An Update on the Kentucky All Schedule Prescription Electronic Reporting System (KASPER)

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Disclosure

- David R. Hopkins
 - No relevant financial relationships.
 - No conflicts of interest.



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- Controlled Substance Abuse and Pill Mills
- The KASPER Program
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KASPER

KASPER is Kentucky's Prescription Monitoring Program (PMP). KASPER tracks Schedule II – V controlled substance prescriptions dispensed within the state as reported by pharmacies and other dispensers.

Enhanced KASPER (eKASPER) is the real-time web accessed database that provides a tool to help address the misuse, abuse and diversion of controlled pharmaceutical substances.



Controlled Substance Abuse and Pill Mills



Misuse, Abuse, Diversion

Misuse:

 When a schedule II – V substance is taken by an individual for a non-medical reason.

Abuse:

When an individual repeatedly takes a schedule
 II – V substance for a non-medical reason.

Diversion:

 When a schedule II – V substance is acquired and/or taken by an individual for whom the medication was not prescribed.



A National Perspective

From 1992 to 2003 the 15.1 million Americans abusing controlled prescription drugs exceeded the combined number abusing:

- Cocaine (5.9 million),
- Hallucinogens (4.0 million),
- Inhalants (2.1 million), and
- Heroin (.3 million).

Source: *Under the Counter: The Diversion and Abuse of Controlled Prescription Drugs in the U.S.* Published by The National Center on Addiction and Substance Abuse at Columbia University (CASA), July 2005.



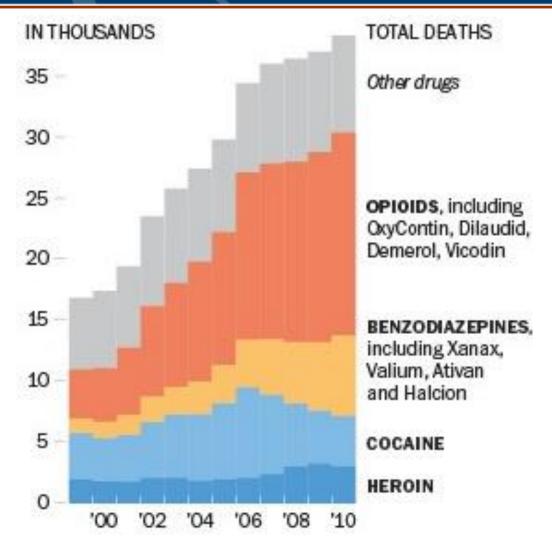
A National Perspective

- Opioid pain relievers involved in more than 15,000 deaths in the United States
- 1 in 20 people in the U.S. reported using prescription painkillers for nonmedical reasons in the last year
- Enough prescription painkillers were prescribed in 2010 to medicate every adult American around the clock for a month

Source: U.S. Centers for Disease Control and Prevention, Vitalsigns newsletter, November 2011.

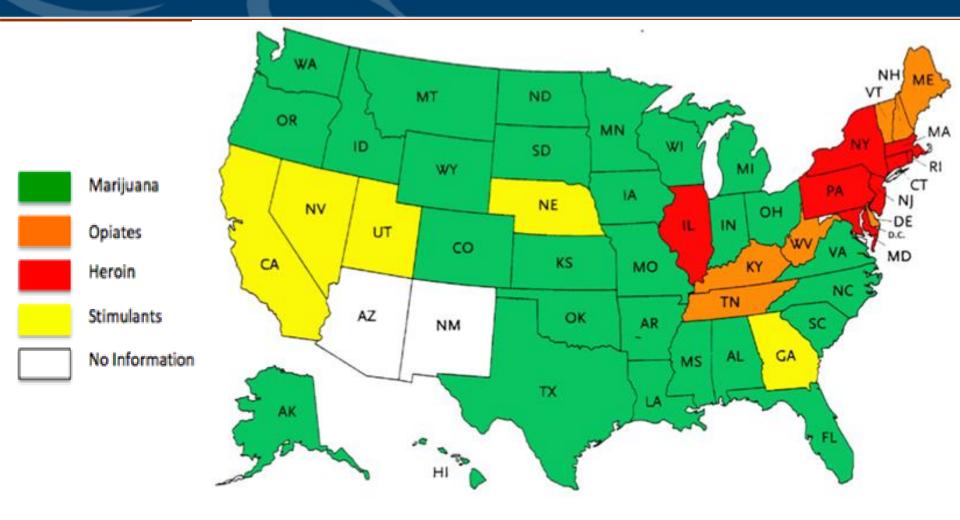


Drug Overdose Deaths



Source: Patterson Clark, Washington Post, Data from U.S. Centers for Disease Control

Most Common Drug Treatment Admissions by State



Laura Dimon, MIC Network, Inc., February 10, 2014. Image credit: Fiona Breslin.



Prescription Drug Abuse in Kentucky

- 4.5% of Kentuckians (ages 12+) used prescription pain relievers for nonmedical reasons in past year. (KY ranks 31st in the nation)
 - National average = 4.6%
 - Kentucky down from 6.6% (tied for 2nd) in 2009
- Kentucky prescription opioid pain reliever overdose death rate is 17.9 per 100,000 of population (KY ranks sixth in the nation)
 - National average is 11.9 per 100,000 of population

Source: Data from the 2007 through 2011 National Surveys on Drug Use and Health, published by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Behavioral Statistics and Quality.

Generation Rx

- 19% of teens report abusing prescription medications to get high.
- 40% of teens agree that prescription medicines, even if not prescribed by a doctor, are safer than illegal drugs.
- 29% of teens believe prescription pain relievers are not addictive.
- 62% of teens say prescription pain relievers are easy to get from parents' medicine cabinets

Source: 2005 Partnership Attitude Tracking Study on Teen Drug Abuse, The Partnership for a Drug-Free America, May 16, 2006.

"Pharm Parties"

- Short for pharmaceutical party, often attended by teens and young adults.
- Bowls and baggies of random prescription drugs called "trail mix".
- Collecting pills from the family medicine cabinet called "pharming".
- Internet chat rooms are used to share "recipes" for getting high with prescription drugs.

