

**PRESCRIPTION DRUG MONITORING PROGRAMS: A BRIEF OVERVIEW**  
**NATIONAL ALLIANCE FOR MODEL STATE DRUG LAWS (NAMSDL)**  
**AUGUST 2009**

- **TOOL:** Prescription Drug Monitoring Programs are a major tool being used by states to address prescription drug abuse, addiction and diversion. Such programs are commonly referred to as PDMPs or PMPs.
- **DESCRIPTION:** A PDMP is a statewide electronic database which collects designated data on substances dispensed in the state. The PDMP is housed by a specified statewide regulatory, administrative or law enforcement agency. The housing agency distributes data from the database to individuals who are authorized under state law to receive the information for purposes of their profession.
- **GOALS/OBJECTIVES:** A PDMP may serve multiple purposes. These include: (1) to support access to legitimate medical use of controlled substances, (2) to help identify and deter or prevent drug abuse and diversion, (3) to facilitate and encourage the identification, intervention with and treatment of persons addicted to prescription drugs, (4) to help inform public health initiatives through outlining of use and abuse trends and (5) to help educate individuals about PDMPs and the use, abuse and diversion of and addiction to prescription drugs.
- **STATES WITH PDMP LAWS:** There are currently **40 states with laws** that authorize the establishment and operation of a PDMP: Alabama, Alaska, Arizona, California, Colorado, Connecticut, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Nevada, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wyoming.
- **OPERATIONAL:** Of those 40 states, **33 are currently operational**. Thirty-three states are collecting data and distributing data to one or more authorized users of the data. For fiscal reasons, Washington state officials have temporarily suspended the operations of the state's PDMP.

States with operational PDMPs: Alabama, Arizona, California, Colorado, Connecticut, Hawaii, Idaho, Illinois, Indiana, Iowa, Kentucky, Louisiana, Maine, Massachusetts, Michigan, Mississippi, Nevada, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, West Virginia, Wyoming.

- **HOUSING ENTITIES:** State PDMPs are housed in (1) a health or human services department, single state authority on drugs and alcohol or board of pharmacy, (2) a law enforcement agency, (3) a professional licensing agency or (4) a consumer protection agency.

Of the 40 state PDMP laws, approximately 75% authorize a state health or human services department, a single state authority on drugs and alcohol or a board of pharmacy to establish and develop a prescription monitoring system. A state health or human services department often delegates the operational responsibility for the PDMP to an underlying pharmacy board or unit or a single state authority on drugs and alcohol.

Two noted exceptions to the themes above are New York and Nevada. The Bureau of Narcotic Enforcement within the state Department of Health operates the state PDMP. Nevada's law mandated that the Board of Pharmacy and the Investigation Division of the Department of Public Safety cooperatively establish the state's PDMP. The Board of Pharmacy bears significant responsibility for administration of the system.

#### Breakdown of Housing Entities

- 30 – **Health Departments, Single State Authority or Boards of Pharmacy:**  
Alabama, Alaska, Arizona, Colorado, Florida, Idaho, Illinois, Iowa, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Mississippi, New Mexico, New York, North Carolina, North Dakota, Ohio, Oregon, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, Washington, West Virginia, Wyoming
- 6 - **Law Enforcement Agencies:**  
California, Hawaii, New Jersey, Oklahoma, Pennsylvania, Texas
- 1 - **Board of Pharmacy and Investigation Division of the Department of Public Safety:**  
Nevada
- 2- **Professional Licensing:**  
Indiana, Utah

PLEASE NOTE: Indiana's legislation requires that the state controlled substances advisory committee establish a PDMP. The Indiana Professional Licensing Agency, as the entity that provides staff and facilities for the committee, houses the state PDMP.

1- Consumer Protection:  
Connecticut

- **SUBSTANCES MONITORED:** State PDMPs monitor designated schedules of controlled substances. The specific schedules allowed to be monitored are identified in state law and regulation. Additionally, some state PDMPs are authorized to monitor noncontrolled or nonscheduled substances or drugs of concern.

