Iowa PMP by prescribers, pharmacists and law enforcement or regulatory agents; the number of prescriptions filled each year; the top drugs dispensed in Iowa each year; and indices of excessive pharmacy-shopping or doctor-shopping for controlled substances. Included with this report are some of the data compiled since the establishment of the Iowa PMP.

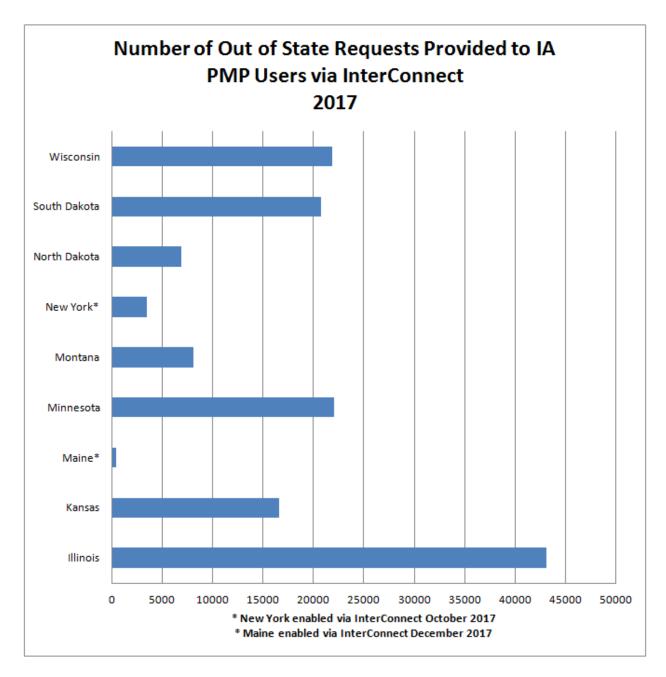
The data indicate continued steady increases in the number of pharmacists and prescribers registering to use the Iowa PMP, and in the number of requests for patient prescription history being submitted and used by those authorized users. The number of practitioner agents that became registered delegate users of the PMP increased by 20 percent, which may in part be attributable to a July 2017 administrative code change that raised the number of agents each practitioner may oversee from three to six. Agents access the Iowa PMP, on the direction of the supervising practitioner and using credentials assigned to and identifying the specific agent, to request patient prescription history information for the use of the supervising practitioner in making a more informed decision regarding the patient's health care plan. Practitioners report that the use of agents improves workflow, encourages more consistent use of the PMP, and ensures the practitioner has information regarding a patient's use of controlled substances prior to the practitioner making a decision on the patient's drug therapy.

During the 2017 legislative session, the Iowa Legislature passed and the governor signed House File 523 which allows the board to provide information from the PMP to a medical examiner investigator recognized by the state medical examiner's office when the information relates to an investigation being conducted by the medical examiner or investigator. Currently, 33 medical examiner investigators have applied for and been granted PMP user accounts.

With regard to top controlled substances dispensed by ingredient, the top 10 drugs have been fairly consistent since the implementation of the PMP in 2009. Hydrocodone-containing products continue to lead with the highest percentage of doses dispensed. Tramadol doses dispensed increased by 2 percent from last year and doses of benzodiazepines (alprazolam, lorazepam and clonazepam) also displayed minor increases. The highest jump was seen with the number amphetamine doses dispensed going from 4 percent up to 9 percent.

From 2015 through 2016, the number of dosage units dispensed was relatively static, but during 2017 it dropped by 10 percent, or nearly 30 million dosage units. The number of prescriptions dispensed during 2015 and 2016 did not appreciably fluctuate, yet in 2017 the number declined by 10 percent.

In May 2017, House File 524 was signed into law by the governor, thus allowing the Iowa PMP to expand interstate data sharing beyond just Iowa border states and Kansas, to any other state PMP that permits disclosure to Iowa. Requests for controlled substance prescriptions dispensed to patients in other states is accomplished through the PMP InterConnect system. The PMP databases in Maine and New York were added to Iowa's PMP via InterConnect as states available for expanded patient record searches. Interstate data sharing of PMP information provides a more complete picture of a patient's prescription history to prescribers and dispensers to aid them in making safe clinical decisions. Iowa will continue enabling PMP queries with additional states throughout the next year.



Prescribers and dispensers continue to indicate that the Iowa PMP is a valuable assistive tool in determining appropriate health care treatment for their patients. In order to make it an even more valuable tool, the Board is making progress toward integration of the PMP with Electronic Health Records (EHRs) and Pharmacy Dispensing Systems (PDSs). Integration can allow for automatic query of the PMP that will be displayed as part of a patient's EHR or PDS profile, resultantly saving practitioner time through incorporation into standard workflow patterns.

On November 30, 2017, a Notice of Intent to Award was issued to Appriss Health by the Department of Administrative Services for an updated PMP software platform. The new PMP system, known as AWARXE, will provide users with greatly improved self-service features.

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Patient query reports will continue to be supplied within seconds of the request. AWARXE PMP administrators will be able to independently run ad hoc reports in-house and decrease the turnaround time for data requests.

A pending Administrative Rule change exists that would shorten the window in which pharmacies must report dispensing data from every seven days to every business day. This, coupled with faster data upload capabilities with the AWARXE platform, will mean that practitioners can review prescription fill histories that are more current and, therefore, more relevant.

