

Kentucky's Prescription Drug Monitoring Program (PDMP)

Name of Program: Kentucky All Schedule Prescription Electronic Reporting (KASPER)

Overseeing Agency: Cabinet for Health and Family Services, Office of the Inspector General

Year Original Program Established: 1999

Schedules Monitored: Schedules II, III, IV, and V

Number of Prescriptions Collected Annually: 8.2 million

Number of Controlled Substances Dispensers: 1,500

Data Collection: Every 8 days

Requests for reports: Approximately 5,500 report requests per week

Who Requests Reports: 92% Prescribers
3% Pharmacists
3% Law Enforcement
1% Licensing Boards
1% Other

Operating Costs: Approximately \$350,000 per year

Harold Rogers Prescription Drug Monitoring Program Grants Awarded:

(Administered by the Bureau of Justice Assistance, Office of Justice Programs, U.S. Department of Justice)

Fiscal Years 2002, 2004, 2005, and 2006

Contact: Zach Ramsey
(502) 564-5472

Website: <http://chfs.ky.gov/kasper>

Statute & Regulation Citation:

KY. REV. STAT. ANN. § 218A.202 (Banks-Baldwin 2005)

902 KY. ADMIN. REGS. 55:110 (2005)

The Kentucky Cabinet for Health and Family Services unveiled an enhanced Web-based prescription monitoring system in March 2005. The Enhanced Kentucky All Schedule Prescription Electronic Reporting system (eKASPER) gives qualified users access to reports 24 hours a day, typically within 15-20 seconds after

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the request is made. The start-up costs for eKASPER were \$1.4 million. Currently, operating expenses are funded through general state funds. Funds awarded through the Harold Rogers Prescription Drug Monitoring Program are used for education and training. In addition, the legislature has allocated \$5 million for a capital construction project to develop and implement additional system enhancements.

Recent and Planned Program Enhancements

In September 2006 Kentucky will issue a Request for Proposal to contract with a vendor to collect and report most controlled substance prescription data within 24 hours of dispensing. We anticipate the resulting data collection contract will cover over 80% of the dispensers reporting to KASPER.

Kentucky has implemented KASPER trend data reporting and analysis to produce Geographic Information System (GIS) maps identifying controlled substance usage along with increases and decreases over time by geographic area. These reports are intended to provide a tool for the licensure boards and law enforcement to identify where they need to focus investigative resources. The trend reports will also provide a tool to increase the awareness of health care providers about potential problems with controlled substances in selected geographic areas. A set of KASPER trend maps is available on the KASPER Web site.

The 2006 KASPER Satisfaction Survey will be distributed to users of KASPER by the end of September 2006. This survey will be used to obtain user feedback on their satisfaction with the system, and to identify additional training requirements and user recommended enhancements that could be made to improve the system. Results should be available in early 2007 and will be posted on the KASPER Web site.

An e-Prescribing pilot program will be implemented in 2007 to provide grants to selected physician groups/offices to procure and install e-Prescribing systems, and implement linkages from those e-Prescribing systems to KASPER.

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