



# Vermont Prescription Monitoring System

April 1, 2016

## What is the Vermont Prescription Monitoring System?

- A statewide **electronic database** of controlled substance prescriptions dispensed from Vermont-licensed pharmacies that became operational in January 2009
- A **clinical tool** to promote the appropriate use of controlled substances and deter misuse, abuse, and diversion of controlled substances
- A **surveillance tool** used to monitor statewide prescribing, dispensing, and use of controlled substances trends

- In 2006, the Vermont Legislature passed Act 205 authorizing the Vermont Department of Health to establish and operate a Prescription Drug Monitoring Program (PDMP)
- Vermont Statute - 18 V.S.A Chapter 84a
- Vermont Prescription Monitoring System Rule (eff. 08/01/2015)
  - ▣ Prior Rule (06/2008-08/2015)
- Rule Governing the Prescribing of Opioids for Chronic Pain (08/01/2015)

- **Vermont-licensed** pharmacies must upload data on all dispensed Schedule II, III, and IV controlled substances
  - Schedule II – Drugs with a high potential for abuse and dependence
    - Examples include: oxycodone, fentanyl, amphetamine, and methylphenidate
  - Schedule III – Drugs with a moderate to low potential dependence.
    - Examples include: products containing not more than 90 mg of codeine per dosage unit, buprenorphine, and anabolic steroids.
  - Schedule IV – Drugs with a moderate to low potential for abuse and low risk of dependence.
    - Examples include: clonazepam, diazepam, and alprazolam.
- Controlled substance data collected from Vermont-licensed pharmacies includes information on the:
  - Prescribed drug
  - Recipient of the prescribed drug
  - Health care provider who wrote the prescription
  - Pharmacy that dispensed the prescription

**Note:** Irrespective of how drugs are scheduled relative to each other, all controlled substances have the potential for abuse and misuse.

- VPMS does not currently collect data on controlled substances dispensed from:
  - ▣ Emergency rooms
  - ▣ Veterinarian offices
  - ▣ Opioid addiction treatment programs (OTPs) that dispense methadone and buprenorphine
- Data submitted to VPMS by pharmacies can contain errors. Each data upload from a pharmacy is screened for errors and sent back to the pharmacy to be corrected if errors are discovered. However, not all errors are found or corrected.

Access to this private health information is limited to specific user types. All users must have a validated registration and an audit trail of use is maintained

- ❑ Prescribers of controlled substances
- ❑ Dispensers of controlled substances
- ❑ Prescriber and dispenser delegates
- ❑ Residents and fellows
- ❑ Vermont Medical Examiner and delegate
- ❑ DVHA Medical Director
- ❑ VPMS Staff

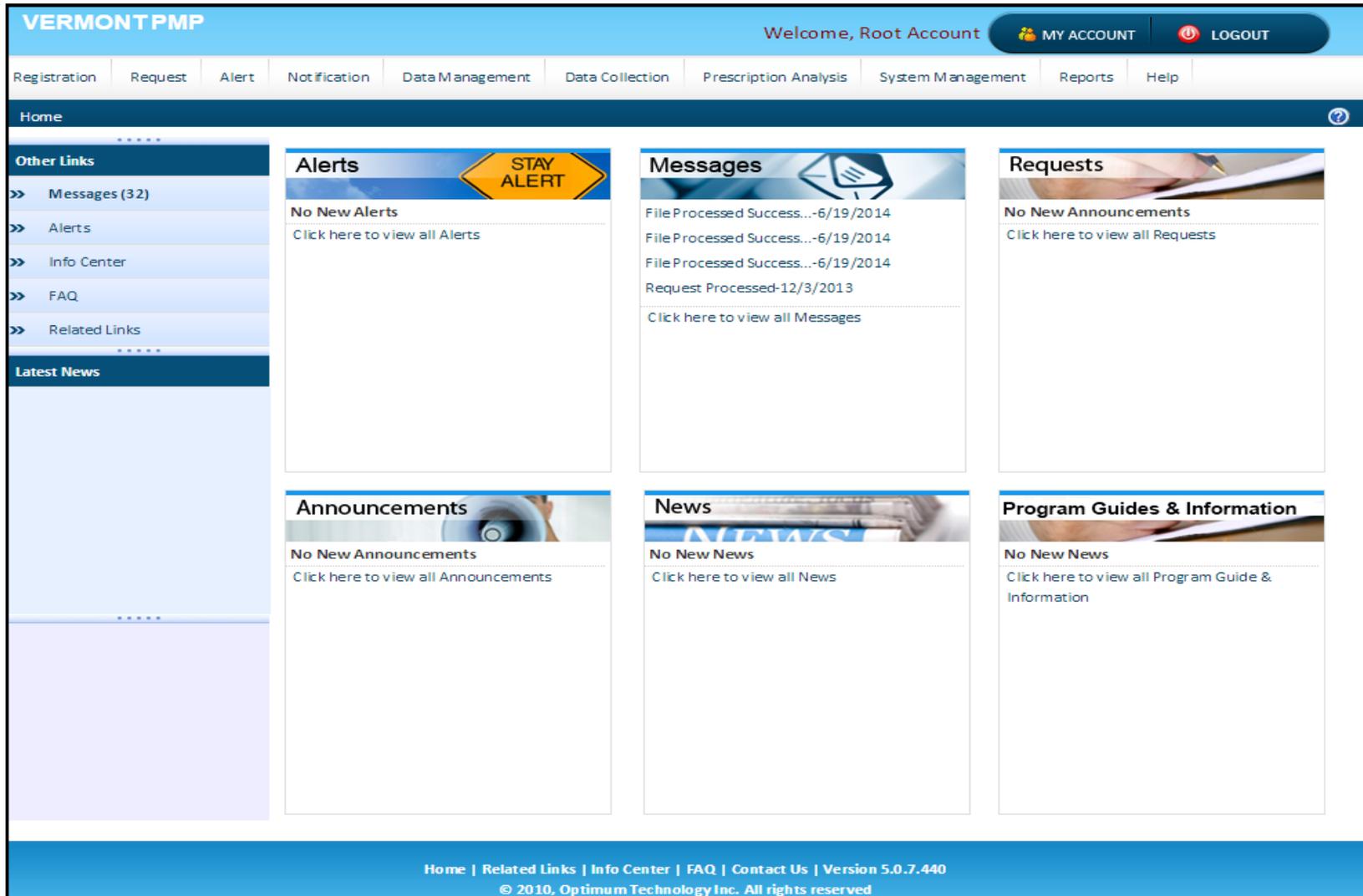
- ❑ The first time the provider prescribes an opioid Schedule II, III, or IV controlled substance written to treat chronic pain
- ❑ When starting a patient on a Schedule II, III, or IV controlled substance for nonpalliative long-term pain therapy of 90 days or more
- ❑ Prior to writing a replacement prescription for a Schedule II, III, or IV controlled substance
- ❑ At least annually for patients receiving ongoing treatment with an opioid Schedule II, III, or IV controlled substance
- ❑ When prescribing Schedule II, III or IV controlled substances to treat acute pain (duration longer than 21 days)
- ❑ Any other requirement adopted under rule by the Commissioner of Health

- When a patient requests an opioid prescription for chronic pain from an Emergency Department or Urgent Care prescriber
- When a patient requests an extension of a current opioid prescription for acute pain from an Emergency Department or Urgent Care prescriber
- Before prescribing an opioid for longer than 10 days

# Required Querying for Buprenorphine

- Prior to prescribing buprenorphine or a drug containing buprenorphine that exceeds the dosage threshold approved by the Vermont Medicaid Drug Utilization Review Board.
- Prior to prescribing buprenorphine or a drug containing buprenorphine a Vermont patient for the first time and at regular intervals thereafter
  - ▣ No fewer than two times annually thereafter
  - ▣ Prior to writing a replacement prescription

# How does it work?



The screenshot displays the VERMONT PMP web application interface. At the top, the header includes the text "VERMONT PMP" on the left, "Welcome, Root Account" in the center, and "MY ACCOUNT" and "LOGOUT" buttons on the right. Below the header is a navigation menu with tabs for "Registration", "Request", "Alert", "Notification", "Data Management", "Data Collection", "Prescription Analysis", "System Management", "Reports", and "Help".

