



Using Prescription Drug Monitoring Programs to Inform Prevention Policy and Decision Making

John Carnevale, Ph.D., DACCC

Erika Ostlie, MA, DACCC

SAMHSA's Center for Substance Abuse Prevention

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Session Presentation Agenda

- SAMHSA Priorities and the Role of DACCC products
- The Local Indicator Problem
- One Innovative Solution: Prescription Drug Monitoring Programs
- Status of State PMPs
- Discussion

SAMHSA's Strategic Initiatives

1. Prevention of Substance Abuse and Mental Illness
2. Trauma and Justice
3. Military Families
4. Recovery Support
5. Health Reform
6. Health Information Technology
7. Data, Outcomes, and Quality
8. Public Awareness and Support

SAMHSA CSAP's DACCC

- The Data Analysis Coordination and Consolidation Center (DACCC) processes, cleans, and consolidates CSAP data and delivers products that support SAMHSA initiatives – especially those related to substance abuse prevention and data quality.
- Some DACCC products include:
 - Accountability Report – Consolidates data from all CSAP programs to enhance capacity, effectiveness and accountability.
 - Trends & Directions Report – Highlights key national trends in substance use behaviors and attitudes.
 - State NOMs Report – Provides state-by-state trends in substance abuse outcomes.
 - Data Cleaning Sheets – Provides feedback loop with grantees to ensure higher-quality data for analysis.
 - Special Reports – Presents timely research on relevant prevention topics.

Project Overview

The Local Data Indicator Problem

The Local Indicator Project

DACCC Special Topic Report

- ➔ Project Aim: to identify common practices and challenges associated with the collection of local drug data and explore possible guidelines for communities seeking to establish policy-relevant indicator systems.
- ➔ Identified 12 communities that have successfully used data to assess need and inform decision making.
- ➔ Held individual conversations with communities and the research community.
- ➔ Conducted a Webinar with communities to supplement discussions.

Global Findings

→ *Exemplar** communities:

- Collect data about youth and young adult drug use and some categories of drug-related consequences;
- Form strong collaborations with participants from all sectors of the community; and
- Excel at ensuring diversity in their funding portfolios.

→ No community appears to have enough local data collection capacity to collect data to inform them of prevention needs across the *entire* community.

→ Collecting information about drug use consequences is very problematic.

* *Communities are identified as “exemplar” since they are considered models in their use of local-level data.*

Three Key Recommendations

- Federal and state level governments should develop the infrastructure to collect a core set of data indicators and address issues, such as a lack of standard data definitions or standard data collection instruments.
- CSAP's training and technical assistance program could focus more on the community level by targeting best practices in local coordination and collaboration strategies.
- CSAP should disseminate examples of special studies, analyses, and templates to assist communities in their efforts to inform decision making based on drug use and consequence data.

