

Arkansas Prescription Monitoring Program

FY 2016 Third Quarter Report January-March 2016



Arkansas Prescription Monitoring Program

Quarterly Report

January—March, Fiscal year 2016

ARKANSAS PMP PROGRAM

Act 304 of 2011 authorized the Arkansas Prescription Drug Monitoring Program (PMP).

Arkansas law states that each dispenser shall submit, by electronic means, information regarding each prescription dispensed for a controlled substance. Each time a controlled substance is dispensed to an individual, the dispenser shall submit the information required by Arkansas law to the central repository weekly for the previous week, Sunday through Saturday.

The ADH shall establish and maintain procedures to ensure that the privacy, confidentiality, and security of patient information collected, recorded, transmitted, and maintained is not disclosed except as provided in Act 304.

The goals of the PMP:

- To enhance patient care by providing prescription monitoring information that will ensure legitimate use of controlled substances in health care.
- To help curtail the misuse and abuse of controlled substances.
- To assist in combating illegal trade in and diversion of controlled substances.
- To enable access to prescription information by practitioners, law enforcement agents and other authorized individuals and agencies.

The number of authorized PMP users increased between January and March, 2016 (table 1).

Table 1: Number of authorized users by type

PMP User Type	Jan 2016	Feb 2016	Mar 2016	Percent Change
Physician	2209	2242	2278	3%
Osteopathic	175	175	176	1%
Physician				
Podiatrist	24	24	24	0%
Physician	153	160	161	5%
Assistant				
Advanced	944	965	1005	6%
Practice Nurse				
Optometrist	10	10	10	0%
Dentist	381	386	392	3%
Veterinarian	14	14	15	7%
Pharmacist	2207	2239	2254	2%
Delegate	231	307	372	61%
Law	71	71	72	1%
Enforcement				
Licensing Board	4	4	4	0%
TOTALS	6423	6597	6763	5%

The total number of PMP queries has increased steadily over the last 12 months (figure 1). Queries made by prescribers drove most of the increases seen since March, 2015.

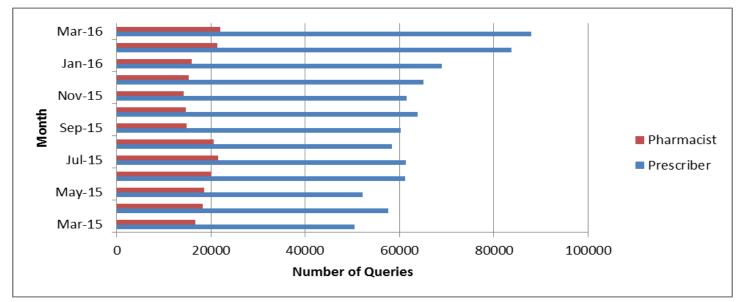
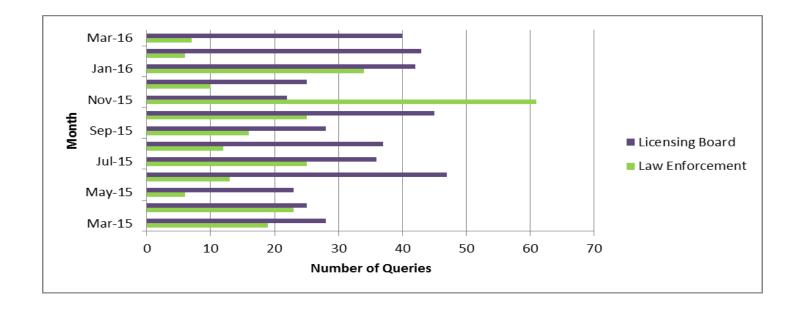


Figure 1: Number of queries by prescribers and dispensers (Mar 2015 to Mar 2016)

Licensing board and law enforcement queries have fluctuated over time and are a small number of the total queries made to the PMP. (figure 2).

Figure 2: Number of monthly queries by licensing boards and law enforcement (Mar 2015 to Mar 2016)



ACT 304 authorizes the Arkansas Prescription Monitoring Program to share controlled substance prescription data with sixteen (16) other states. Most states begin the program by sharing data with neighboring or border states. Arkansas shares data with four of its six border states; Oklahoma, Louisiana, Tennessee, and Mississippi.