Reported by Donna Leinwand, USA Today, June 13, 2006



Hydrocodone

- DEA believes hydrocodone the most abused prescription drug in the U.S.¹
 - Usage increased 400% in last 10 years
 - Hydrocodone attributed ER visits increased 500% in last 10 years
- The U.S. has approximately 4.6% of the world's population and consumes 99% of all the hydrocodone produced ²
- The "Cocktail": hydrocodone, Xanax and Soma
- 1. Source: www.drug-addiction.com, The Facts About Hydrocodone Addiction.
- 2. Source: 2008 Annual Report of the International Narcotics Control Board.



Hydrocodone



Photo from Broadband DSLReports.com Cabinet for Health and Family Services

Kitson Clothing Collection



Story: WXIX Fox 19 Digital Media Staff, June 21, 2013

Oxycodone

- Street names: OC, Oxies, Roxies, Oxycotton, Hillbilly Heroin, Blue
- Highly addictive opioid
- OxyContin, Percodan, Percocet
- > 79,000,000 doses dispensed in KY in 2011
- The U.S. consumes 83% of all the oxycodone produced ¹

1. Source: 2008 Annual Report of the International Narcotics Control Board.



"Study Drugs": Adderall & Ritalin

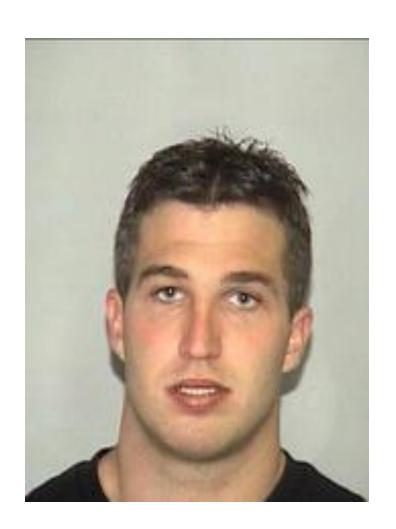
- Highly addictive amphetamine based stimulants used to treat ADHD
 - 2 4% of college students on ADHD medication (1)
 - An estimated 5 10% of youth are misusing or abusing ADHD medications (2)
- As many as 20% of college students have use Adderall and Ritalin to study, write papers and take exams (1)
 - Most obtained from fellow students
 - Pill prices increase during exam time
 - (1) Source: Adderall Used for Recreation and Study on UMass Campus, Michelle Williams, The Massachusetts Collegian, December 7, 2010.
 - (2) Source: Dr. Timothy Wilens, Center of Addiction Medicine, Massachusetts General Hospital, August 15, 2012.

Fentanyl

- Synthetic opioid delivered via transdermal patch or lozenge ¹ (fentanyl lollipops - Actiq)
 - 50 to 100 percent more potent than morphine
- Patches stolen from nursing home patients
- Methods of abuse:¹
 - Applying multiple patches to the body at one time
 - Eating or sucking on a patch
 - Extracting the drug from a patch, mixing it with an alcohol solution, and injecting it with a hypodermic needle

^{1.} Source: www.drug-addiction.com, Abuse of High-Potency Fentanyl Skin Patches Linked to Hundreds of Deaths.

Jeff and Chris George





Photos from Palm Beach Post Cabinet for Health and Family Services



Dr. Paul H. Volkman



Story: Bill Estep, Lexington Herald-Leader, February 14, 2012. AP Photo released by U.S. Marshals Service (undated)

Care More Pain Management Clinic



Photo: Scott Utterback, Louisville Courier-Journal, January 25, 2012

Care More Pain Management Clinic

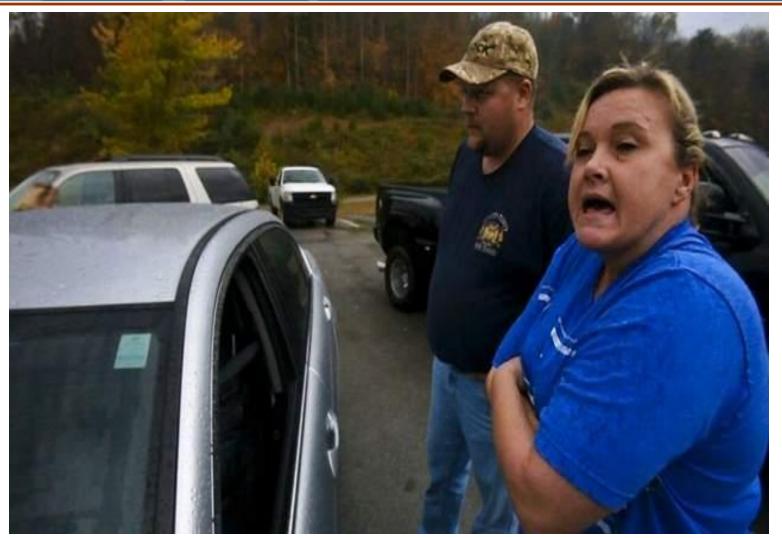


Photo: Scott Utterback, Louisville Courier-Journal, January 25, 2012

Ernest William Singleton



Photo: Lexington Community Corrections, January 2013

Celebrities







Photos from The Internet Movie Database



Stevie Nicks



Photo from starpulse.com



Heather Locklear

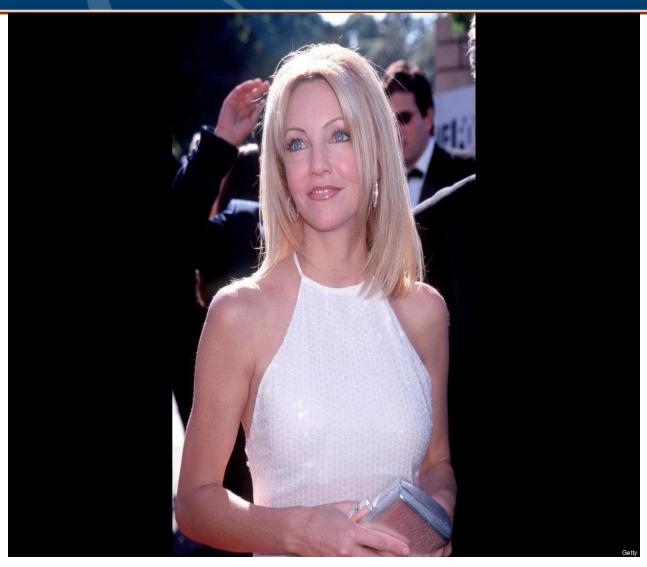


Photo from Huffpost Celebrity on Moviefone Cabinet for Health and Family Services

