BJA COAP Category 5 Grantee Webinar

Thursday, June 21, 2018

PDMP TTAC

Prescription Drug Monitoring Program Training and Technical Assistance Center

BJA Update

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U.S. Department of Justice

BJA Grant Project Update:

- **Washington – Gary Garrety, Casey Schaufler**

PRESCRIPTION MONITORING PROGRAM

2017
BUREAU OF JUSTICE ASSISTANCE
COMPREHENSIVE OPIOID ABUSE SITE-BASED PROGRAM
HAROLD ROGERS PDMP ENHANCEMENT PROJECT

SUPPORTING EHR-HIE-PDMP INTEGRATION THROUGH ONBOARDING SUPPORT FOR FACILITIES AND DEVELOPMENT OF PROVIDER FEEDBACK REPORTS

WA 2017 BJA COAP CATEGORY 5 (HR PDMP) PROJECT

"Supporting EHR-HIE-PDMP Integration Through Onboarding Support for Facilities and Development of Provider Feedback Reports"

1. Support EHR-HIE-PDMP Integration Through Onboarding Support for Facilities

2. Development of Provider Feedback Reports

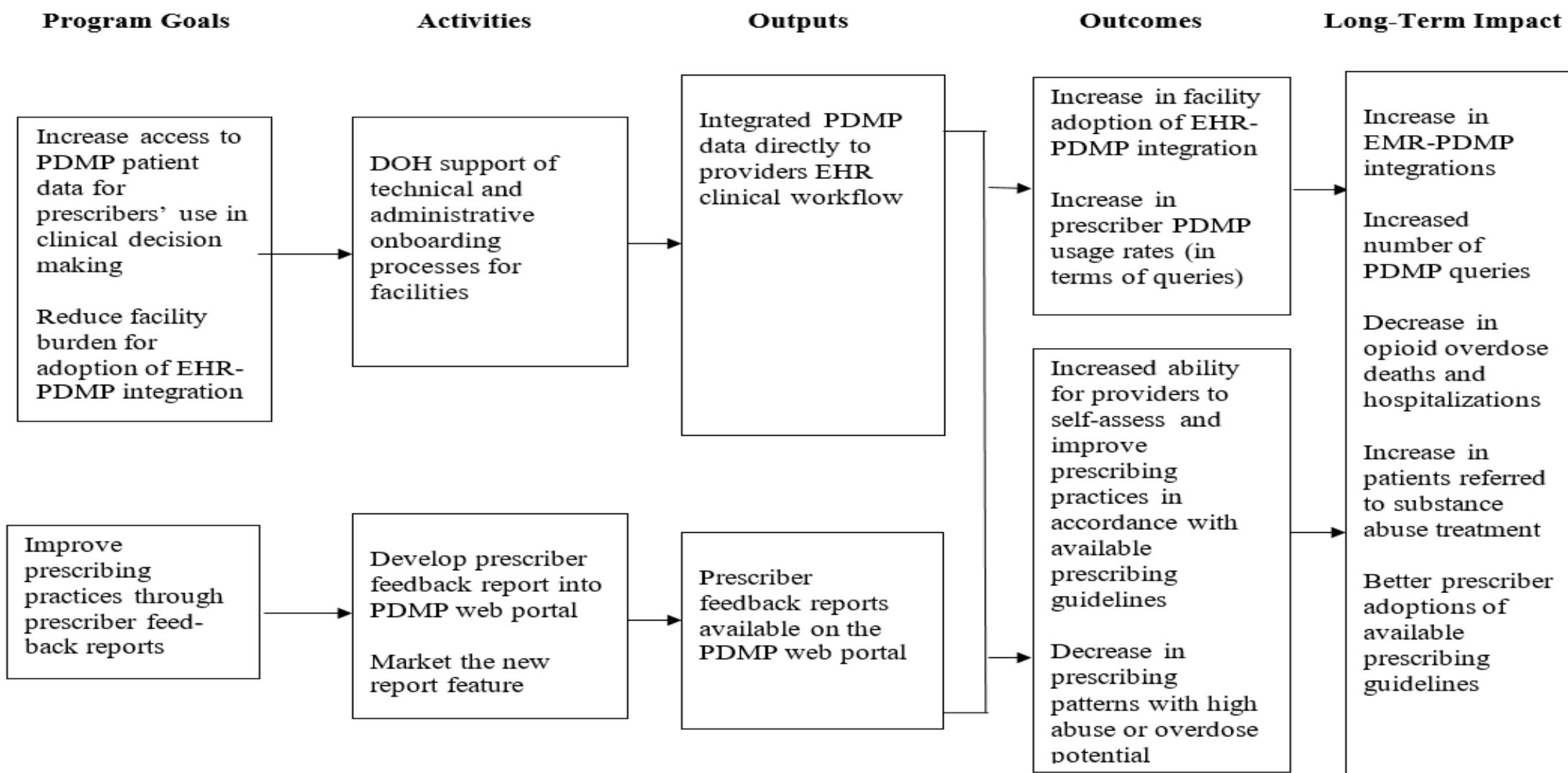# WA 2017 BJA COAP CATEGORY 5 (HR PDMP) PROJECT