**Thirty-six** states are permitted to monitor **Schedule II, III and IV** substances: Alabama, Alaska, Arizona, California, Colorado, Connecticut, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Michigan, Mississippi, Nevada, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wyoming.

PLEASE NOTE: Iowa's PDMP monitors Schedule III and IV substances that the advisory council and the Board of Pharmacy determine can be addictive or fatal if not taken under the proper care or direction of a prescribing practitioner.

**Twenty** states also have the authority to monitor **Schedule V** substances: Alabama, Alaska, Colorado, Connecticut, Illinois, Indiana, Kentucky, Louisiana, Michigan, Mississippi, New Jersey, New York, North Carolina, North Dakota, Ohio, Oklahoma, Tennessee, Texas, Utah, Washington.

PLEASE NOTE: Oklahoma's PDMP statute excludes from monitoring those Schedule V substances containing any detectable quantity of pseudoephedrine.

Tennessee's law authorizes the monitoring of Schedule V substances which have been identified by the controlled substances database advisory committee as demonstrating a potential for abuse.

**Nine** states are allowed to monitor **noncontrolled or nonscheduled substances**. Kansas and Louisiana PDMPs may monitor drugs of concern. Washington state's PDMP can monitor additional drugs identified by the Board of Pharmacy as demonstrating a potential for abuse.

Mississippi's PDMP may monitor specified noncontrolled substances authorized by the Board of Pharmacy. Idaho's Board of Pharmacy may by rule require the submission of data on prescriptions in addition to those for controlled substances. New Jersey's PDMP may include prescriptions for a drug that is not a controlled dangerous substance if the Director of the Division of Consumer Affairs adopts such a regulation.

North Dakota and Wyoming officials have permission to monitor noncontrolled or nonscheduled substances or drugs containing tramadol and carisoprodol. Ohio's PDMP has authority to monitor dangerous drugs the Board of Pharmacy includes in the database which currently are those drugs containing tramadol and carisoprodol.

- **AUTHORIZED REQUESTERS AND USERS OF DATA:** The categories of individuals often identified as authorized requesters and users of PDMP data include:
  1. Licensed physicians/practitioners with authority to prescribe substances
  2. Pharmacists with authority to dispense substances
  3. Designated federal, state and local law enforcement
  4. Representatives of professional or occupational licensing, certification or regulatory boards, commission or agencies
  5. Individuals whose receipt of prescriptions has been included in the PDMP database

States sometime add categories of authorized users of PDMP data as is appropriate for that jurisdiction. For example, states using an outside vendor to collect data will allow appropriate personnel of that vendor to access the PDMP data.

Another example is a state that uses an advisory group to work with the statewide entity housing and operating the PDMP. That state will permit advisory committee members to access the information. There are **eighteen** states that legislatively mandate the use of an **advisory committee or council, task force or working group** in the implementation and operation of a monitoring system. These jurisdictions are: Alabama, Arizona, Colorado, Connecticut, Florida, Illinois, Indiana, Iowa, Kansas, Louisiana, Massachusetts, Michigan, Minnesota, North Dakota, Oregon, Tennessee, Vermont and Virginia.

Some states mandate that a PDMP consult with other agencies or professionals without the formalized structure of a committee or council. For example, in Oklahoma, the PDMP officials must seek the counsel of several health boards and the veterinary medical association in developing criteria for exception reports (data indicating dispensation outside expected norms for a particular specialty or field of health care, for a particular location, or for a recipient).

Another example is Nevada. The state's PDMP must be administered by the Board of Pharmacy (Board), Investigation Division of the Department of Public Safety (Division), the Health Division of the Department of Health and Human Services, various practitioners, representatives of professional associations for

practitioners, representatives of occupational licensing boards and prosecuting attorneys selected by the Board and Division.