The main content area is divided into several sections:

- Home:** A blue bar with a home icon and a question mark icon.
- Other Links:** A sidebar menu with items: "Messages (32)", "Alerts", "Info Center", "FAQ", and "Related Links".
- Latest News:** A section with a light blue background and a dotted line separator.
- Alerts:** A section with a "STAY ALERT" banner. It displays "No New Alerts" and a link to "Click here to view all Alerts".
- Messages:** A section with a message icon. It lists three "File Processed Success..." messages from 6/19/2014 and one "Request Processed" message from 12/3/2013. It includes a link to "Click here to view all Messages".
- Requests:** A section with a document icon. It displays "No New Announcements" and a link to "Click here to view all Requests".
- Announcements:** A section with a megaphone icon. It displays "No New Announcements" and a link to "Click here to view all Announcements".
- News:** A section with a newspaper icon. It displays "No New News" and a link to "Click here to view all News".
- Program Guides & Information:** A section with a document icon. It displays "No New News" and a link to "Click here to view all Program Guide & Information".

The footer contains the text: "Home | Related Links | Info Center | FAQ | Contact Us | Version 5.0.7.440" and "© 2010, Optimum Technology Inc. All rights reserved".

# Requests

**VERMONT PMP**
Welcome, Root Account [MY ACCOUNT](#) [LOGOUT](#)

Registration | Request | Alert | Notification | Data Management | Data Collection | Prescription Analysis | System Management | Reports | Help

Home > Request > New Request

Other Links

- >> View Request
- >> New Request
- >> Practitioner Self-Lookup

Latest News

## Request

Patient

### Patient Details

Last Name:	First Name:	Middle Name:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Birth Date:	Gender:	
<input type="text"/>	<input type="text"/>	

### Contact Details

Street:	City:	State:	Zip:
<input type="text"/>	<input type="text"/>	VT	<input type="text"/>

### Aliases

[Add](#)

### Prescription Range

Set default to last 12 months date range

Date Filled From:  Date Filled To:

### On Behalf Of

Submit Request On Behalf Of Another User

I certify that the information I have entered above is accurate and that I am authorized to access this information as a normal job function. \*

Home | Related Links | Info Center | FAQ | Contact Us | Version 5.0.7.440  
© 2010, Optimum Technology Inc. All rights reserved

The requested report is available for easy download

**VERMONT PMP** Welcome, Root Account [MY ACCOUNT](#)

Registration | Request | Alert | Notification | Data Management | Data Collection | Prescription Analysis | System Management | Reports | Help

Home > Request > View Request

» View Request

» New Request

» Practitioner Self-Lookup

---

**Other Links**

» Messages (32)

» Alerts

» Info Center

» FAQ

» Related Links

---

**Latest News**

## Request Patient ▼

User Name	Response	Sent On	Attachment	Delete
Root Account	Your request has been processed automatically	11/24/2014 5:40:00 PM	<a href="#">Patient Rx History Report.PDF</a>	

**Current Response**

Root Account on Mon 11/24/2014 5:40 PM      Attachment: [Patient Rx History Report.PDF](#) Pure Excel

Your request has been processed automatically

No file chosen

---

**Patient Details**

Last Name:       First Name:       Middle Name:

Birth Date:       Gender:

---

**Contact Details**

# Queries for multiple patients

- More than one patient may be queried at a time either manually or through a file upload

Easy Request Multiple Report Submission  Manual Entry  File Upload

Last Name:  First Name:  Birth Date:   Gender:

Set default to last 12 months date range Date Filled From:  Date Filled To:

Report Format:

[Add More Patient Request](#)

I certify that the information I have entered above is accurate and that this use of the PMP is for the purpose of providing health care to a current patient.

# Report



**Prescription Drug Monitoring Program**  
 Optimum Technology, 100 East Campus View Blvd Suite 380, Columbus, OH 43235  
 Phone:(866) 683-2476 Email:support@otech.com Fax:(614) 547-0063

## Patient RX History Report

Date: 09-19-2014

Page: 1 of 2

This report may contain more than one patient's prescription information. Please review the "Patients that Match Search Criteria" section below to ensure all prescriptions belong to the requested patient.

Search Criteria: (( Last Name Begins [REDACTED] ) ( D.O.B [REDACTED] ) Period = '09/19/2010' To '09/19/2014'

### Patients that match search criteria

Pt ID	Name	DOB	Address
7	[REDACTED]	[REDACTED]	[REDACTED]

### Prescriptions

Fill Date	Product, Str, Form	Quantity	Days	Pt ID	Prescriber	Written	Rx #	N/R	Pharm	Pay
09/01/2013	LYRICA, 50 MG, CAPSULE	60.00	15	7	RIC MI49	08/09/2013	234120	N	BO9569851	01
04/04/2013	OXYCONTIN, 20 MG, TABLET, FILM COATED, EXTENDED RELEASE	30.00	15	7	RIC MI49	04/04/2013	9976369	N	BO9569851	01
03/03/2013	Test Drug, .	0.01	15	7	RIC MI49	03/03/2013	6876768	N	BO9569851	01
02/05/2013	OXYCODONE HYDROCHLORIDE, 15 MG, TABLET	30.00	15	7	BM2063333	02/05/2013	2236165	N	BM9331808	01
02/02/2013	OXYCONTIN, 20 MG, TABLET, FILM COATED, EXTENDED RELEASE	30.00	15	7	RIC MI49	02/02/2013	4876667	N	BO9569851	01
01/01/2013	OXYCONTIN, 20 MG, TABLET, FILM COATED, EXTENDED RELEASE	30.00	15	7	RIC MI49	01/01/2013	5676566	N	BO9569851	01

N/R: N=New R=Refill

Pay:01=Private Pay 02=Medicaid 03=Medicare 04=Commercial Ins. 05=Military Inst. and VA 06=Workers Comp 07=Indian Nations 99=Other

