

Prescription Drug Monitoring Program Training and Technical Assistance Center

Kentucky

| PDMP acronym: | KASPER | Region: | South |
|----------------------------|--|-----------------|-------------|
| Agency Responsible: | Kentucky Cabinet for Health and Family Services | | |
| Agency Type: | Office of Inspector General | | |
| | PDMP Web Resources/Links | | |
| PDMP Website: | https://www.chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/kasper.a | aspx | |
| PDMP Email: | eKASPER.admin@ky.gov | | |
| PDMP Register Website: | https://chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/kasper.aspx | | |
| User Account Manual: | https://www.chfs.ky.gov/agencies/os/oig/dai/deppb/Documents/KA dUserGuide.pdf | SPERPrescribe | erReportCar |
| PDMP Query Website: | https://kog.chfs.ky.gov/home/ | | |
| PDMP Data Upload Website | : | | |
| Data Upload Manual: | https://www.chfs.ky.gov/agencies/os/oig/dai/deppb/Documents/KA ReportingGuide.pdf | SPERControlle | edSubstance |
| Statute/Regulation Website | https://apps.legislature.ky.gov/law/statutes/statute.aspx?id=54048; https://apps.legislature.ky.gov/law/kar/titles/902/055/110/ | | |
| Opioid Guidelines Website: | KRS 218A.205 | | |
| PDMP FAQs: | https://www.chfs.ky.gov/agencies/os/oig/dai/deppb/Documents/KA dQuestions.pdf | SPERKOGFreq | uentlyAske |
| Integration Guidance: | https://www.chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/kasper.a | aspx#Integratio | on |
| PDMP Statistics Website: | https://www.chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/kasper.a | aspx#Documer | ntation |
| Opioid Dashboard Website: | http://www.mc.uky.edu/kiprc/programs/kdopp/county-profiles.htm | I | |
| Training Website: | https://www.chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/kasper.a | aspx#Guides | |

PDMP Contact Information

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|-----------------|--|-----------------|---|
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| State Population and Number of Registrants | | | | | |
|--|---------------|-----------------------|---------------------------------------|-------------------------|-------|
| State population: | 4,518,031 | DEA Prescriber total: | 23,950 | DEA Dispenser total: | 1,187 |
| | | Data Transm | itter(s) | | |
| Dispensing Practitioner | | Ph | armacy (In-S | tate) | |
| Pharmacy (Mail Order In-St | ate) | Ph | Pharmacy (Mail Order Out of State) | | |
| Pharmacy (Other Out of Sta | ate) | Ve | terans Admi | nistration | |
| | | Substances Mo | onitored | | |
| Drugs of Concern | | Sc | hedules II - V | | |
| | | Alternate Data | Sources | | |
| Drug-related Convictions | | 01 | verdoses - No | on-fatal | |
| Substance Use Disorder Tre | eatment Optio | ns | | | |
| | | Available R | eports | | |
| Data Dashboards | | Di | spenser Repo | orts to Law Enforcement | |
| Drug Trend Reports | | Lic | Licensee Reports to Licensing Board | | |
| MME Calculations | | 0 | verdose Repo | orts | |
| Patient Reports to Dispensers | | Ра | Patient Reports to Law Enforcement | | |
| Patient Reports to Prescribers | | Ра | Patient Reports with Summary Data | | |
| PDMP Evaluation Reports | | Pe | Peer Comparison Reports | | |
| Prescriber Report Cards | | Pr | Prescriber Reports to Law Enforcement | | |
| Prescription Drug Combina | tions | Re | Registrant Reports to Prescribers | | |
| Statewide Statistics | | | | | |

Statistical Capabilities

- ✓ # of Prescription Filled
- ✓ # of Prescriptions Filled by CS Schedule
- # of Prescriptions Filled by Drug Class
- Statistics Filtered by Age or Age Range
- □ Statistics Filtered by Ethnicity or Race
- ✓ # of Authorized PDMP Users Enrolled
- ✓ # of Registrants in SDTC
- ✓ # of Registrants in SDTC by Practice/License Type
- ✓ # of Data Errors by Error Type
- # of Data Errors Corrected
- # of At-Risk Patients by Risk Factor
- Risk Factor Statistics by Time Frame
- ✓ # of Solicited Prescriber Reports
- # of Solicited Prescriber Reports by Requestor Type
- □ # of Unsolicited Prescriber Reports
- \square # of Unsolicited Prescriber Reports by Recipient Type
- # of Solicited Dispenser Reports
- # of Solicited Dispenser Reports by Requestor Type
- # of Unsolicited Dispenser Reports
- # of Unsolicited Dispenser Reports by Recipient Type
- # of Solicited Patient Reports
- # of Solicited Patient Reports by Requestor Type
- # of Unsolicited Patient Reports
- \Box # of Unsolicited Patient Reports by Recipient Type