Sarah McKinley



AP Photo



Tasha Parsons/Devin Parsons





Source: Decatur County Jail



Erica Hughes



Photo by Pam Spaulding, The Louisville Courier-Journal, November 30, 2009

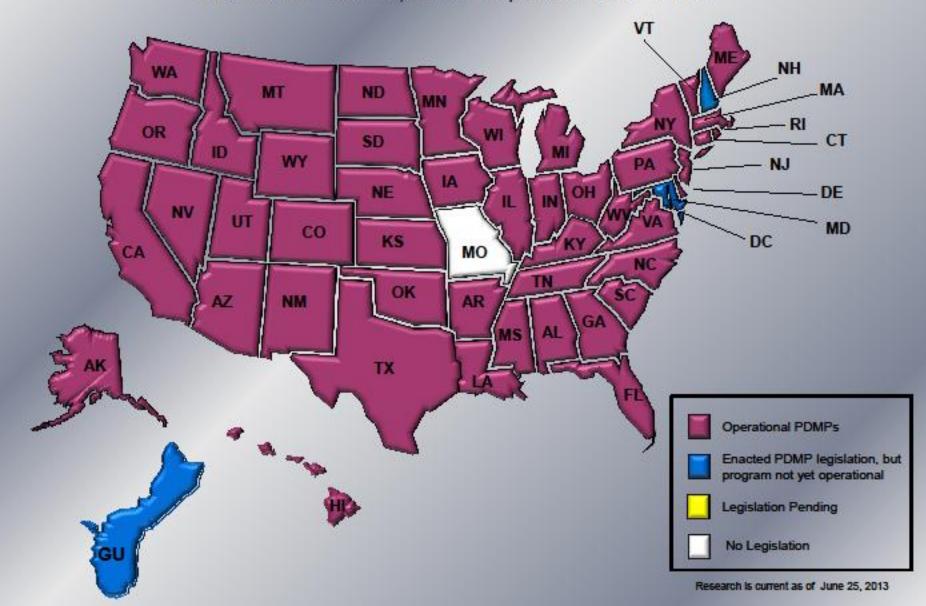
The KASPER Program

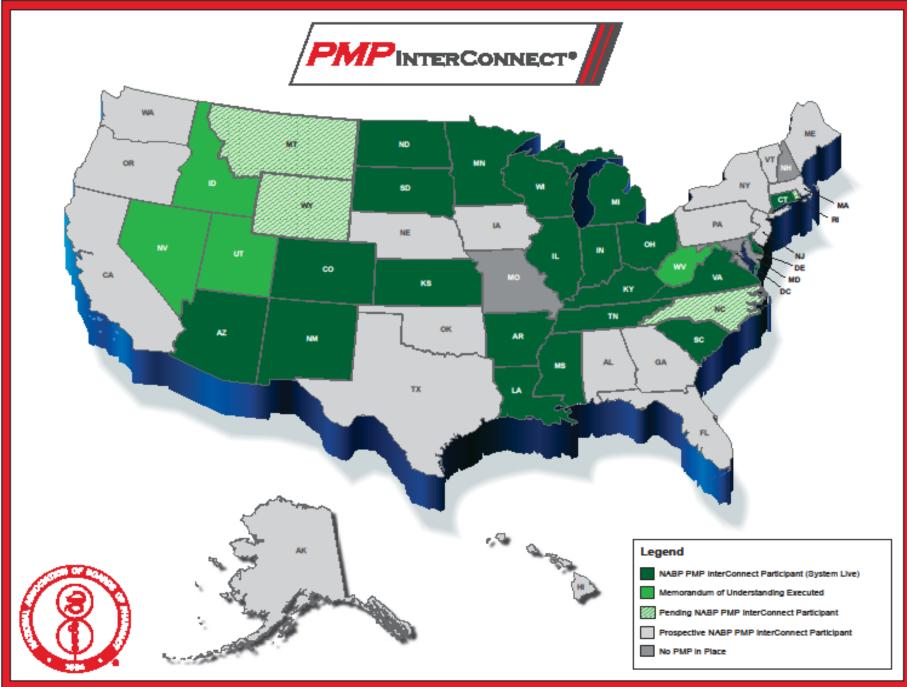


PDMP Training & Technical Assistance Center

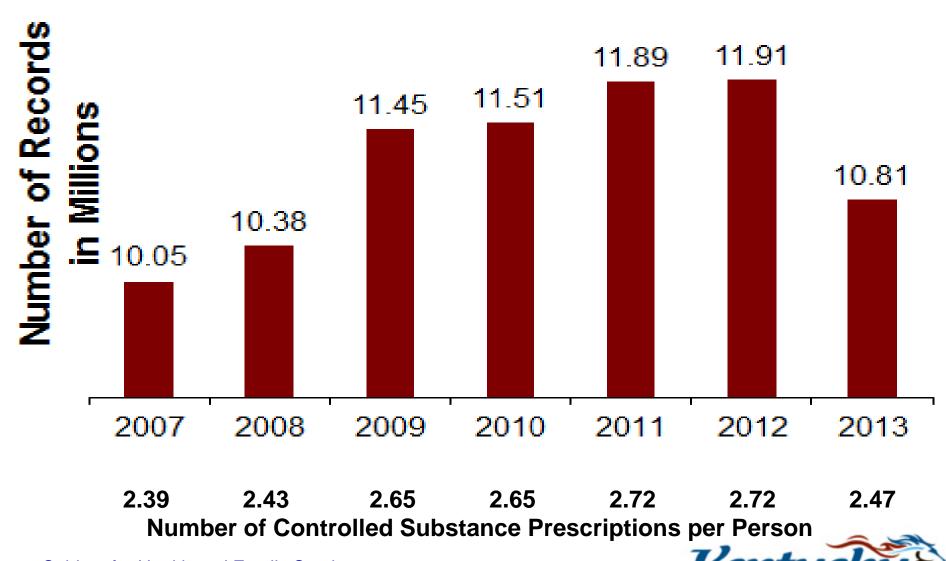
Status of Prescription Drug Monitoring Programs (PDMPs)