**Total Prescriptions: 6**

# Prescription Trends

From the CY2014 VPMS Annual Report

And

CY2014 VPMS Special Report: Opioid  
Prescriptions and Benzodiazepines

# Prescriptions and Recipients in VPMS by Year

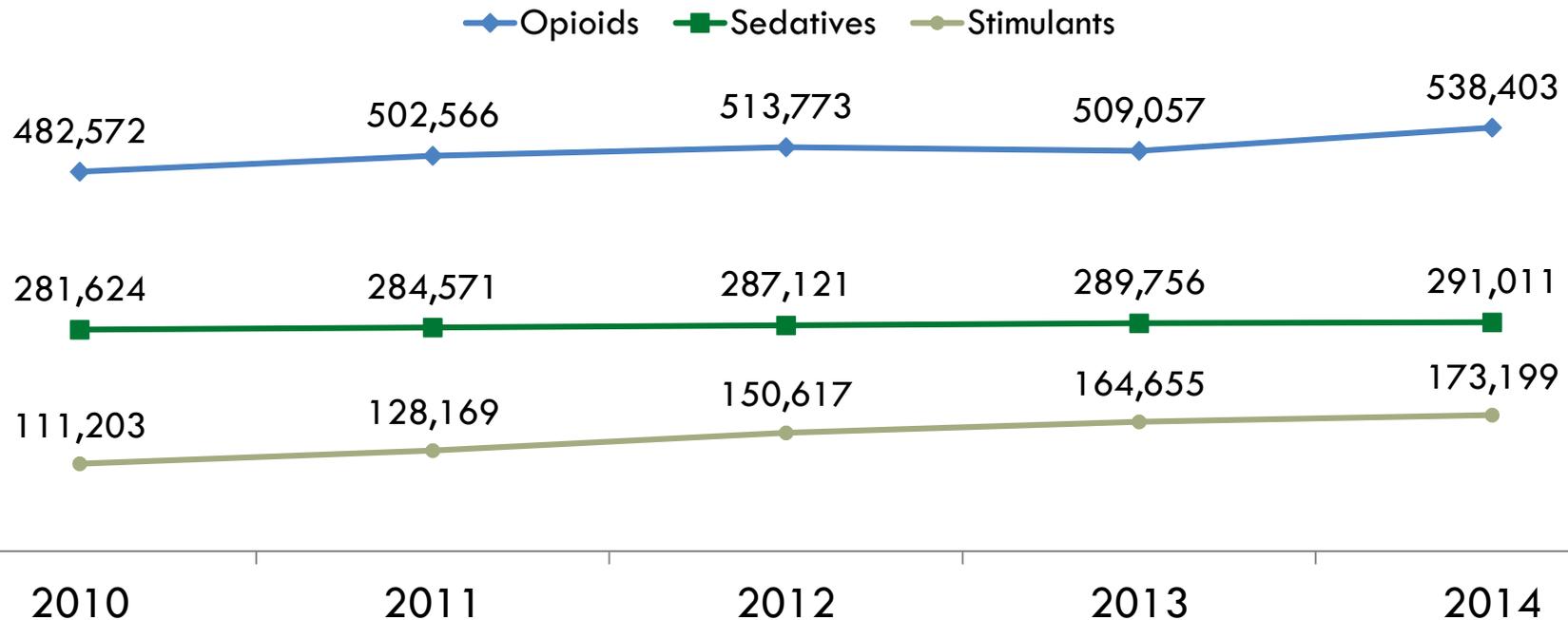
## Total Number of Controlled Substance Prescriptions and Recipients by Year

	Total # of Prescriptions	Total # of Recipients	% of VT Residents
2010	1,070,854	193,035	29%
2011	1,072,062	190,009	28%
2012	1,081,730	186,926	28%
2013	1,083,612	182,885	27%
2014	1,111,471	184,402	29%
TREND			

# Number of Prescriptions by Drug Type and Year

- Opioids account for approximately 48% of the controlled substances dispensed in VT on an annual basis. Sedatives account for approximately 26%.
- Opioids and stimulants are being prescribed at higher rates than they were five years ago.

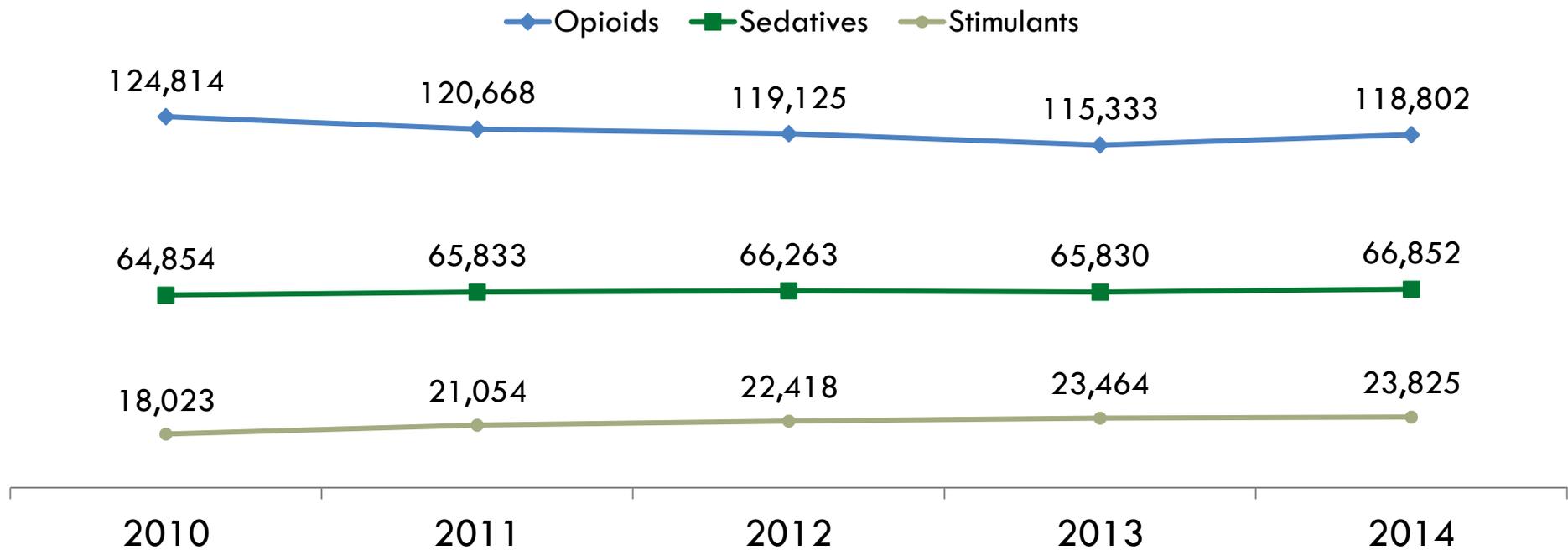
**Total Number of Controlled Substance Prescriptions by Drug Type and Year**



# Number of Recipients by Drug Type and Year

- Opioids were dispensed to more recipients than any other drug type, followed by sedatives and stimulants.