- ✓ # of Dosage Units Dispensed
- # of Dosage Units Dispensed by CS Schedule
- ✓ # of Dosage Units Dispensed by Drug Class
- $\hfill\square$ Statistics Filtered by Gender Identification
- ✓ Statistics Filtered by Geographic Location
- ✓ # of Prescribers Enrolled in PDMP by License Type
- \Box # of Dispensers Enrolled in PDMP by License Type
- # of Prescribers Enrolled in PDMP by Specialty
- ✓ # of Unique Prescribers
- ✓ # of In-State Queries
- # of In-State Queries by Requestor Type
- ✓ # of Interstate Queries
- # of Interstate Queries by Requestor Type
- \Box # of Positive Matches from Interstate Queries
- \Box # of Solicited Statistical Reports by Requestor Type
- \square # of Unsolicited Statistical Reports by Recipient Type
- # of Unique Requestors for Solicited Reports
- # of Unique Requestors by Requestor Type (sol. reports)
- \Box # of Unique Requestors for Unsolicited Reports
- # of Unique Recipients by Recipient Type (unsol. reports)

% Out-of-State Patients: <5%

% Out-of-State Prescribers: >10%

Data Analysis Resources Available:

Data Analyst; Epidemiologist; University Researcher;

Authorized PDMP Users

Correctional Supervision/Solicited In-State Dispenser Delegates - Licensed/Solicited In-State Dispenser Delegates - Licensed/Solicited Out-of-State Dispenser Delegates - Unlicensed/Solicited In-State Dispenser Delegates - Unlicensed/Solicited Out-of-State **Dispensers - Pharmacists/Solicited In-State Dispensers - Pharmacists/Solicited Out-of-State** Drug Courts/Solicited In-State Healthcare Facilities and Institutions/Solicited In-State Law Enforcement - Federal/Solicited In-State Law Enforcement - Federal/Solicited Out-of-State Law Enforcement - Local/Solicited In-State Law Enforcement - Local/Solicited Out-of-State Law Enforcement - State/Solicited In-State Law Enforcement - State/Solicited Out-of-State Medicaid Drug Utilization and Review/Solicited In-State Medicaid Drug Utilization and Review/Solicited Out-of-State Medicaid Fraud and Abuse/Solicited In-State Medicaid Fraud and Abuse/Solicited Out-of-State Medical Examiners and Coroners/Solicited In-State Medical Residents/Solicited In-State Medical Residents/Solicited Out-of-State Nurse Practitioners/Solicited In-State Nurse Practitioners/Solicited Out-of-State Physician Assistants/Solicited In-State Prescriber Delegates - Licensed/Solicited In-State Prescriber Delegates - Licensed/Solicited Out-of-State Prescriber Delegates - Unlicensed/Solicited In-State Prescriber Delegates - Unlicensed/Solicited Out-of-State **Prescribers/Solicited In-State** Prescribers/Solicited Out-of-State **Prosecutors/Solicited In-State Regulatory and Licensing Boards/Solicited In-State** Regulatory and Licensing Boards/Solicited Out-of-State Regulatory and Licensing Boards/Unsolicited In-State **Researchers/Solicited In-State Researchers/Solicited Out-of-State**

Engaged PDMP Users

Correctional Supervision/Solicited In-State Dispenser Delegates - Licensed/Solicited In-State Dispenser Delegates - Licensed/Solicited Out-of-State Dispenser Delegates - Unlicensed/Solicited In-State Dispenser Delegates - Unlicensed/Solicited Out-of-State **Dispensers - Pharmacists/Solicited In-State Dispensers - Pharmacists/Solicited Out-of-State** Drug Courts/Solicited In-State Law Enforcement - Federal/Solicited In-State Law Enforcement - Federal/Solicited Out-of-State Law Enforcement - Local/Solicited In-State Law Enforcement - Local/Solicited Out-of-State Law Enforcement - State/Solicited In-State Law Enforcement - State/Solicited Out-of-State Medicaid Drug Utilization and Review/Solicited In-State Medicaid Fraud and Abuse/Solicited In-State Medical Examiners and Coroners/Solicited In-State Medical Residents/Solicited In-State Nurse Practitioners/Solicited In-State Nurse Practitioners/Solicited Out-of-State Physician Assistants/Solicited In-State Prescriber Delegates - Licensed/Solicited In-State Prescriber Delegates - Licensed/Solicited Out-of-State Prescriber Delegates - Unlicensed/Solicited In-State Prescriber Delegates - Unlicensed/Solicited Out-of-State Prescribers/Solicited In-State Prescribers/Solicited Out-of-State **Prosecutors/Solicited In-State Regulatory and Licensing Boards/Solicited In-State** Regulatory and Licensing Boards/Solicited Out-of-State Regulatory and Licensing Boards/Unsolicited In-State **Researchers/Solicited In-State Researchers/Solicited Out-of-State**