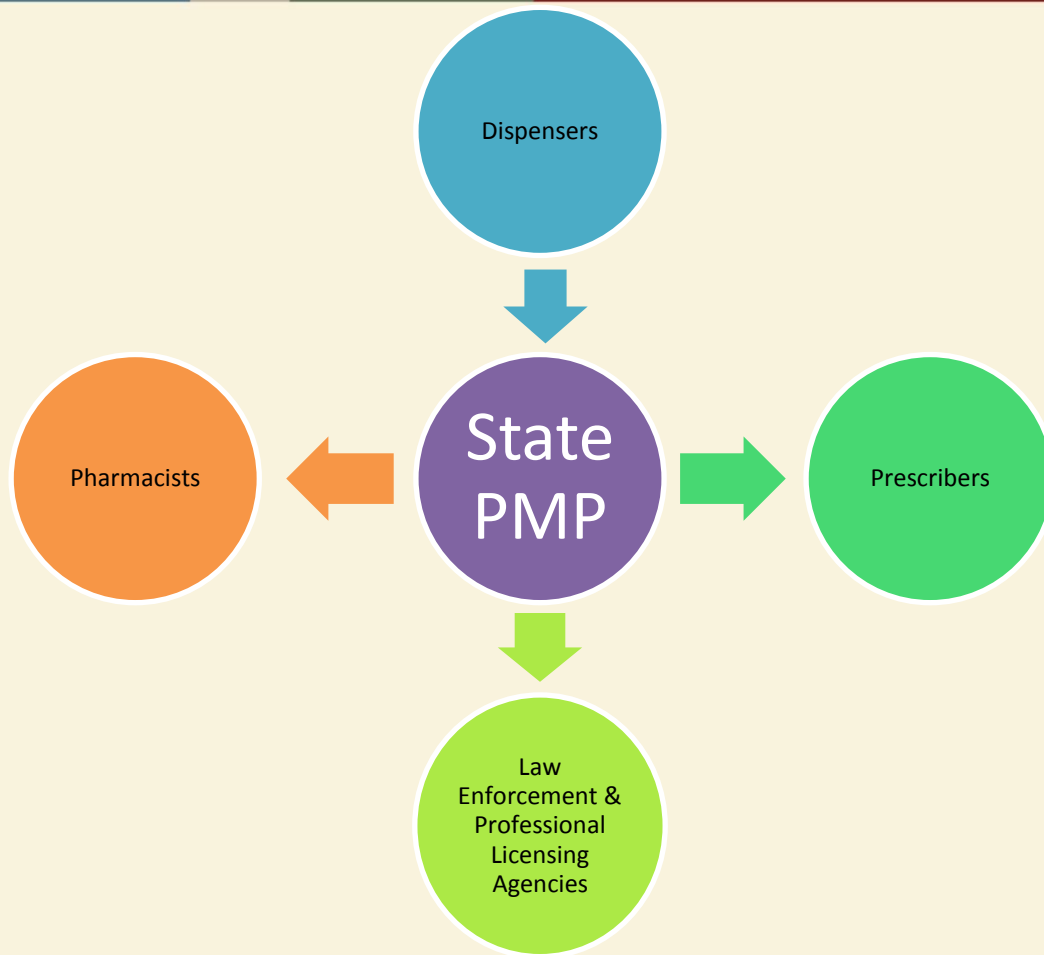
One Innovative Solution

Prescription Drug Monitoring Programs

Prescription Drug Monitoring Data and Prevention

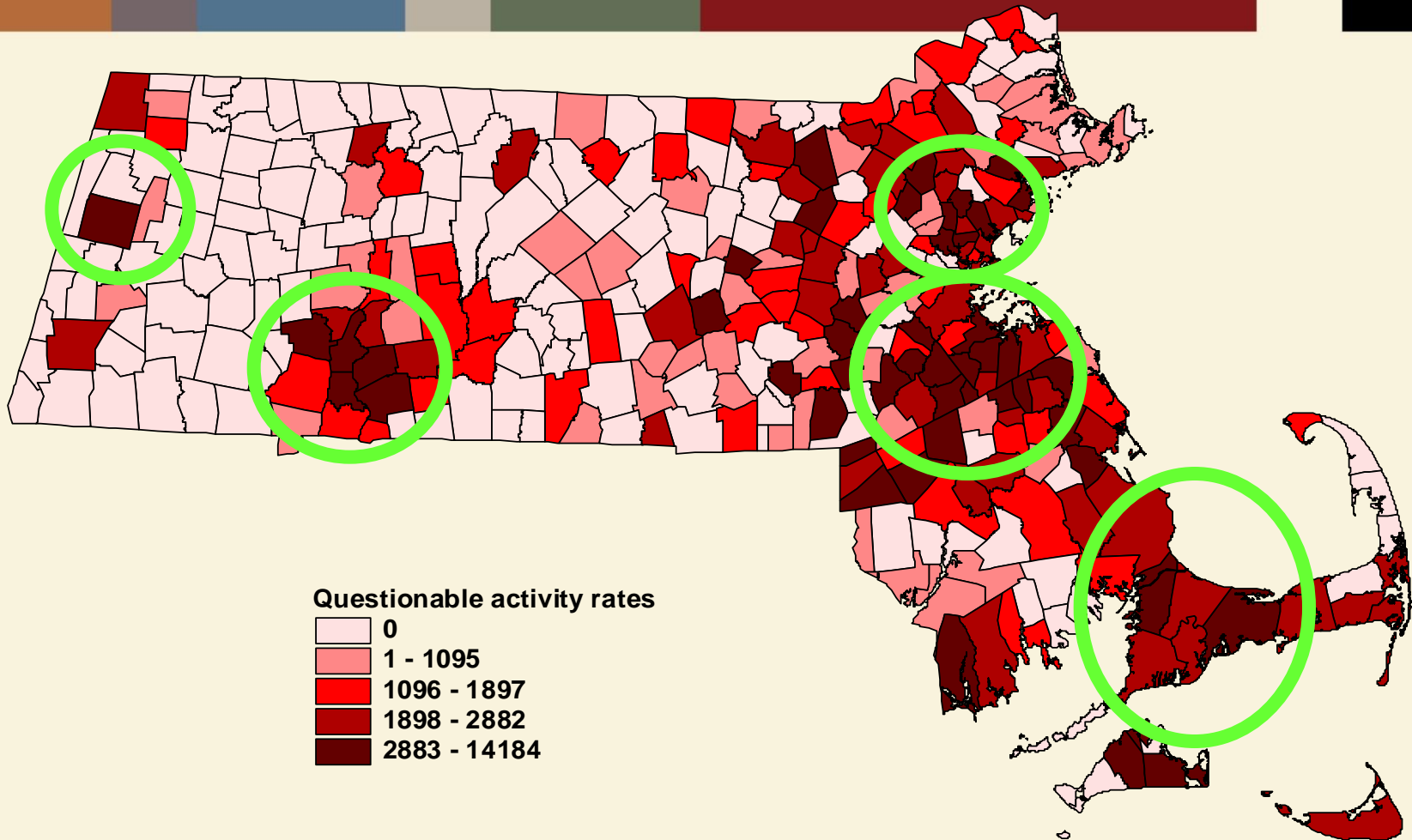
- ➔ Traditionally, local indicators of prescription drug abuse were limited to ER or Coroner reports or school-based surveys.
 - Data are not always current and practical for decision making.
- ➔ Prescription Drug Monitoring Programs (PMPs) collect near real-time, geographically coded data on scheduled drug prescriptions.
 - The specific drugs for which data are collected varies by state.
- ➔ PMP data can be used to generate custom reports or maps for State and Community level prevention practitioners.
 - Provides insight into state and local-level trends and patterns.