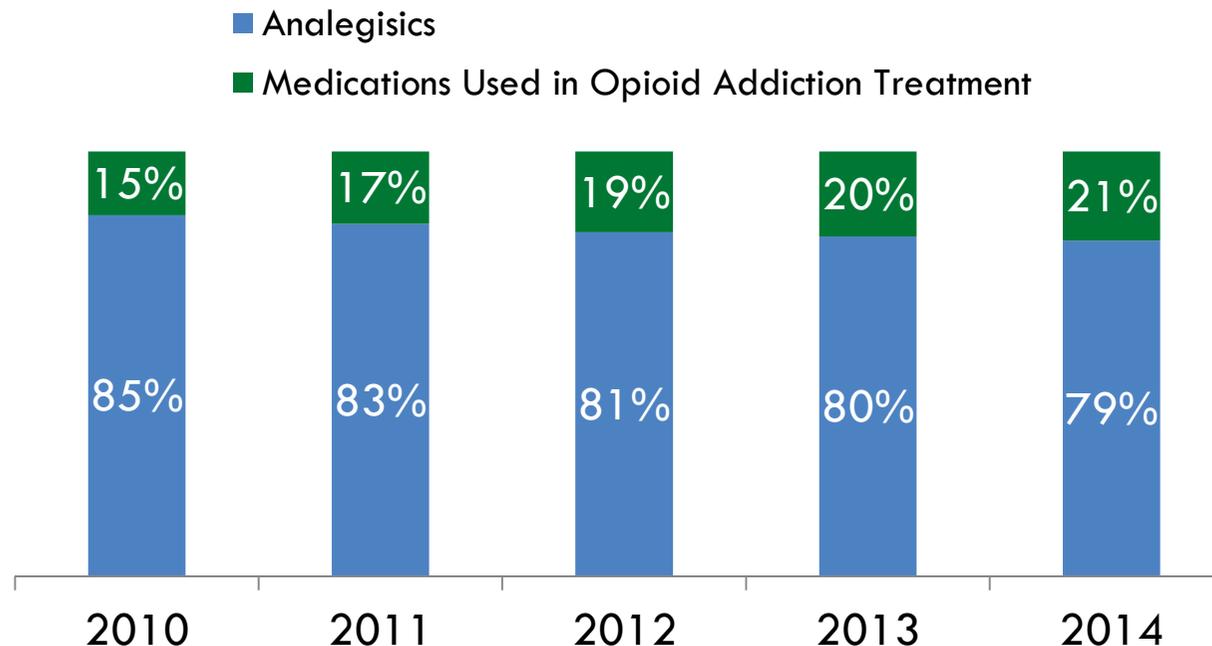
**Total Number of Controlled Substance Recipients by Drug Type and Year**



# Opioid Prescriptions by Clinical Application and Year

- Despite the fact that analgesics and MAT drug prescription totals have both increased in the past five years, MAT drugs represent a small but growing proportion of all opioid prescriptions.
- Nearly 80% of opioid prescriptions dispensed in 2014 were analgesics.

**Percent of Opioid Prescriptions by Clinical Application and Year**

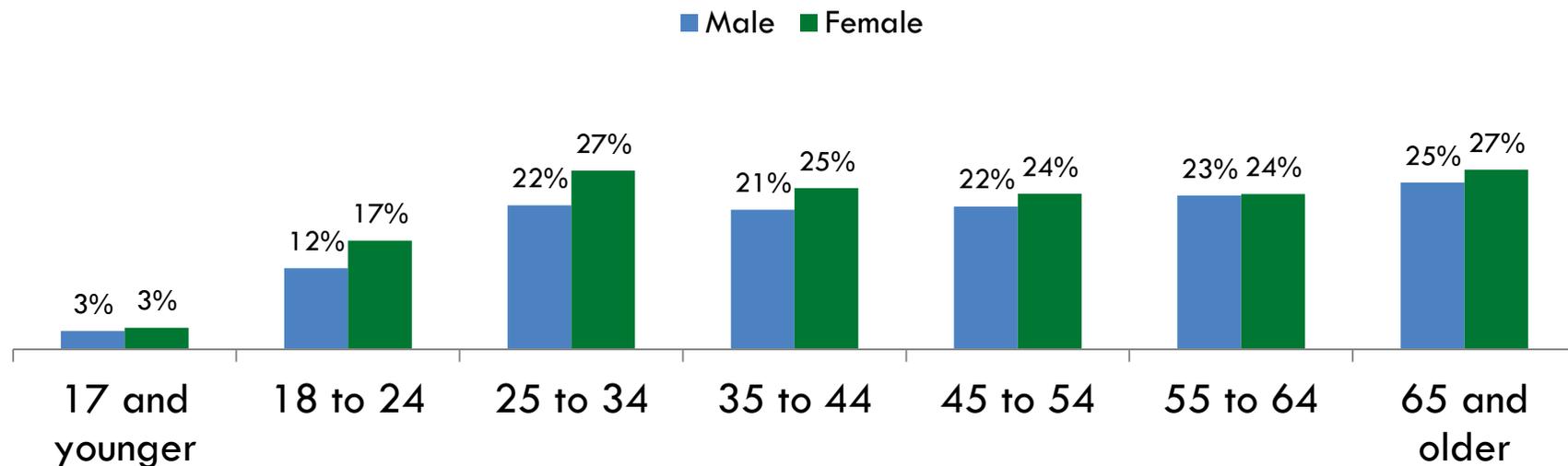


**Note:** The only medication used in opioid addiction treatment that is reported to VPMS is buprenorphine. Methadone is not represented in VPMS data because it is dispensed from opioid addiction treatment programs that are prohibited from reporting to VPMS.

# Percent of Opioid Recipients by Age and Sex

- Women received more opioid prescriptions than men in almost all age groups.

**Percentage of Vermont Population That Received At Least Once Prescription for an Opioid by Age and Sex in 2014**



# Percent of Vermonters Receiving At Least One Opioid Prescription by County

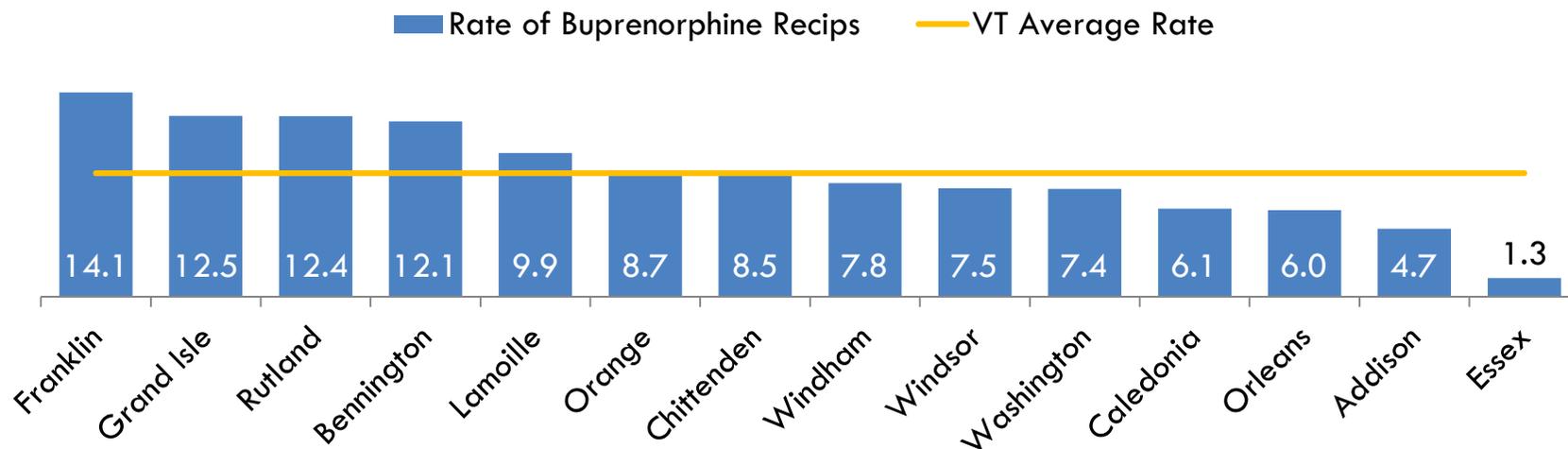
- Approximately one in five (17%) Vermont residents received at least one prescription for an opioid in 2014.
- The percentage of residents having received an opioid prescription in 2014 ranged from 10% in Essex County to 22% in Rutland County.