Budget

| Total Annual Budget: | | PDMP Staff: | 3 | 1 | |
|--|-------------|-------------------------------|---------------|------------------|-------------------|
| # of Employees - Operational: | 15 | # of Employees - Other: | | 0 | |
| # of Employees - Technical: | 15 | | | | |
| # of Employees - Analytical: | 1 | | | | |
| | | Eunding Sourcold | •) | | |
| | | Funding Source(s | - | | |
| BJA Grant | | CDC Gran | t | | |
| State General Fund | | | | | |
| | | Technologies | | | |
| Data Collection Entity: | In-House | L | State HIE in | place | |
| Data Collection Vendor name: | In-House | V | RxCheck Inte | egration Allowed | |
| Data Storage Entity: | In-House | V | VHA VISTA i | ntegration | |
| Data Storage Vendor name: | In-House | V | HL7 FHIR co | nnectivity | |
| Report Generation Entity: | In-House | Д | SAP Version l | Jtilized: 4.2B | |
| Report Generation Vendor name: | In-House | | | | |
| Data Access Method: | Web Portal | /On-Line | | | |
| Data Access Entity: | In-House | | | | |
| Data Access Vendor name: | In-House | | | | |
| | | Patient Matchin | g | | |
| Referential Matching Deterministic Matching Manual Matching Other Matching Manual review process for approximately 3-4% | | | tching | | |
| ✓ Access to patient matching algorithms | rithms | | | | |
| Patient Matching Metrics Available | True posit | ive matches | | | |
| Patient matching data elements:Patient identification (i.e., driver license, social security number), Patient last name, Patient first name, Patient address, Patient date of birth | | | | | |
| | Ir | ntegration(s) Availa | able | | |
| late metion Truce () Dustidant | | • | | | Daid by Dury idea |
| 0 /1 | Hub Used | Paid by Fed Gov't Paid by | y state Gov't | Paid by Facility | Paid by Provider |
| EHR Integration 25-49% RxC | heck & PMPi | _ | | | |
| \Box Data Downloaded/Stored | | \Box Data Manipulated for A | nalysis | | |
| Data Incorporated with Intersta | te Data | ✓ Multistate Integrations | Allowed | | |
| Integration Standards: | | | | | |
| Integration Type % Providers | Hub Used | Paid by Fed Gov't Paid by | y State Gov't | Paid by Facility | Paid by Provider |
| HIE Integration <10% | RxCheck | | | Unknown | |
| Data Downloaded/Stored | | Data Manipulated for A | nalysis | | |
| □ Data Incorporated with Interstate Data □ Multistate Integrations Allowed | | | | | |
| · | | | Alloweu | | |
| Integration Standards: | | | | | |

| Integration Type | % Providers | Hub Used | Paid by Fed Gov't Paid by State Gov't | Paid by Facility | Paid by Provider |
|--|-------------|---------------------------------|---------------------------------------|------------------|------------------|
| PDS Integration | 0-24% | PMPi | | | |
| \Box Data Downloaded/Stored | | Data Manipulated for Analysis | | | |
| Data Incorporated with Interstate Data | | Multistate Integrations Allowed | | | |
| Integration Standards: | | | | | |
| | | | | | |

Interstate Data Sharing Partner(s)

| Alabama | PMPi Hub |
|----------------|-------------|
| Alabama | RxCheck Hub |
| Arkansas | RxCheck Hub |
| Colorado | RxCheck Hub |
| Florida | RxCheck Hub |
| Illinois | PMPi Hub |
| Illinois | RxCheck Hub |
| Indiana | PMPi Hub |
| Maryland | RxCheck Hub |
| Michigan | PMPi Hub |
| Minnesota | PMPi Hub |
| Missouri | PMPi Hub |
| New Mexico | PMPi Hub |
| Ohio | PMPi Hub |
| Oklahoma | RxCheck Hub |
| South Carolina | PMPi Hub |
| Tennessee | PMPi Hub |
| Utah | RxCheck Hub |
| Virginia | PMPi Hub |
| Washington | RxCheck Hub |
| West Virginia | RxCheck Hub |