Texas has recently passed legislation allowing them to share data but Missouri has yet to pass any PMP legislation.

The Red States in Figure 3 are the states with which Arkansas currently shares data. The goal is for all states and territories to share data by 2020. State laws that bar or restrict data sharing must change in order to reach the goal.

FIGURE 3: States that share PMP data with Arkansas



Monitoring doctor shopping by recipients (visiting multiple prescribers and multiple pharmacies) is a key way to evaluate the effectiveness of a prescription monitoring program. The Arkansas PMP has made progress in reducing the number of doctor shoppers in Arkansas. The number of people seeing seven (7) or more physicians and seven (7) or more pharmacies in a 90-day period has decreased over the last six (6) quarters (figure 4).

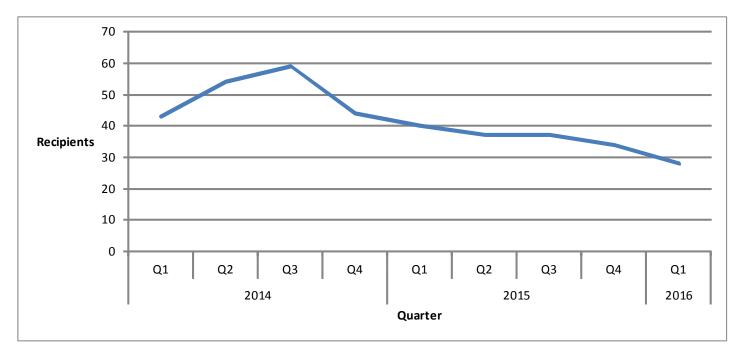
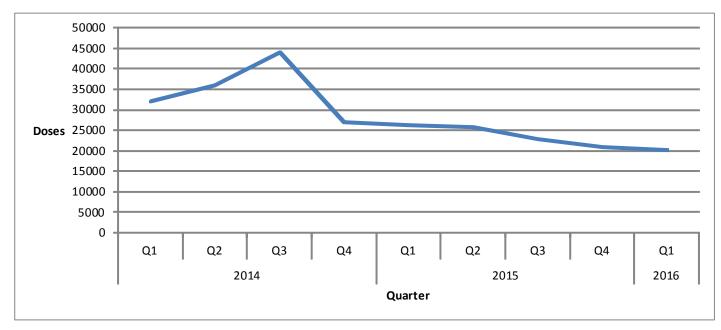


FIGURE 4: Recipients seeing seven (7) or more physicians and seven (7) or more pharma-

The total number of doses of controlled substances dispensed to doctor shoppers has decreased over the last six quarters; 4th quarter 2014 through the 1st quarter 2016. (figure 5).

FIGURE 5: Quantity of doses dispensed to 7 X 7 "Doctor Shoppers"



The amount and type of prescription drugs used in Arkansas varies widely by county. The AR PMP tracks prescription drug use by mapping doses dispensed per capita based on the recipient's address. Hydrocodone is the most-used prescription opiate in the state. Rates of hydrocodone use vary from 20 doses per capita in Lincoln County to 65 doses per capita in Pike County (Figure 6). The potential also exists for oxycodone to be misused or diverted because of its potency and popularity. Like hydrocodone, oxycodone use varies by county (Figure 7). A complete set of maps showing county-level rates of prescription drug use is available at http://www.arkansaspmp.com/

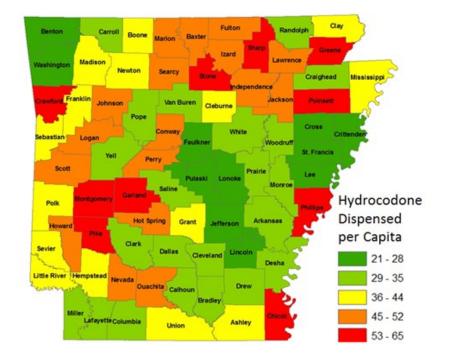


FIGURE 6. Hydrocodone doses dispensed per capita in 2015

FIGURE 7. Oxycodone doses dispensed per capita in 2015