County	Recipients	% of Pop
Addison	6,228	17%
Bennington	7,511	20%
Caledonia	5,204	17%
Chittenden	24,904	16%
Essex	610	10%
Franklin	10,249	21%
Grand Isle	1,415	20%
Lamoille	5,002	20%
Orange	4,187	14%
Orleans	5,321	20%
Rutland	13,343	22%
Washington	9,975	17%
Windham	8,078	18%
Windsor	7,363	13%
All VT	109,390	17%

## Rate of Vermonters Receiving at least one Buprenorphine Prescription per 1,000 Vermonters By County

- The rate of Buprenorphine recipients varies by county.
- Buprenorphine can be used for pain relief, but is primarily used to treat individuals with opioid dependence.
- VPMS cannot track medications used to treat opioid dependence that are dispensed from opioid addiction programs (OTPs) due to Federal Regulations (42 CFR Part 2).

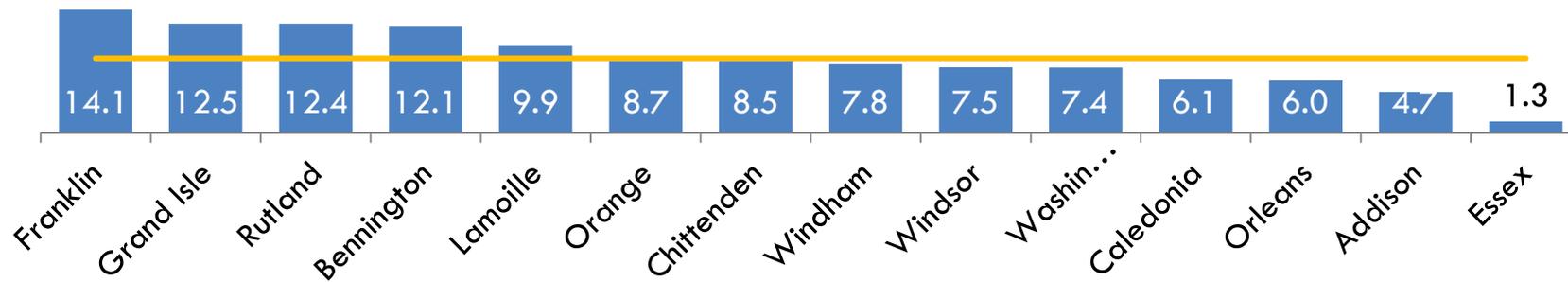
### Rate per 1,000 Vermonters Receiving At Least One Buprenorphine Prescription



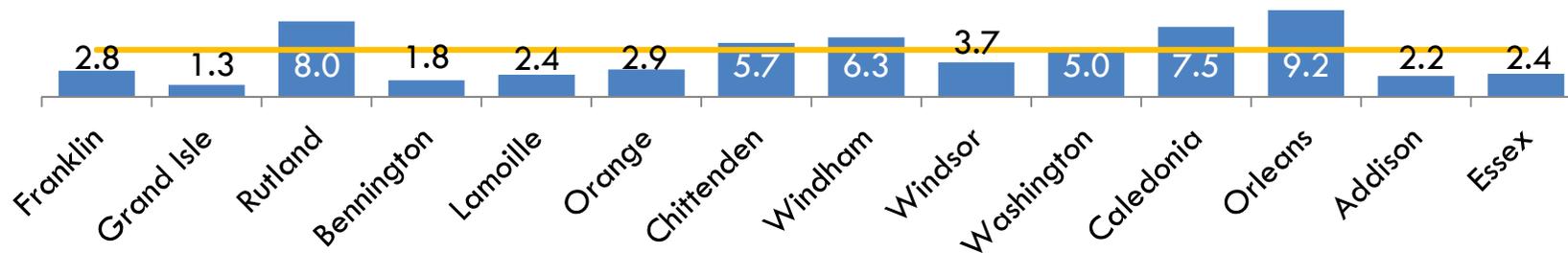
## Counties with Low Buprenorphine Rates Often Have Higher Rates of Treatment in Hubs – CY2014

- Hubs dispense methadone or buprenorphine but do not report to VPMS due to Federal Regulations (42 CFR Part 2).