PMP System Overview

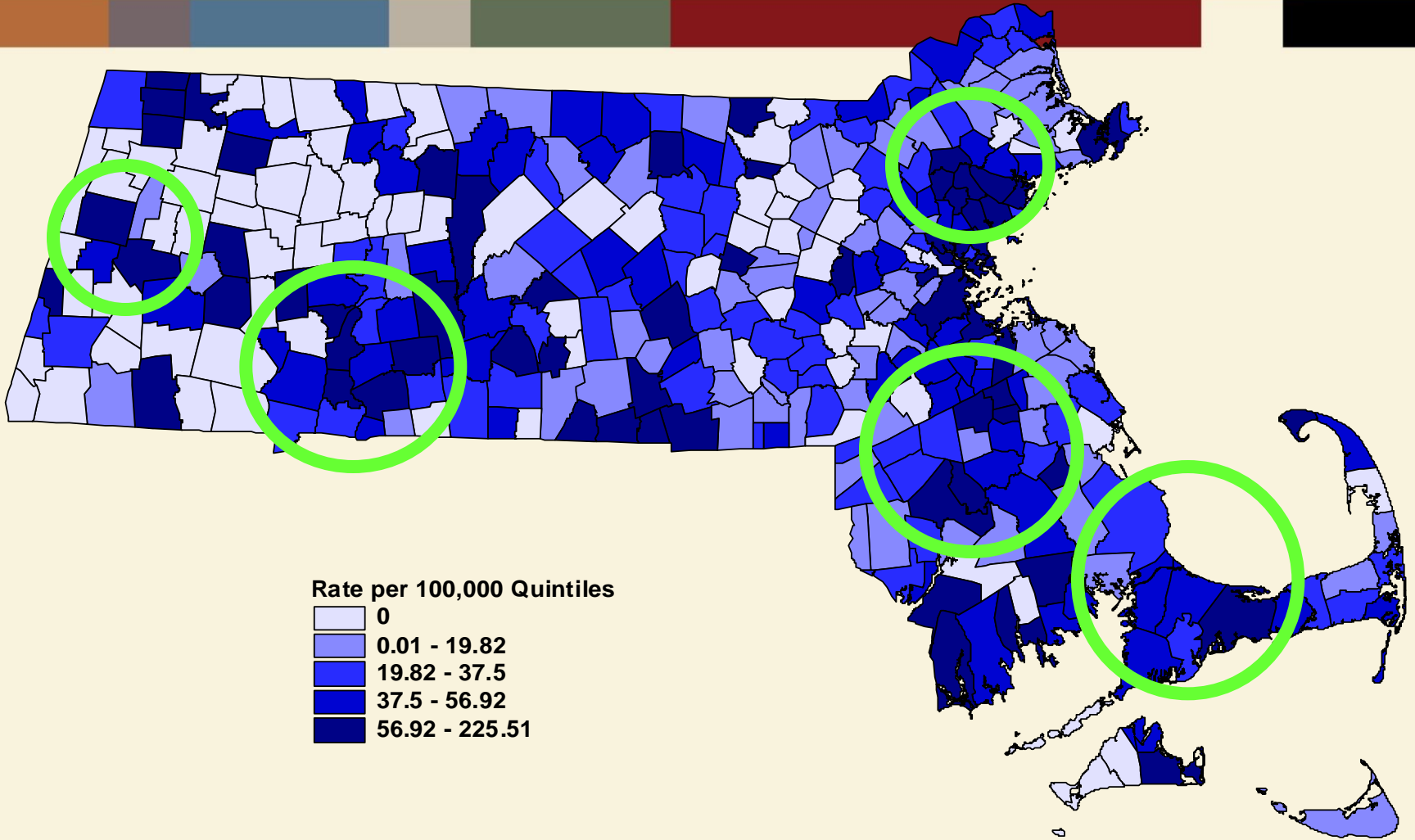


**Other groups may also receive reports other than those listed.*

2005 Prescriptions Associated with Questionable Activity (Rates per 100,000 Prescriptions) by Pharmacy Town



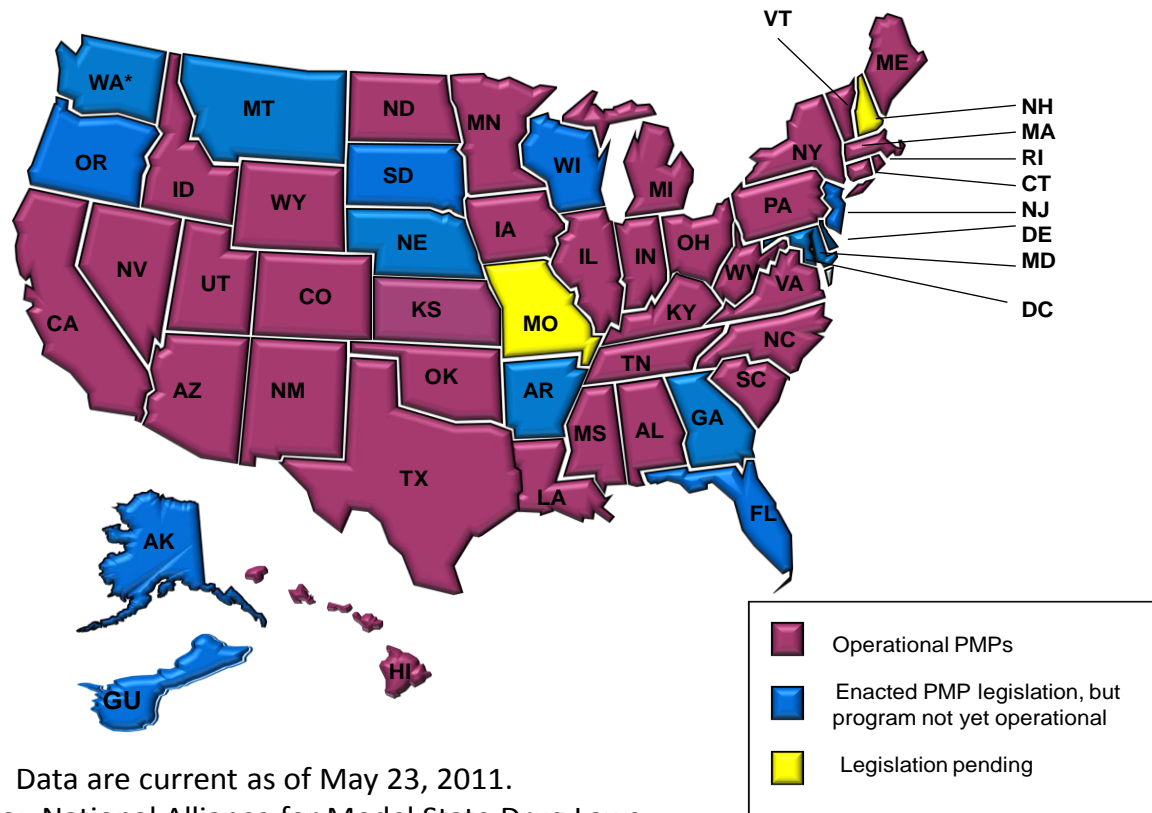
2005 Opioid-related Health Problems Rate per 100,000 by Town