* To view PDMP Contact information, hover the mouse pointer over the state abbreviation

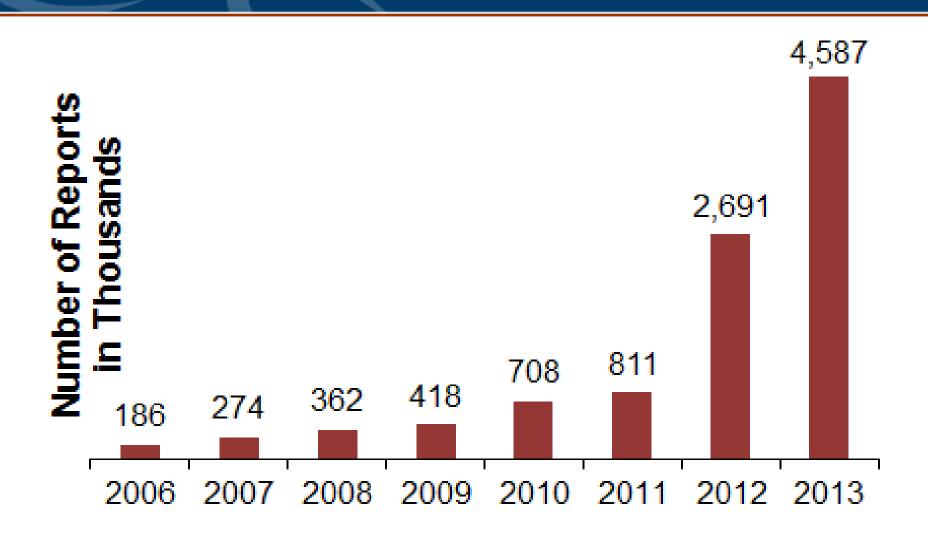




Annual KASPER Records Total / Per Person

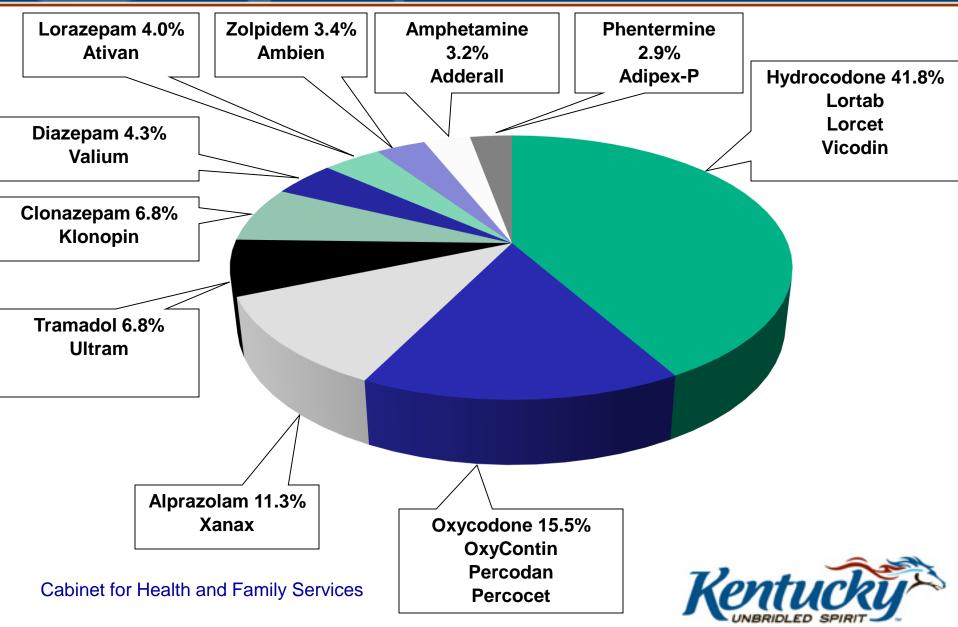


KASPER Reports Requested





Top Prescribed Controlled Substances by Therapeutic Category by Doses - 2013



KASPER Stakeholders

- Licensing Boards to investigate potential inappropriate prescribing by a licensee.
- Practitioners and Pharmacists to review a current patient's controlled substance prescription history for medical or pharmaceutical treatment.
- Law Enforcement Officers, OIG employees,
 Commonwealth's attorneys, county attorneys to review an individual's controlled substance prescription history as part of a bona fide drug investigation or drug prosecution.
- Medicaid to screen members for potential abuse of pharmacy benefits and to determine "lock-in"; to screen providers for adherence to prescribing guidelines for Medicaid patients.
- A judge or probation or parole officer to help ensure adherence to drug diversion or probation program guidelines.
- Medical Examiners engaged in a death investigation



Legislative Changes Affecting Provider Use of eKASPER



eKASPER Reporting KRS 218A.202

 Controlled substance administration or dispensing must be reported within one day effective July 1, 2013



eKASPER Accounts – KRS 218A.202

 eKASPER registration is mandatory for Kentucky practitioners or pharmacists authorized to prescribe or dispense controlled substances to humans.



eKASPER Prescriber Usage - KRS 218A.172

- Query eKASPER for previous 12 months of data:
 - Prior to initial prescribing or dispensing of a Schedule II controlled substance, or a Schedule III controlled substance containing hydrocodone
 - No less than every three months
 - Review data before issuing a new prescription or refills for a Schedule II controlled substance or a Schedule III controlled substance containing hydrocodone
- Additional rules/exceptions included in licensure board regulations

Administrative Regulation - 201 KAR 8:540

Section 4.