PDMP Policies

| Enabling legislation enacted: | 1998 | Data collection frequency: Daily or next busines | | | |
|--|---|--|--|--|--|
| PDMP operational: | 1999 | Requirement for zero-reporting | | | |
| User access date (any method): | 1999 | Frequency of zero-reporting: | | | |
| User electronic access date: | 2005 | | | | |
| Date received electronic data: | 1999 | | | | |
| Interstate sharing start date: | 2011 | | | | |
| Law/Statute citation: | KY Rev Statute §218A.202; | §218A.240; 218A.245; 218A.172; 218A.390; 218A.391 | | | |
| Regulation/Rule citation: | U U | 30, 201 KAR 8:540, 201 KAR 9:230, 201 KAR 9:240, 201KAR KAR 25:090, 902 KAR 55:110, and 907 KAR 1:677 | | | |
| Dr Shopper law/statute: | Kentucky Revised Statute 2 | L8A(140) | | | |
| Pill Mill law/statute: | KRS 218A.175 | | | | |
| Pain Clinic law/statute: | KRS 218A.175 | | | | |
| Unauthorized Use or Disclosure: | KY Rev Statute §218A.202(1 | 2) | | | |
| Enacted 42 CFR Part 2: | Enacted | | | | |
| 42 CFR Part 2 Details: | Our current law supports th requirements. | is. Regulations are being modified to support federal | | | |
| Required Notification to cons | sumers | Data Retention Policy | | | |
| Mandated Use of Advisory G | roup | Data Retention Time: Indefinite | | | |
| Payment method captured | | \square All Information Purged | | | |
| Ability to id prescriber specia | • | Patient Information Purged | | | |
| Patient consent required before | | Prescriber Information Purged | | | |
| □ Ability for users to set thresh □ Ability for users to do user-le | | Dispenser Information Purged | | | |
| ✓ Ability for users to do user-le | | Drug Information Purged | | | |
| Compliance Process for Enrol | - | HIPAA Covered Entity Identifiable Data to State Health Dept | | | |
| Compliance Process for Quer | | \square Identifiable Data to local Health Dept | | | |
| \Box ICD-10 Codes Collected | , | Certified as CMS Specialized Registry | | | |
| \Box Deceased Patient Field | | PDMP Disaster Recovery Plan | | | |
| Engaged in Academic Detailin | g | | | | |
| Patient ID Required to be Pre | sented to Dispenser ID | Types Reported: Patient | | | |
| Ability to de-id data | | | | | |
| Authority to release de-id dat | | | | | |
| De-identified data sharing condit | De-identified data sharing conditions: MOU between Cabinet and research agency. Completion of Institutional Review Board if appropriate. | | | | |
| De-Identified Data Retention Det | tails: | | | | |
| Record Retention Details: We do not permanently purge any prescription history data. Prescription history data is moved to offline storage after three years and maintained indefinitely. Report images are purged after two | | | | | |
| years. | | | | | |
| Patient Notification of Breach | I | Written Notification of Breach | | | |
| Patient Breach Notification Meth | Patient Breach Notification Method: Mail | | | | |
| Patient Breach Notification Method Other: | | | | | |
| E-prescribing required substances: Controlled Substances | | | | | |
| E-prescribing exemptions/waivers: | | | | | |
| Authority to enforce PDMP mandates: Regulatory/Licensing Board | | | | | |

Enrollment and Accounts

Superviser Review/audit of Delegate Accounts Number of Delegates allows: not limited

Auto Enroll with License Renewal or App

Enrollment Method:

Practitioner IDs for PDMP Account:

DEA controlled substance registration number; Licensing Board number;

2 Factor Authentication:

2 factor authentication not offered

Criteria for Dispensers to get account to upload data

Criteria for Dispenser delegates to get account:

Criteria for PAs to get account:

Criteria for Nurse Practitioners to get account:

DEA registration number, professional license number, and home state driver's license number. Kentucky requires an application to be created via a web portal. A hardcopy of the application (and an account terms of use agreement) must then be printed, sig

Criteria for other users to get account:

Requirements for Patients to get PDMP Report:

Practitioners and pharmacists may provide the patient with a copy of their KASPER report. The report can also be placed in the patient's medical record, and is then subject to disclosure like any other component of the patient's medical record.