Rate per 100,000 Quintiles

- 0
- 0.01 - 19.82
- 19.82 - 37.5
- 37.5 - 56.92
- 56.92 - 225.51

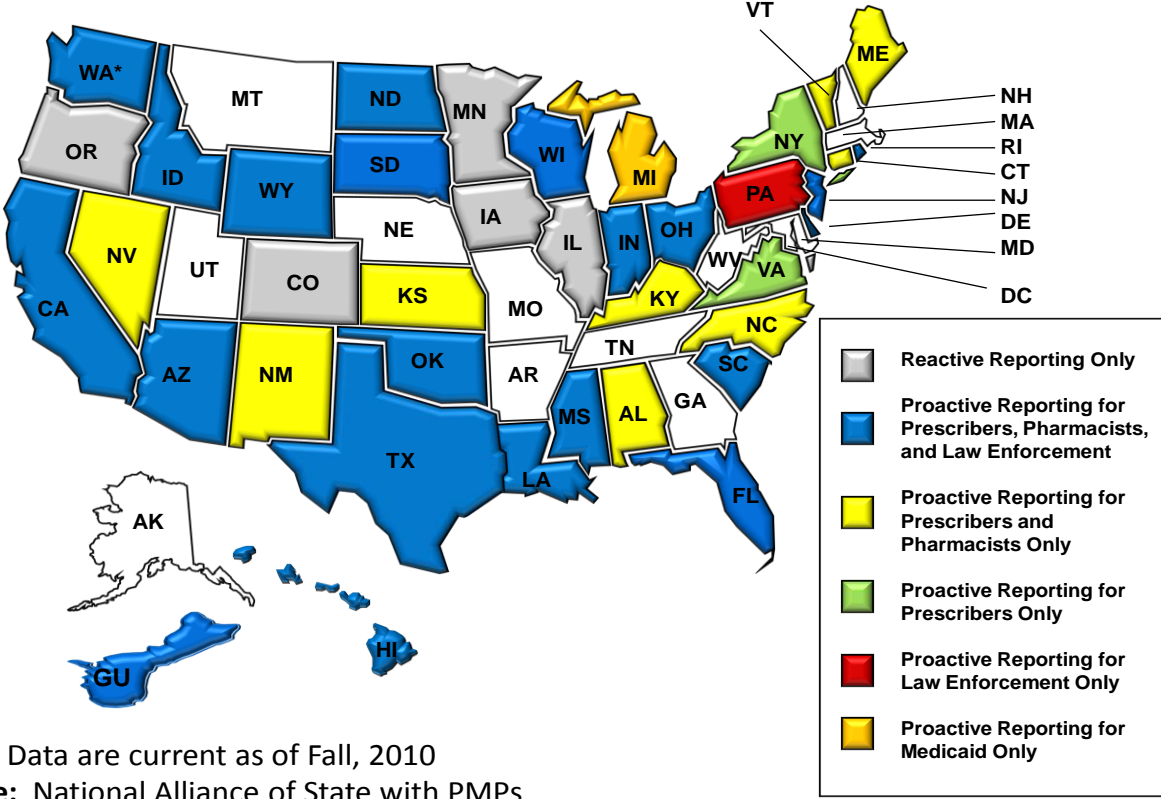
The Current Status of State PMPs



Proactive vs. Reactive Reporting

- States with “Reactive” PMPs generate reports only in response to a specific inquiry made by a prescriber, dispenser, or other party with appropriate authority.
- States with “Proactive” PMPs identify and investigate cases, generating unsolicited reports whenever suspicious behavior is detected.
 - States with Proactive PMPs tend to be law enforcement oriented in their approach.
- States with Proactive PMPs may be more effective in reducing the per capita supply of prescription pain relievers and stimulants than states with Reactive PMPs (Simeone & Holland, 2007).

Proactive vs. Reactive PMP Map



Current Status of PMP Funding

- BJA Hal Rogers PDMP Grant
- SAMHSA National All Schedules Prescription Electronic Reporting Act of 2005 Grants (NASPER)
- Eventually, there will not be a need for federal funding
 - States will incorporate PMPs into their budgets to ensure sustainability
- However, some states had to suspend their PMPs due to lack of funding

Discussion

Contact Information

Bev Fallik, Ph.D.

→ Beverlie.Fallik@samhsa.hhs.gov

John Carnevale, Ph.D.

→ john@carnevaleassociates.com

Erika Ostlie, MA

→ erika@carnevaleassociates.com