**Rate per 1,000 Vermonters Receiving At Least One Buprenorphine Prescription**

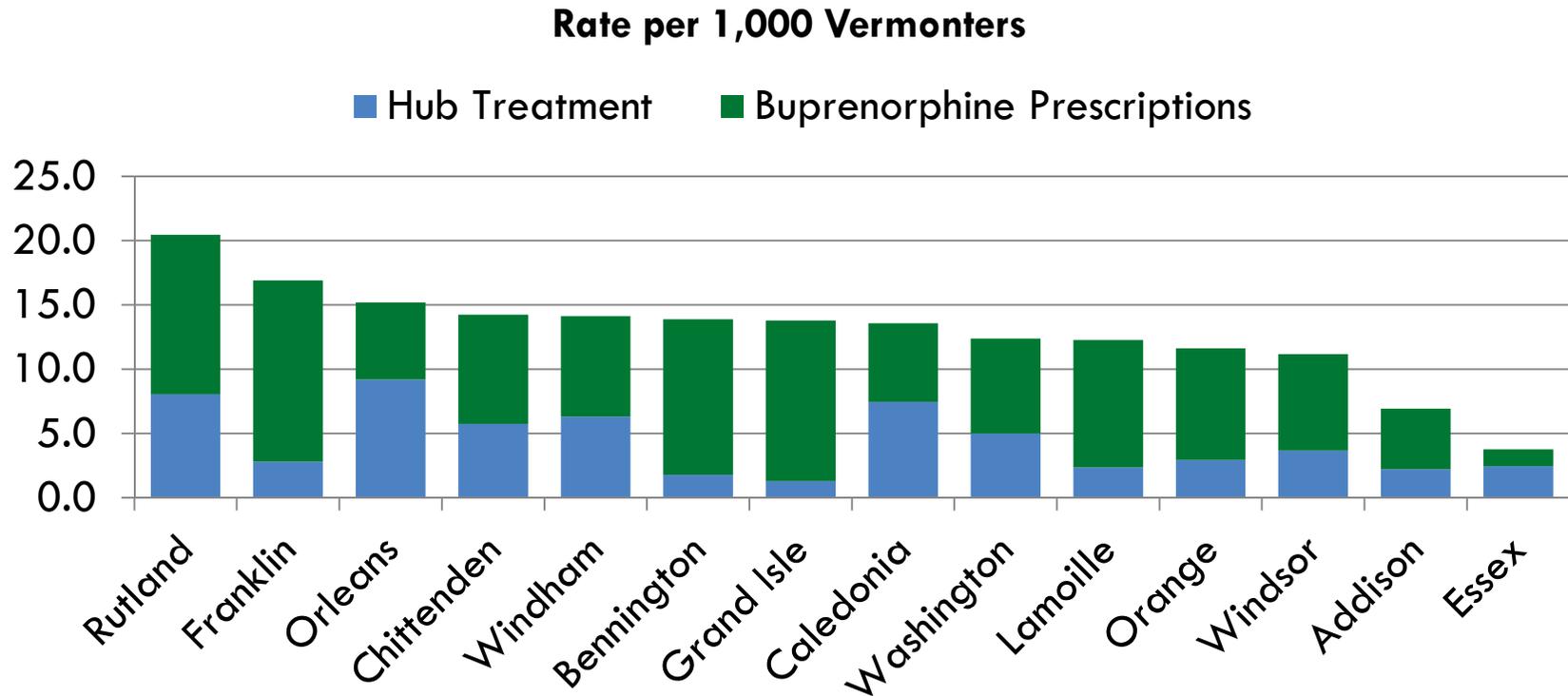


**Rate per 1,000 Vermonters Receiving MAT in Hubs**



# Rates of Buprenorphine Prescriptions and Hub Treatment by County CY2014

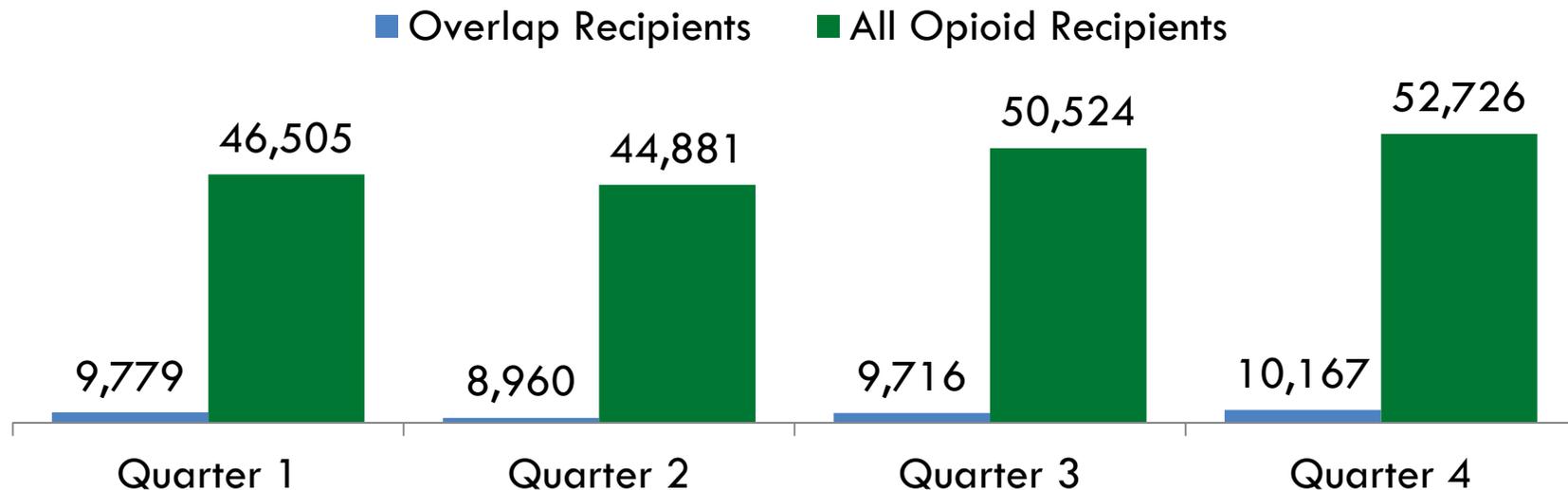
- Hubs dispense methadone or buprenorphine but do not report to VPMS due to Federal Regulations (42 CFR Part 2).



## Overlapping Benzodiazepines and Opioid Prescriptions

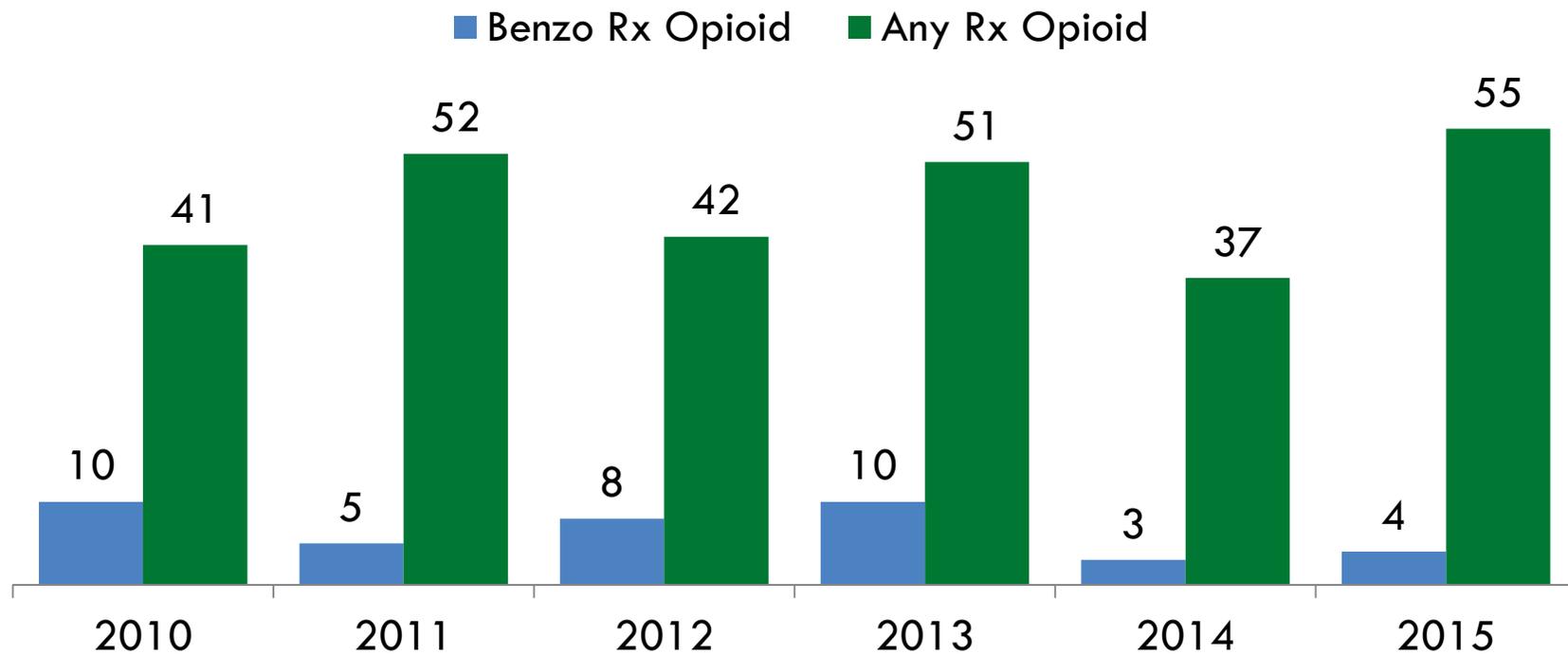
- Taking a benzodiazepine and an opioid prescription at the same time is contraindicated. Providers can check VPMS in order to ensure their patients are not receiving these two drug types at the same time.