Dentists shall review an eKASPER report prior to the initial prescribing of any controlled substance.



KASPER Query Exceptions - 201 KAR 8:540

 You do not need to query eKASPER when prescribing of a 3 day supply (or less) of a Schedule III controlled substance or the following Schedule IV controlled substances following performance of oral surgery:

Ambien Soma

Anorexics Stadol

Ativan Stadol NS

Klonopin Tramadol

Librium Valium

Nubain Versed

Oxazepam Xanax

Phentermine



KASPER Query Exceptions - 201 KAR 8:540

 You do not need to query eKASPER when prescribing any Schedule V controlled substance or a Schedule IV controlled substance that is **not** in the following list:

Ambien Soma

Anorexics Stadol

Ativan Stadol NS

Klonopin Tramadol

Librium Valium

Nubain Versed

Oxazepam Xanax

Phentermine



KASPER Query Exceptions – 201 KAR 8:540

 You do not need to query eKASPER when prescribing pre-appointment anxiety medication up to a 2 day supply with no refills.



KASPER Delegate Accounts – KRS 218A.202

- eKASPER delegate accounts allowed for:
 - An employee of the practitioner's or pharmacist's practice acting under the specific direction of the practitioner or pharmacist



eKASPER Delegate Account Request

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KASPER Prescriber Reports – KRS 218A.202

- CS prescribers can obtain an eKASPER report on themselves:
 - To review and assess the individual prescribing patterns
 - To determine the accuracy and completeness of information contained in eKASPER
 - To identify fraudulent prescriptions



eKASPER Prescriber Report Request

Account Maintenance

Delegate Administration

Home Page

Account Maintenance

Master Account Information

First Name	e Last Name	Login Name	Phone	Status	View Delegate Details	View Details
TESTEDITE	PRESCRIBER	TESTEDITED.PRESCRIBER	(502) 564-2703	Active		Select

Delegate Account Information

First Name	Last Name	Login Name	Status	View Details
DELFOR	NEWFACILITY	DELFOR.NEWFACILITY	Active	Select
SHARED	DELL	SHARED.DELL	Active	Select
SHARED	BYBOTH	SHARED.BYBOTH	Active	Select

Prescribing Report Request

NOTE: Please call the business office at (502) 564-2815 for a report on any other DEA numbers

Report Details (Date in mm/dd/yyyy format)

Report for Prescriber DEA #: BB

From Date * 01/09/2013

View Report

To Date *

02/08/2013



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Providing Reports to Patients – KRS 218A.202

- eKASPER reports can be shared with the patient or person authorized to act on the patient's behalf
- eKASPER reports can be placed in the patient's medical record, with the report then being deemed a medical record subject to disclosure on the same terms and conditions as an ordinary medical record

KASPER Error Correction - 902 KAR 55:110

- Patient or provider should contact the dispenser to correct records in error
- Inaccurate eKASPER reports due to system errors should be reported to the Drug Enforcement and Professional Practices Branch
 - -502-564-7985



Provider Shopping and Diversion



Provider Shopping

Provider shopping is when controlled substances are acquired by deception.

Acts related to attempting to obtain a controlled substance, a prescription for a controlled substance or administration of a controlled substance, prohibited under KRS 218A.140 include:

- Knowingly misrepresenting or withholding information from a practitioner.
- Providing a false name or address.
- Knowingly making a false statement.
- Falsely representing to be authorized to obtain controlled substances.
- Presenting a prescription that was obtained in violation of the above.
- Affixing a false or forged label to a controlled substance receptacle.



Typical Provider Shopping Behaviors

Patient Behaviors	Examples
Multiple providers of the same type	3 or more general practitioners, dentists, etc.
Dispensers and prescribers are in different localities from each other and the patient's home address	Patient lives in Fayette county; prescriber in Franklin county; dispenser in Jessamine county
Overlapping prescriptions of the same drug from different prescriber types	Oxycodone scripts from dentist, family physician, and pain management doctor within 30 days
Excessive emergency room visits for non-emergency issues	3 or more emergency room visits in a month for chronic pain conditions
Requesting replacement for lost medications regularly	Patient states that controlled substance is lost and requests new prescription
Requesting early refills	Patient requests early refills due to extended out- of-state trip
Pressuring prescribers to prescribe specific controlled substances for the patient's family members	Parent requests the pediatrician prescribe a specific controlled substance for their child stating that it is the only medication that works



Typical Provider Shopping Behaviors (Cont.)

Patient Behaviors	Examples
Using multiple names, social security numbers, addresses, etc.	Patient fills three scripts under three different names
Seeking referrals to multiple pain management clinics	Patient requests referrals to pain management clinics without a specific diagnosis
Associating with others known to be pharmaceutical controlled substance provider shopping	Patient travels to clinic with another patient exhibiting shopping behavior and requests similar prescription
Self-mutilation	Patient presents with potential self-inflicted wound
Cash transactions	Patient prefers to pay cash when insurance available
Requesting partial dispensing of controlled substance script	Patient requests half of the script and returns for the rest within 72 hours
After-hour, weekend and holiday calls for prescriptions	Patient calls prescriber at midnight on Friday to request a controlled substance script



Michael Osswald



Photo: Louisville Metro Police Department, December, 2012

Cabinet for Health and Family Services

Substance Use Disorder

Substance use disorder is an illness that sometimes drives a patient to perform activities that are illegal.

It is important to remember that the patient who is provider shopping may have an underlying illness that can be diagnosed and treated.



Practitioner Judgment

Practitioners must use their best professional judgment to determine:

- when they can intervene with a provider shopping patient and provide treatment or refer them to treatment
- when they need to contact law enforcement to report a provider shopper

Kentucky Board of Dentistry Guidance (KASPER FAQs)

Speak to the patient in private. Explain to them that you have concerns about their health and welfare as a result of the information that was generated on the KASPER. You have the right to refuse to prescribe them a controlled substance. You can also contact the local law enforcement agency if you feel the need to do so.