Focus:

Support prescribing best practices by removing barriers to adoption and compliance with existing prescribing guidelines

Action points:

➢ Remove barriers to PMP query data by supporting WA EHR-HIE-PMP integration

➢ Provide data, in the form of Prescriber Feedback Reports, for self-assessment and QI

Attachment 1: Logic Model

Program Goals	Activities	Outputs	Outcomes	Long-Term Impact
Increase access to PDMP patient data for prescribers' use in clinical decision making Reduce facility burden for adoption of EHR-PDMP integration	DOH support of technical and administrative onboarding processes for facilities	Integrated PDMP data directly to providers EHR clinical workflow	Increase in facility adoption of EHR-PDMP integration Increase in prescriber PDMP usage rates (in terms of queries)	Increase in EMR-PDMP integrations Increased number of PDMP queries Decrease in opioid overdose deaths and hospitalizations Increase in patients referred to substance abuse treatment Better prescriber adoptions of available prescribing guidelines
Improve prescribing practices through prescriber feed-back reports	Develop prescriber feedback report into PDMP web portal Market the new report feature	Prescriber feedback reports available on the PDMP web portal	Increased ability for providers to self-assess and improve prescribing practices in accordance with available prescribing guidelines Decrease in prescribing patterns with high abuse or overdose potential	

WA 2017 BJA COAP CATEGORY 5 (HR PDMP) PROJECT

Provider Feedback Reports – 2 Routes

Solicited Reports:
- System produced reports
- Opt in service

Unsolicited:
- Program and stakeholders develop metrics customized for Washington
- Model for delivery to include all WA prescribers (meeting threshold)
- Roll-up reporting available for HCO's (Cat 6 – Data Driven… project)

Integration

2014 Washington State Department of Health Customer Survey (PMP) results:

#1 reason for not using PMP: Provider burden (time needed to access PMP)
- Initial registration process
- Account maintenance functions
- Time to access account and perform query

WA method for integration removes barriers for access:
- ✓ No need to register individual PMP account
- ✓ PMP data presented along with med-rec data
  - ✓ Existing frame of reference
  - ✓ No extra work

Integration

Official entry for 2018 "Cheezy Silde" contest

DOH Goals for Washington PMP

Prevent Prescription Drug Overdose

✓ Give practitioners an additional tool that provides more information for making patient care decisions

✓ Provide data that can help healthcare providers recognize patterns of misuse and addiction ensuring SBIRT opportunities are not missed

