



Use Technology, Not Mandates, To Address Doctor Shopping and Opioid Diversion



Texas, and the nation as a whole, is suffering from a very real and debilitating crisis caused by the misuse of opioid pain medicines. The solution to this crisis, however, lies not in imposing sweeping mandates that impose new burdens on physicians and patients, as the Texas Sunset Commission proposes. Texas physicians, other prescribers, and pharmacies recommend instead that the Legislature turn to the new and evolving technology of the revamped Prescription Drug Monitoring Program (PDMP) and its abilities accomplish a number of important data tasks.

Within the Sunset Commission’s recommendations for all the health licensing boards, a common theme for dealing with opioid misuse has been to mandate that prescribers check the PDMP before prescribing any controlled medication. Sunset did recognize the special need NOT to discourage or inconvenience appropriate pain management for patients suffering through cancer treatment and those dealing with pain management in end-of-life care. An equally compelling cases can be made for emergency patients, patients undergoing surgery, etc.



Physicians Caring for Texans

WE RECOMMEND

Participate

- Require all prescribers and pharmacists to register with the PDMP coinciding with the issuance or renewal of their professional license.
- Require all prescriber licensing boards to furnish the necessary information to the Texas Pharmacy Board so it can automatically enroll prescribers in the PDMP.

Alert

- Give the Pharmacy Board explicit authority to push out notifications to physicians and pharmacies when there is evidence of “doctor shopping” or diversion. An email alert to prescribers and pharmacies involved in a suspected doctor shopping incident puts those practitioners on notice. Push-out notifications also would be shared with appropriate licensing boards. Privacy and procedural issues make statutory authorization for this authority both compelling and necessary.

(continued)

SUPPORTED BY:

Texas Medical Association • Texas Radiological Society • Texas College of Emergency Physicians • Texas Society of Pathologists
Texas Orthopaedic Associations • Texas Academy of Family Physicians • Texas Pain Society • Texas Pediatric Society
Texas Osteopathic Medical Association • Texas Association of Obstetricians & Gynecologists • Texas Society of Psychiatric Physicians

Expand

- Incrementally improve pharmacies’ reporting time from the current six-day lag to no more than one business day.
- Provide Automation of Reports and Consolidated Orders System (ARCOS) data to the Board of Pharmacy as a further data point to compare, geographically, delivery and dispensing data. ARCOS is the DEA’s wholesaler drug delivery tracking system.

Collaborate

- Require all prescriber licensing boards to develop and make available on their websites appropriate opioid prescribing guidelines for their licensees.

Report

- Require the Texas Pharmacy Board to report in January 2019 on the operational improvements to the PDMP, growth in prescriber registration and use, and a summary of push-out notifications.
- Require prescriber licensing boards to report in January 2019 a summary of disciplinary actions taken against licensees as a result of information and analysis provided by the PDMP.

DATA POINTS

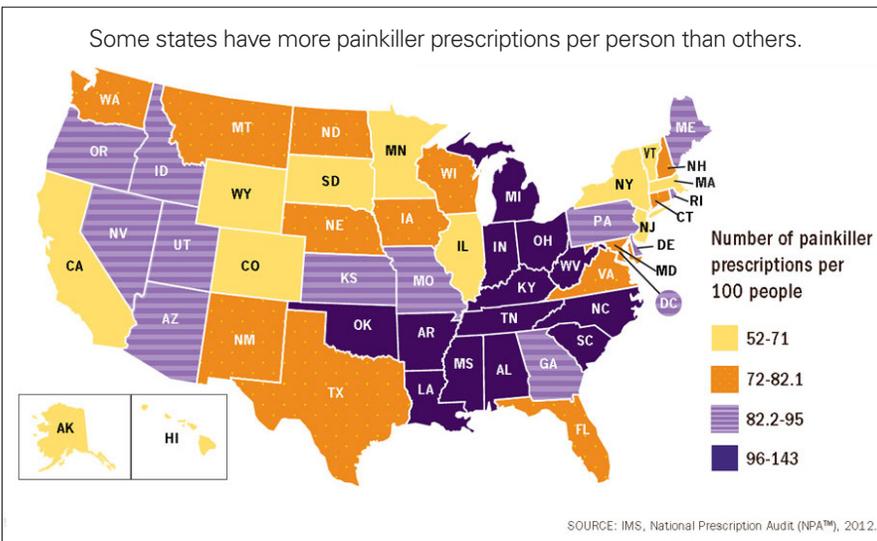
Prescribing rates for opioids vary by almost threefold across different states. Health issues that cause people pain do not vary much from place to place and do not explain this variability in prescribing.¹

In 2012²

- Prescribing rates in Texas for both opioid pain relievers and benzodiazepine sedatives fell 10 percent and 21 percent, respectively, below the national average.
- Texas ranked lowest in the nation in rates of prescribing high-dose opioid pain relievers.
- Texas ranked lowest in the nation in rates of prescribing long-acting/extended release opioid pain relievers.

From 2013 to 2015 opioid prescriptions per-capita in Texas fell faster than in 48 other states.³

From 2013 to 2014, the number of filled prescriptions for opioids in Texas fell by 3.3 percent.⁴



- 1 Centers for Disease Control and Prevention, Injury Prevention & Control: Opioid Overdose, Dec. 20, 2016 www.cdc.gov/drugoverdose/data/prescribing.html
- 2 Centers for Disease Control and Prevention. Vital Signs: Variation Among States in Prescribing of Opioid Pain Relievers and Benzodiazepines — United States, 2012. *MMWR* 2014; 63(26):563-568. www.cdc.gov/mmwr/preview/mmwrhtml/mm6326a2.htm?_cid=mm6326a2_w
- 3 www.nytimes.com/2016/05/21/health/opioid-prescriptions-drop-for-first-time-in-two-decades.html?_r=1
- 4 IMS Health, 2015



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