Diversion

Diversion involves illegal transfer of controlled substances to an individual other than for whom they were prescribed.



Diversion

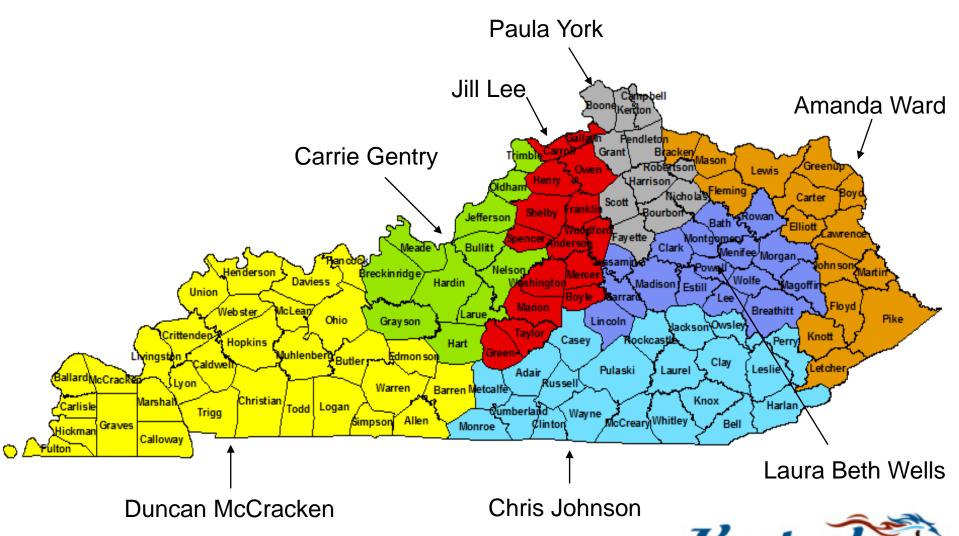
What do you do when diversion is suspected?

- If you suspect an individual is involved in diverting controlled substances, we ask that you please report them to the proper law enforcement authorities.
- If unsure who to contact please call the Drug Enforcement and Professional Practices Branch of the Office of the Inspector General for assistance.
 - -(502)564-7985



Drug Enforcement and Professional Practices Branch

DEPPB Phone Number: 502-564-7985



Cabinet for Health and Family Services

Reporting Provider Shoppers/Diverters

- KRS 218A.280 Controlled substances Communications with practitioner not privileged.
 - Information communicated to a practitioner in an effort unlawfully to procure a controlled substance, or unlawfully to procure the administration of any controlled substance, shall not be deemed a privileged communication.



Reporting Provider Shoppers/Diverters

 902 KAR 55:110 Section 10 (4) (b): In addition to the purposes authorized under KRS 218A.202(8)(e), and pursuant to KRS 218A.205(2)(a) and (6), a practitioner or pharmacist who obtains KASPER data or a report under KRS 218A.202(6)(e)1. or who in good faith believes that any person, including a patient, has violated the law in attempting to obtain a prescription for a controlled substance, may report suspected improper or illegal use of a controlled substance to law enforcement or the appropriate licensing board.



House Bill 1 Preliminary Results and Evaluation



Controlled Substance Dispensing – One Year Comparison

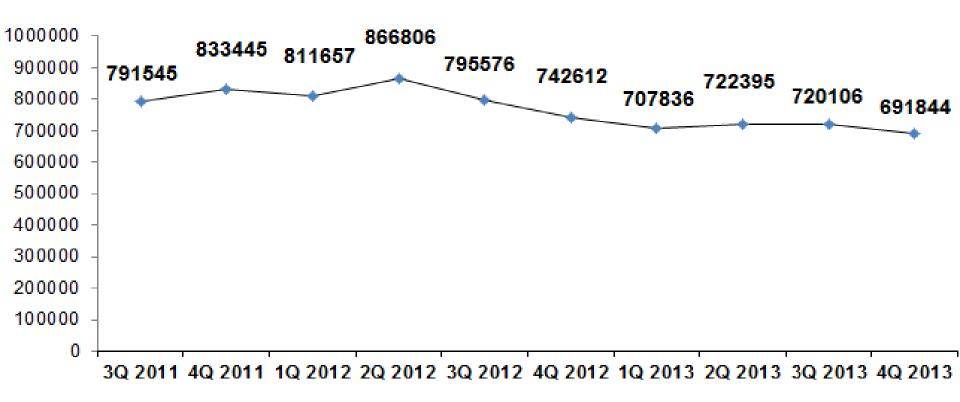
Drug	August 2011 through July 2012	August 2012 through July 2013	Change
Hydrocodone	239,037,354	214,349,392	-10.3%
Oxycodone	87,090,503	77,022,586	-11.6%
Oxymorphone	1,753,231	1,138,817	- 35.0%
Alprazolam	71,669,411	62,088,568	-13.4%
Methylphenidate	10,659,840	11,454,025	+ 7.5%
Amphetamine	13,795,147	15,065,833	+ 9.2%
All Controlled Substances	739,263,679	676,303,581	-8.5%

Figures shown in doses dispensed



Hydrocodone

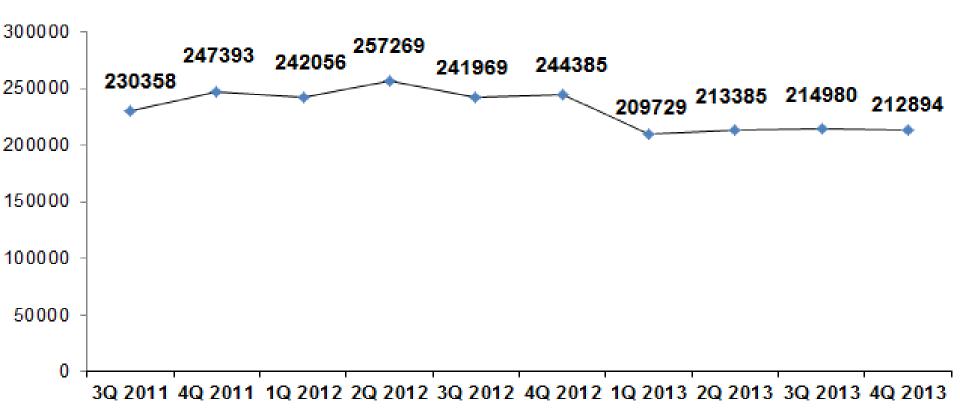
Hydrocodone Prescriptions by Quarter as Reported to KASPER