Requirements for others to get PDMP Report

Criteria for Online Non-healthcare accounts:

Licensing/regulatory Board investigators, Law Enforcement investigators (federal, state, and local), Medical Examiner/coroners

PDMP Data for Epidemiological Purposes: Authority to Release

✓ Law Enforcement On-line access to PDMP □ Law Enforcement Written Request access to PDMP

Law Enforcement Access Method:

Fax request form for prescriber and dispenser information

Law Enforcement Access Requirements: Active Investigation

PDMP users validated with DEA Registration File

 \Box PDMP users validated with NPI File

 \square PDMP Access without DEA Number

Validation Process for

□ PDMP users validated with State Licensing Board File users without DEA #:

Enrollment Mandates

Dispenser - Mandatory PDMP Enrollment Prescriber - Mandatory PDMP Enrollment

Effective Date(s): July 20, 2012

Details:

All practitioners authorized to prescribe controlled substances must register with the PDMP. All pharmacists authorized to dispense controlled substances must register with the PDMP.

Use Mandates

Prescriber - Mandatory PDMP Use

Effective Date(s): July 1, 2012; June 16, 2021

Details:

Prior to initial prescription for a C-II and no less than every three months. Additional PDMP guery requirements specific to the individual prescriber licensure boards. Prior to the initial prescribing or administration of a Schedule II controlled substance, the dentist shall obtain and review a PDMP report for the 12-month period immediately preceding the patient encounter and appropriately utilize that data in the evaluation and treatment of the patient. Provides that the query requirement does not apply when prescribing or administering a controlled substance as part of the patient's hospice or end-of-life treatment, to a patient admitted to a licensed hospital as an inpatient or observation patient, during and as part of a normal and expected part of the patient's course of care, for the treatment of pain associated with cancer or the treatment of cancer, or as necessary to treat a patient in an emergency situation. Provides that a dentist shall obtain and review a new PDMP report if the treatment extends beyond three months. Provides that if prescribing or dispensing a controlled substance, the podiatrist shall query the PDMP for all data available on the patient for the 12 month period immediately preceding the patient encounter and appropriately use that data in the evaluation and treatment of the patient. Provides that if the course of the patient's treatment with a controlled substance extends beyond three months, the podiatrist shall, among other things, obtain and review a PDMP report on the patient no less than once every three months for all available data on the patient for the 12 month period immediately preceding the query and modify or terminate treatment as appropriate. Requires physicians, who prescribe or dispense Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone, to obtain and review a Kentucky All Schedule Prescription Electronic Reporting System (KASPER) report for that patient for the twelve (12) month period immediately preceding the initial patient encounter and appropriately utilize that information in the evaluation and treatment of the patient. A physician or physicians who prescribe FDA-approved drugs for the treatment of opioid addiction in adult patients to document in the patient's record whether the patient is compliant with prescribing dosing as evidenced by a Kentucky All Schedule Prescription Electronic Reporting (KASPER) report released to the physician:

"Medication assisted treatment with behavior health therapy, which shall:

1. Exclude methadone-based treatment restricted to licensure in accordance with 908 KAR 1:370 and 908 KAR 1:374;

2. Require an advanced practice registered nurse, a physician, or a physician assistant who prescribes FDA-approved drugs for the treatment of opioid addiction in adult patients to:

a. Document in the patient's record whether or not the patient is compliant with prescribed dosing as evidenced by the results of:

(i) A KASPER report released to the practitioner pursuant to KRS 218A.202(7)e.

KY 201 KAR 20:065

5. Professional standards for prescribing Buprenorphine-MonoProduct or Buprenorphine-Combinedwith-Naloxone by APRNs for medication assisted treatment for opioid use disorder

(g) After initial induction of Buprenorphine, the APRN shall review compliance with the recommendations of the treatment plan and drug screen results at each visit to help guide the treatment plan. Current KASPER and other relevant PDMP reports shall be obtained no less frequently than once every three (3) months, to help guide the treatment plan.