Looking ahead to 2018, the Board will continue efforts to have legislation enacted that would expand PMP reporting to include Schedule V controlled substances dispensed by prescription, and controlled substances dispensed directly from practitioners to patients in an office setting.

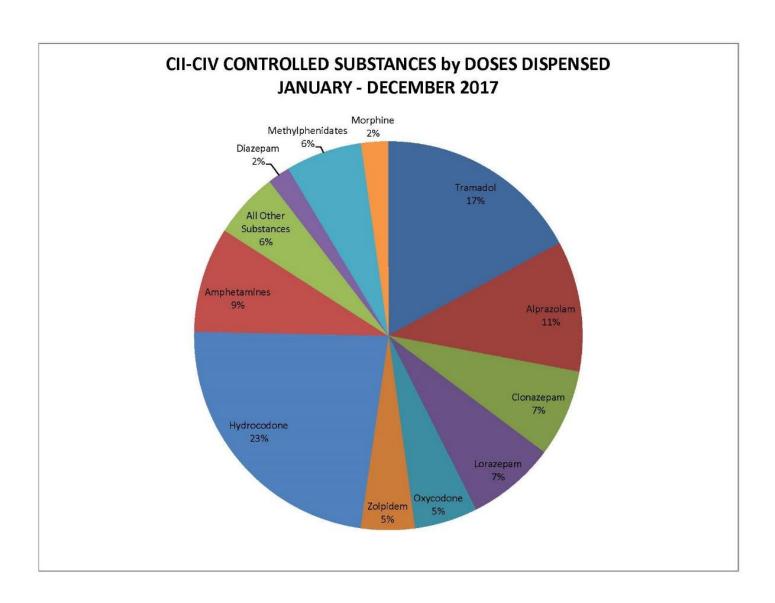
Registered users of the Iowa PMP continue to express their appreciation for the program and the value of the program in planning the health care treatment of their patients. The Board and the PMP Advisory Council concur, and health professional boards, associations and societies agree, the Iowa PMP is a cost-effective use of resources and it should continue to evolve as an instrumental tool in the fight to combat the opioid crisis.

Respectfully submitted,

Jennifer Siffany

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Associate Director Prescription Monitoring Program



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J	ANUARY 1, 2	2010, TO DE	CEMBER 31,	2017			
Period:	1/1/2011 - 12/31/2011	1/1/2012 - 12/31/2012	1/1/2013 - 12/31/2013	1/1/2014 - 12/31/2014	1/1/2015 - 12/31/2015	1/1/2016 - 12/31/2016	1/1/2017 - 12/31/2017
Total CSA Registrant/Prescribers	14,008	14,547	14,891	15,491	16,012	16,357	17,091
Total Iowa Pharmacies*	948	942	1,520	1,708	1,703	1,728	1,695
Total Iowa-resident Pharmacists	3,372	3,410	3,489	3,523	3,568	3,607	3,633
Prescribers Registered	2,956	3,766	4,496	5,147	5,909	6,849	7,798
Pharmacists Registered	1,208	1,698	2,081	2,390	2,692	2,978	3,200
Regulators Registered	28	32	33	33	32	34	37
Law Enforcement Agents Registered	92	119	152	162	176	182	196
Practitioner Agents Registered	-	124	423	721	1,114	1,696	2,122
Prescriber Requests Processed	71,172	104,431	129,702	170,696	236,663	297,876	347,703
Pharmacist Requests Processed	8,173	12,327	48,040	68,669	91,174	94,482	99,196
LE/Regulator Requests Processed	423	644	484	487	459	461	577
Total # Requests Processed	79,768	117,402	178,226	239,852	328,296	392,819	447,476
*beginning 2013, includes nonresident pharm					,	,,,,,,	,
Filled prescriptions for period:	1/1/2011 - 12/31/2011	1/1/2012 - 12/31/2012	1/1/2013 - 12/31/2013	1/1/2014 - 12/31/2014	1/1/2015 - 12/31/2015	1/1/2016 - 12/31/2016	1/1/2017 - 12/31/2017
# Individual patients filling CII Rxs	322,950	332,908	425,604	769,937	905,146	733,586	679,262
	249	186	425,604	303	169	232	194
from 5 or more prescribers or pharmacies	7	3		2	109	232	194
from 10 or more prescribers or pharmaciesfrom 15 or more prescribers or pharmacies	-	3	-			-	<u></u>
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# Individual patients filling CII or CIII Rxs		865,412	1,026,837	821,058	971,460	784,931	727,099
from 5 or more prescribers or pharmacies	1,313	1,072	264	330	198	255	218
from 10 or more prescribers or pharmacies	60	31	1	2	1_	2	1
from 15 or more prescribers or pharmacies	8	2	-	-	-	-	-
# Individual patients filling CII, III, IV Rxs	1,149,197	1,181,762	1,447,418	1,142,768	1,498,700	1,159,368	1,092,481
from 5 or more prescribers or pharmacies	1,769	1,576	371	527	355	466	424
from 10 or more prescribers or pharmacies	72	49	3	5	3	2	6
from 15 or more prescribers or pharmacies	9	2	-	-	-	-	1
Total # Rxs dispensed for period:	4,581,643	4,668,502	4,679,271	4,800,912	5,183,996	5,182,263	4,712,701
Total # Doses dispensed for period:	253,631,899	254,137,229	260,092,453	269,466,402	303,030,950	300,729,482	271,499,890