Oxycodone

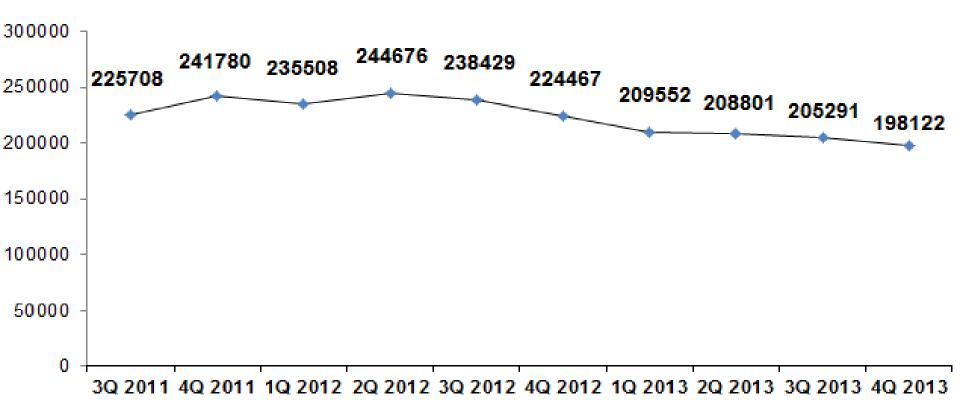
Oxycodone Prescriptions by Quarter as Reported to KASPER





Alprazolam

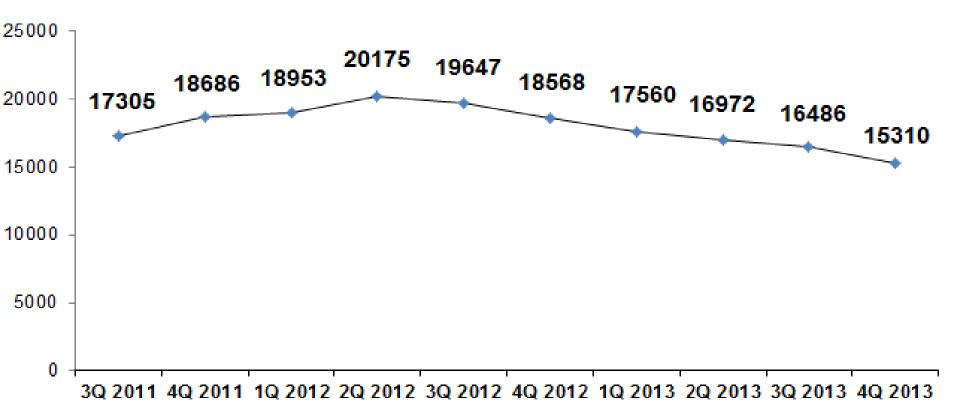
Alprazolam Prescriptions by Quarter as Reported to KASPER





Methadone

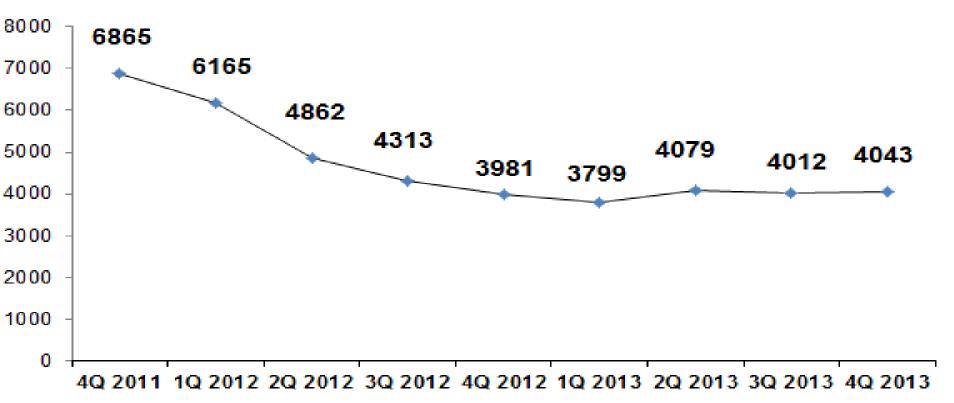
Methadone Prescriptions by Quarter as Reported to KASPER





Oxymorphone

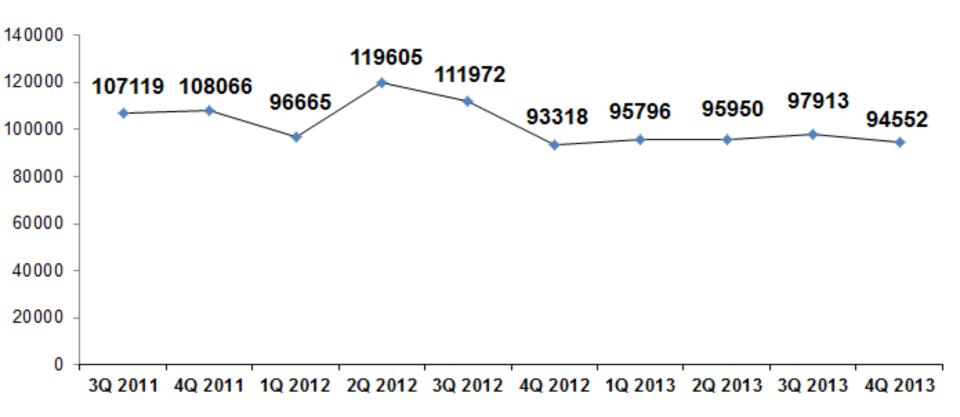
Oxymorphone Prescriptions by Quarter as Reported to KASPER