**Number of individuals with at least one day of overlap between an opioid prescription and a benzodiazepine prescription, 2014**



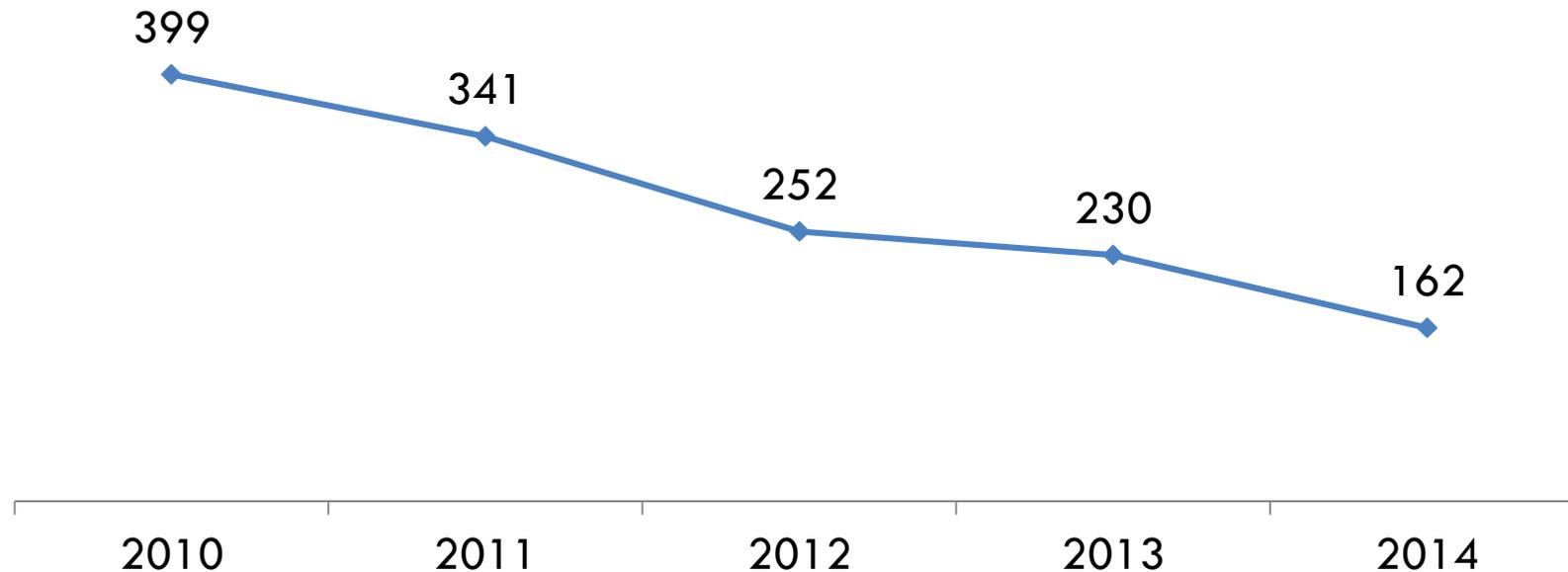
# Deaths involving benzodiazepines and prescription opioids

Number of drug-related poisonings involving both a benzodiazepine and a prescription opioid (excluding heroin) due to accident or undetermined cause in Vermont



- Since 2010, the number of patients identified by VPMS's as visiting multiple prescribers and/or pharmacists has declined steadily, indicating a decrease in prescribing to high-risk patients.

### Number of times VPMS has sent a proactive report by year



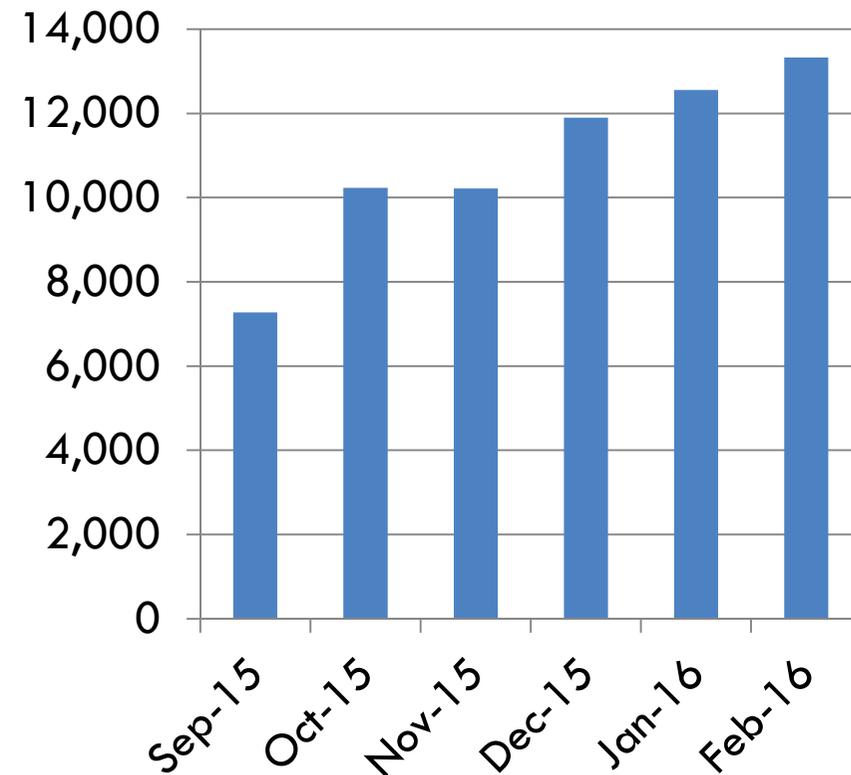
- **Transitioned to a new vendor August 28, 2015**
  - ▣ All prescribers, pharmacists, delegates, residents, and fellows may now register online
  - ▣ Pharmacies are uploading prescription data to a new location
  - ▣ New system has improved features and data accuracy checks

- System Improvements are in-process to provide greater data accuracy
  - User accounts are being updated to improve quality and completeness of user information, including specialty
  - Continuing to work with OPR to better identify pharmacies that must report to VPMS for compliance purposes
  - Improved person matching algorithms for identifying unique individuals
  - Improved threshold letter accuracy due to better person matching

# VPMS Use After New Vendor

Since implementation of the new system, there has been an increase in the use of VPMS based on the number of patient look-ups.

**Number of Patient Look Ups  
by Month**



- The CY2015 Annual Report will be available in the summer
- Approximately 42% of prescriptions are currently uploaded within 24 hours of being dispensed
- 5211 registered VPMS users; 75% of these are prescribers, prescriber delegates, and residents
- 835 new registrants since Oct 2015

- ❑ Interstate data sharing by 4/22/2016
- ❑ Upgrade from ASAP 3.0 to ASAP 4.2 by 5/2016
- ❑ Increase to 24 hour pharmacy uploads by 2/2017

- Transition to a new platform – Appriss AWA<sub>R</sub>x<sub>E</sub>
  - ▣ The platform we transitioned to in 2015, created by Optimum, was purchased by Appriss.
  - ▣ Appriss is transitioning all customers on the Optimum platform to their new platform
- System improvements
  - ▣ Improved monitoring of pharmacy error correction/resubmission
  - ▣ Improved ability to monitor use of the system and compliance to state law
  - ▣ Unsolicited notifications of outlier behavior

Data sharing occurs through hubs. MOUs have been signed with two hubs

- **PMPi (4/22/16)** allows VT to share with:
  - In our region: CT and RI (In process: NY, MA, ME)
  - Other states: AZ, AR, CO, DE, ID, IL, IN, IA, KS, KY, LA, MD, MI, MN, MS, NV, NJ, NM, ND, OH, OK, SC, SD, TN, UT, VI, WV, and WI
- **RxCheck** (date TBD) allows VT to share with ME, MA (June 2016), NY (in process of connecting), AL, FL, KY, OK, FL