902 KAR 20:160. Chemical dependency treatment services and facility specifications.

Section 5. Provision of Outpatient Behavioral Health Services, Plan of Care, and Client Records. (1) Pursuant to Section 2(3) of this administrative regulation, a chemical dependency treatment program may provide one (1) or more of the following outpatient behavioral health services for individuals with a substance use disorder or co-occurring disorder in which substance use disorder is the primary diagnosis:

(p) Medication assisted treatment with behavioral health therapy, which shall:

2. Require an advanced practice registered nurse, a physician, or a physician assistant who prescribes FDA-approved drugs for the treatment of opioid addiction in adult patients to: a. Document in the patient's record whether or not the patient is compliant with prescribed dosing as evidenced by the results of: (i) A KASPER report released to the practitioner pursuant to KRS 218A.202(7)(e);

201 KAR 20:057. Scope and standards of practice of advanced practice registered nurses.

Section 6 (4)(b) An APRN [with a CAPA-CS] shall register for a master account with the Kentucky All Schedule Prescription Electronic ReportingSystem (KASPER) within thirty (30) days of obtaining a DEA ControlledSubstance Registration Certificate, and prior to prescribing controlled substances. A copy of the KASPER master account registration certificate shall be submitted to the board via the online APRN Update portal within thirty (30) days of receipt of confirmation of registration by KASPER.

Training on Enrollment and Use

Researcher - Training Provided Prescriber - Training Required Patient - Training Provided Licensing Board - Training Provided Law Enforcement - Training Provided Dispenser - Training Provided Attorney General - Training Provided In-person; Interactive online training; Webinar In-person; Interactive online training; Webinar

PDMP Queries

Ability to search for multiple patients in one query
 Patient Query Date Range: 3 years
 Minimum data elements to query for healthcare user:

Query by partial data elements by healthcare user: Optional data elements to query by healthcare user: Minimum data elements to query for non-healthcare user: Query by partial data elements by non-healthcare user: Optional data elements to query by non-healthcare user:

Maximum number of patients in one query: 1
Other Query Date Range:
First name, Last name, patient Identifier, date of birth, address, city, state, report from and to date

zip code, patient alias name

Unsolicited Reports/Push Notifications

Frequency unsolicited alerts/reports generated:
Delivery method for unsolicited alerts/reports:
Delivery method for unsolicited alerts/reports - LE:
Delivery method for unsolicited alerts/reports - Boards:
Unsolicited alerts/reports to practitioners not enrolled in PDMP

Veterinary Policies

| Data transmission frequency for Veterin | arians: | |
|---|---|---|
| Criteria for veterinarian queries: | intion history | \Box Veterinary Icon on PDMP Report |
| Reporting Specifications | iption history | |
| Reporting Method: | | |
| Reporting Specifications: | | |
| Data Fields: | | |
| Reporting Description: | | |
| Reporting Mandate Compliance | | |
| Reporting Compliance Details: | | |
| Reporting Mandate Actions: | | |
| Reporting Issues: | | |
| Reporting Misc Information: | | |
| Enrollment Mandate Compliance | | |
| Enrollment Description: | Veterinarians can voluntarily enroll as as data requestors | data requesters with the PDMP and do enroll |
| Enrollment Mandate Compliance Details | 5: | |
| Enrollment Mandate Criteria: | | |
| \Box Query Mandate Compliance | | |
| Query Description: | Veterinarians can voluntarily query ar | nd do query |
| Query Mandate Compliance Details: | | |
| Query Mandate Criteria: | | |

PDMP Effectiveness Measures

Reduction in morphine milligram equivalents (MMEs) prescribed or dispensed Reduction in number of benzodiazepine dosage units dispensed Reduction in number of benzodiazepine prescriptions issued Reduction in number of opioid dosage units dispensed Reduction in number of opioid prescriptions issued Reduction in number of stimulant dosage units dispensed Reduction in number of stimulant prescriptions issued

Substance Use Disorder Activities

Tools or Resources

| O+1- | | |
|------|----------|---|
| Oth | ρr | • |
| 0.01 | <u> </u> | • |

| □ MAT Services | Other: |
|--|--|
| MOUD Services Harm Reduction Strategies Mental Health Assistance Services Employee Assistance Programs Housing Assistance Programs Re-Entry Programs | We provide a link to FindHelpNowKY.org, our statewide treatment locator which includes many treatment offerings. |
| Surveillance Activities | |
| Emergency Department Data Data Sources for Surveillance Activities: | Medical Examiner/Coroner Data Emergency department diagnosis and toxicology screen information as reported to the Kentucky Health Information Exchange Vital Statistic Death data Maternal Child Data |
| Initiated Actions | |
| Resources to Affected Areas Directed Training on Prescribing Prescription Drug Tool Kits Risk Evaluation/Analysis on PDMP Reports Referrals to SUD Organizations Referrals to OFR Teams | Other Actions: Other public health initiatives under OD2A |