Tramadol

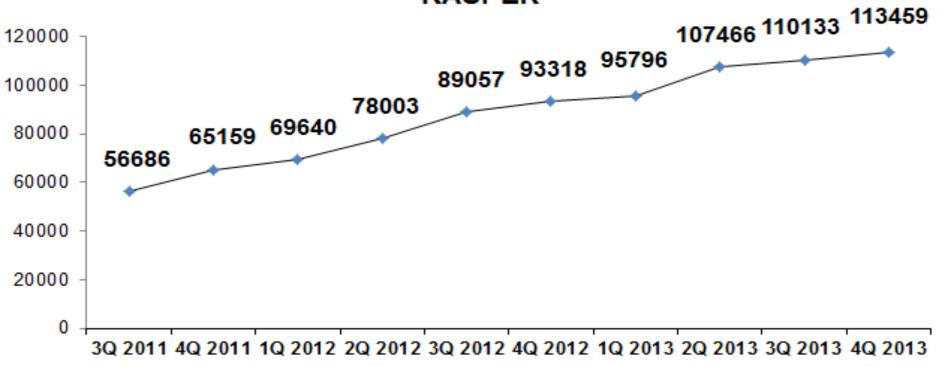
Tramadol Prescriptions by Quarter as Reported to KASPER





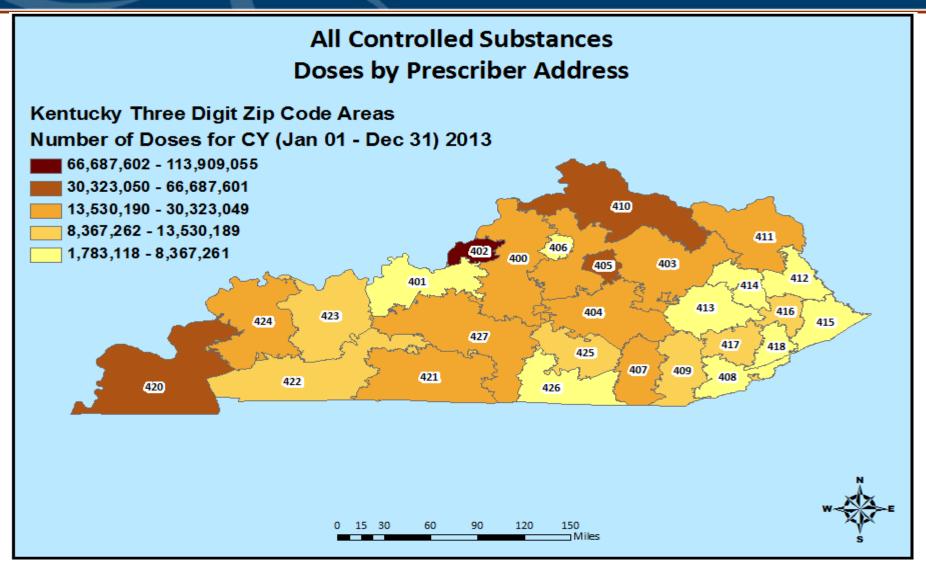
Buprenorphine

Buprenorphine Prescriptions by Quarter as Reported to KASPER



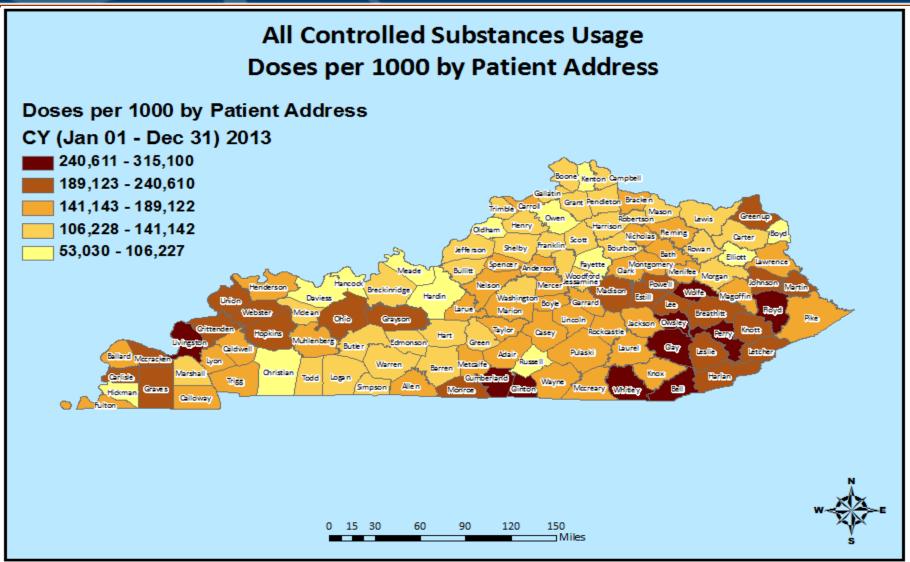


Controlled Substance Prescribing 2013





Controlled Substance Usage 2013





House Bill 1 Impact Study

- Comprehensive assessment of HB1's impact on patients, prescribers, and other stakeholders
- Overall goals:
 - Evaluate the impact of HB1 on reducing prescription drug abuse and diversion in Kentucky
 - Identify unintended consequences associated with implementation of HB1 that impact patients, providers and citizens of the Commonwealth
 - Develop recommendations to improve effectiveness of HB1 and mitigate identified unintended consequences
- Final study report planned for July 2014



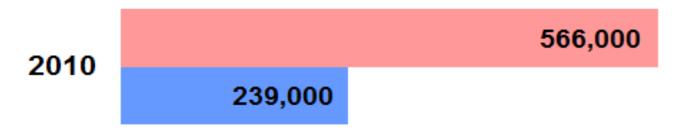
Philip Seymour Hoffman



US Weekly Celebrity News, February 3, 2014

Heroin vs. OxyContin

Source: National Survey on Drug Use and Health





OxyContin users (for nonmedical reasons)





QUESTIONS?

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