- Upgrade data collected from pharmacies from ASAP 3.0 to ASAP 4.2 to provide more information:
  - ▣ Who paid for the prescription
  - ▣ Differentiate veterinary and human use
  - ▣ How pharmacy received the prescription (written, telephone, fax, electronic, etc.)
  - ▣ Pharmacy NPI and Phone number
  - ▣ Patient middle name and phone number
  - ▣ Pharmacist license number
  - ▣ Prescription partial fill and date sold information

# EMR Access to Prescription History

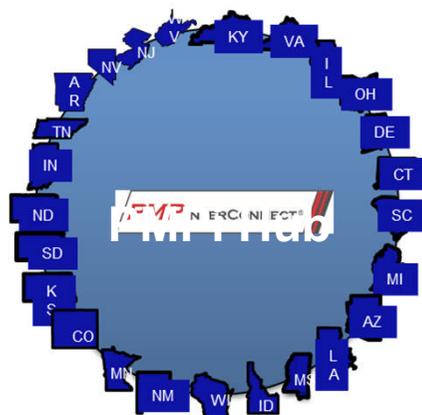
## Overview:

- ▣ Starting 4/22/16, the Vermont Prescription Monitoring System (VPMS) will have access to interstate data sharing via the PMPi Hub to allow prescriber login access to multi-state prescription data
- ▣ The PMPi Hub also allows authorized hospitals and practices to connect their Electronic Medical Record (EMR) directly to the PMP “Gateway”
- ▣ The Health Department hopes to work with The University of Vermont Medical Center to pilot this effort here

\* PMP = Prescription Monitoring Program

# EMR Access to Prescription History

Some of the EMR vendors successfully connecting to PMP Gateway in other States



## PMPi Hub

28 States currently connected to the PMPi Hub

5 States in queue, including NY, MA, ME

45 Hospitals connected to PMP Gateway with approximately

100 in queue



# EMR Access to Prescription History

## How it works:

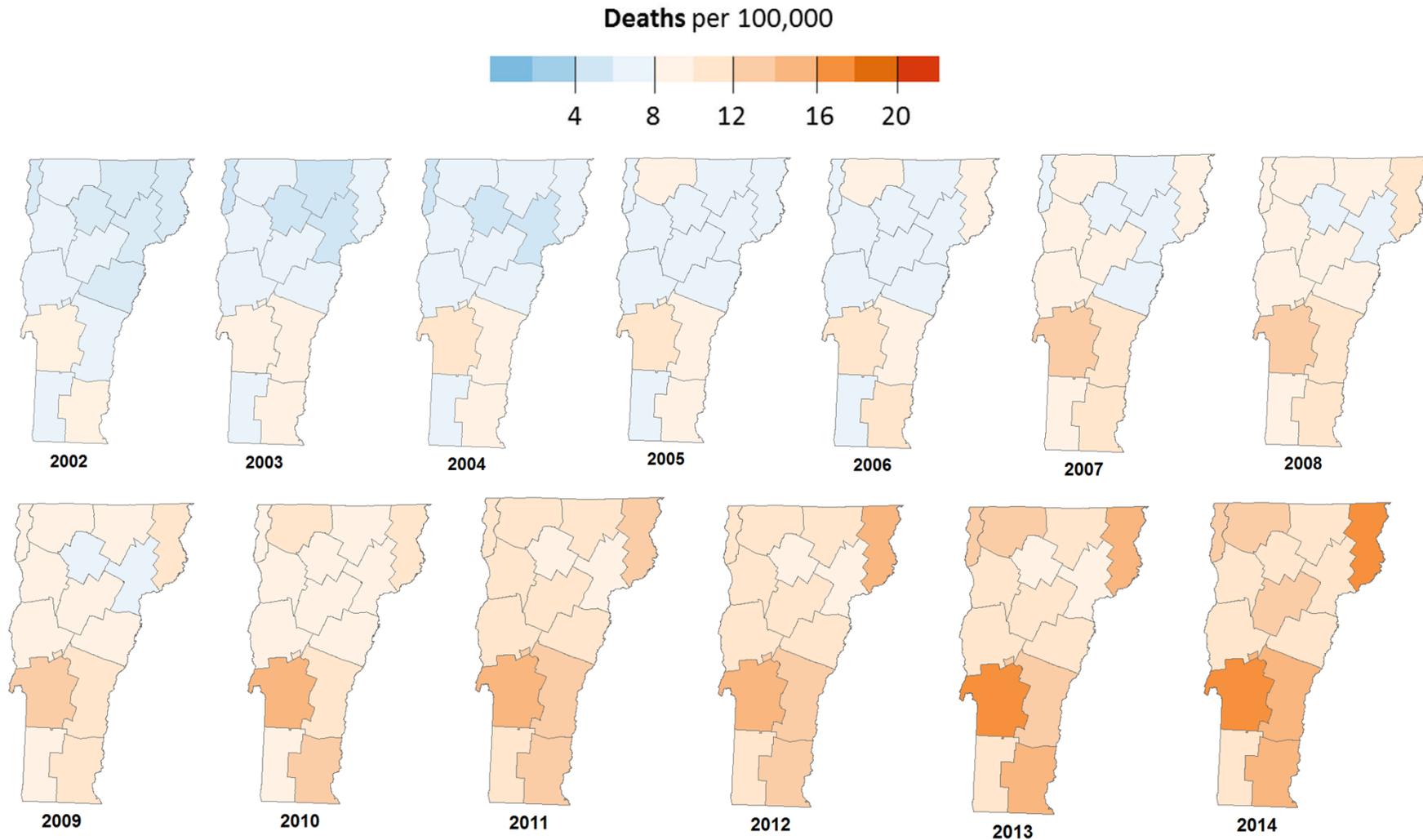
- ▣ The PMP Gateway is an interface that allows EMRs to query and receive patient prescription history data directly from a patient's medical record
- ▣ The authorized Medical Professional does not need to login to a second system or search through patient records
- ▣ Patient prescriptions from multiple systems in multiple states are live within Gateway
- ▣ Hospitals would be licensed to use Gateway via a licensee agreement

- **VDH Received a four-year CDC grant of \$940,000/year for prescription drug overdose prevention**
  - VPMS enhancements to make the system more useful to users by highlighting patient use patterns and identifying outliers
  - Provide prescribing best practice technical assistance and quality improvement processes to PCPs through Blueprint practice facilitators and of outlier specialty providers by UVM Office of Primary Care
  - Improve VPMS data dissemination and linkages to other epidemiological data
  - Identify use patterns of opioid users through an ethnographic evaluation

# Vermont Drug Poisoning Deaths by County

(All Drug Poisoning Deaths)

Source: Centers for Disease Control and Prevention, Drug Poisoning Mortality: United States, 2002-2014



Vermont's 2014 age adjusted rate of drug poisoning deaths is the same as the U.S. average at approximately 14.7 per 100,000 Vermonters.

- This report and more information can be found on the VPMS website:  
<http://www.healthvermont.gov/adap/VPMS.aspx>
  
- Contacts
  - ▣ VPMS Manager (as of 4/4/16):  
[Hannah.Hauser@vermont.gov](mailto:Hannah.Hauser@vermont.gov)  
(802) 652-4147
  
  - ▣ This presentation:  
[Anne.VanDonsel@vermont.gov](mailto:Anne.VanDonsel@vermont.gov)  
(802) 652-4142
  
  - ▣ Data-related questions:  
[David.Horton@vermont.gov](mailto:David.Horton@vermont.gov)  
(802) 863-6354