- **FAILURE TO ACCESS OR REQUIREMENTS TO ACCESS DATA**

Licensed prescribers are often encouraged to receive PDMP data to assist in the treatment of their patients. However, **sixteen** states' PDMP laws explicitly **impose no burden on practitioners to access the information**: Alabama, Alaska, Arizona, Florida, Idaho, Illinois, Indiana, Iowa, Kansas, Minnesota, North Dakota, Ohio, Oklahoma, Oregon, South Carolina and Wyoming.

The legislative language often provides immunity from civil liability for accessing or failing to access prescription data contained in the database. All but Iowa and Indiana statutes include dispensers within their immunity provisions.

Nevada, in contrast, mandates that in certain circumstances a practitioner must review PDMP data to assess whether a prescription is medically necessary. Specifically, Nev. Rev. Stat. §639.23507 states that:

“A practitioner shall, before he writes a prescription for a controlled substance listed in schedule II, III or IV for a patient, obtain a patient utilization report regarding the patient for the preceding 12 months from the computerized program established by the Board and the Investigation Division of the Department of Public Safety pursuant to NRS 453.1545 if the practitioner has a reasonable belief that the patient may be seeking the controlled substance, in whole or in part, for any reason other than the treatment of an existing medical condition and:

1. The patient is a new patient of the practitioner; or
2. The patient has not received any prescription for a controlled substance from the practitioner in the preceding 12 months.”

- **CONFIDENTIALITY & PRIVACY PROTECTIONS**

State PDMP laws often incorporate specific language designed to protect confidentiality and privacy rights related to PDMP data. Common statutory safeguards include:

1. Exempting PDMP data from public records or open records laws. Concomitantly, the law will state that the PDMP information is confidential.
2. Carefully specifying who is allowed to access the PDMP, under what circumstances the information may be accessed or what criteria must be met for access, and for what purposes the lawfully accessed data may be used.
3. Explicitly requiring that the statewide agency operating the PDMP comply with all relevant state and federal privacy and confidentiality laws.

Additionally, some states also require that the agency develop procedures and policies which protect the confidentiality of the information.

4. Penalizing the unlawful access and/or the unlawful disclosure of PDMP information.

States sometimes institute a data purging requirement. Some states remove information from the PDMP no later than a designated number of years after the collection of the data. The range of years specified in PDMP authorizing laws can vary from one to six. Even if a PDMP law is silent on the issue, a purging requirement in another statute may be deemed applicable.

State PDMP officials implement their statutory obligations regarding privacy and confidentiality by developing precise procedures for the submission of information requests and the corresponding program response. The procedures may vary in accordance with the particular parameters applicable to a category of authorized users.

- **FUNDING FOR STATE PDMPs**

There are currently two federal sources of funding for state PDMPs. The first is the Harold Rogers Prescription Drug Monitoring Program (HRPDMP) administered by the U.S. Department of Justice.

Since its inception in 2002, the HRPDMP has provided state officials with over 100 planning, implementation and enhancement grants. For FY2009, Congress appropriated \$7 million for the HRPDMP and President Obama's proposed 2010 budget also includes \$7 million for the grant program.

The second source is the National All Schedules Prescription Electronic Reporting Act (NASPER) administered by the U.S. Department of Health and Human Services. Congress appropriated \$2 million in FY09 funding to implement NASPER. FY09 is the first year for which state grants will be made available. President Obama's proposed 2010 budget includes \$2 million for NASPER.

Other financial mechanisms used by state officials include revenues from state general funds and licensing or registration fees paid by authorized PDMP users. The latter option is unavailable where a state's PDMP law expressly prohibits the imposition of fees to support activities of a monitoring system.

## RESOURCES FOR INFORMATION ON STATE PDMPS

- **NATIONAL ALLIANCE FOR MODEL STATE DRUG LAWS (NAMSDL)**  
[www.namsdl.org](http://www.namsdl.org)

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- **ALLIANCE OF STATES WITH PRESCRIPTION MONITORING PROGRAMS** [www.pmpalliance.org](http://www.pmpalliance.org)

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- **NATIONAL ASSOCIATION OF STATE CONTROLLED SUBSTANCES AUTHORITIES (NASCSA)** [www.nascsa.org](http://www.nascsa.org)

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