✓ **Make sure those in need of scheduled prescription drugs receive them**

✓ Educate the population on the dangers of misusing prescription drugs

✓ **Curb illicit use of prescription drugs**

Improve prescribing

Prescribing and PMP Utilization

A Poorly Defined Problem Invariably Results A Poorly Devised Solution
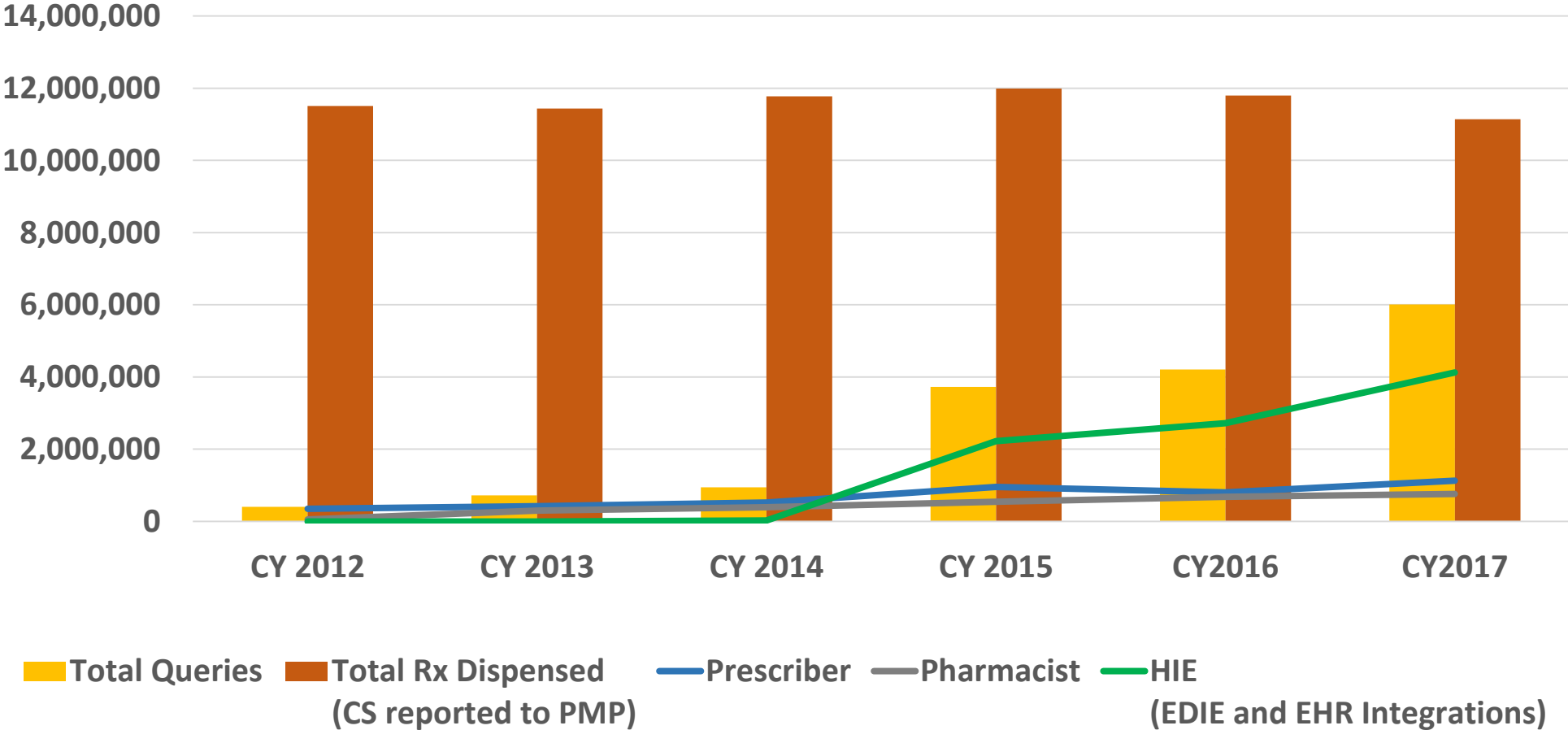
Goal = ~~Reduce~~ Improve Prescribing

➤ Toolbox:
  ➤ CDC Guideline for Prescribing Opioids for Chronic Pain
  ➤ Agency Medical Director's Group (AMDG) Guideline on Prescribing Opioids for Pain

Low PMP utilization indicates poor adoption/adherence to prescribing guidelines
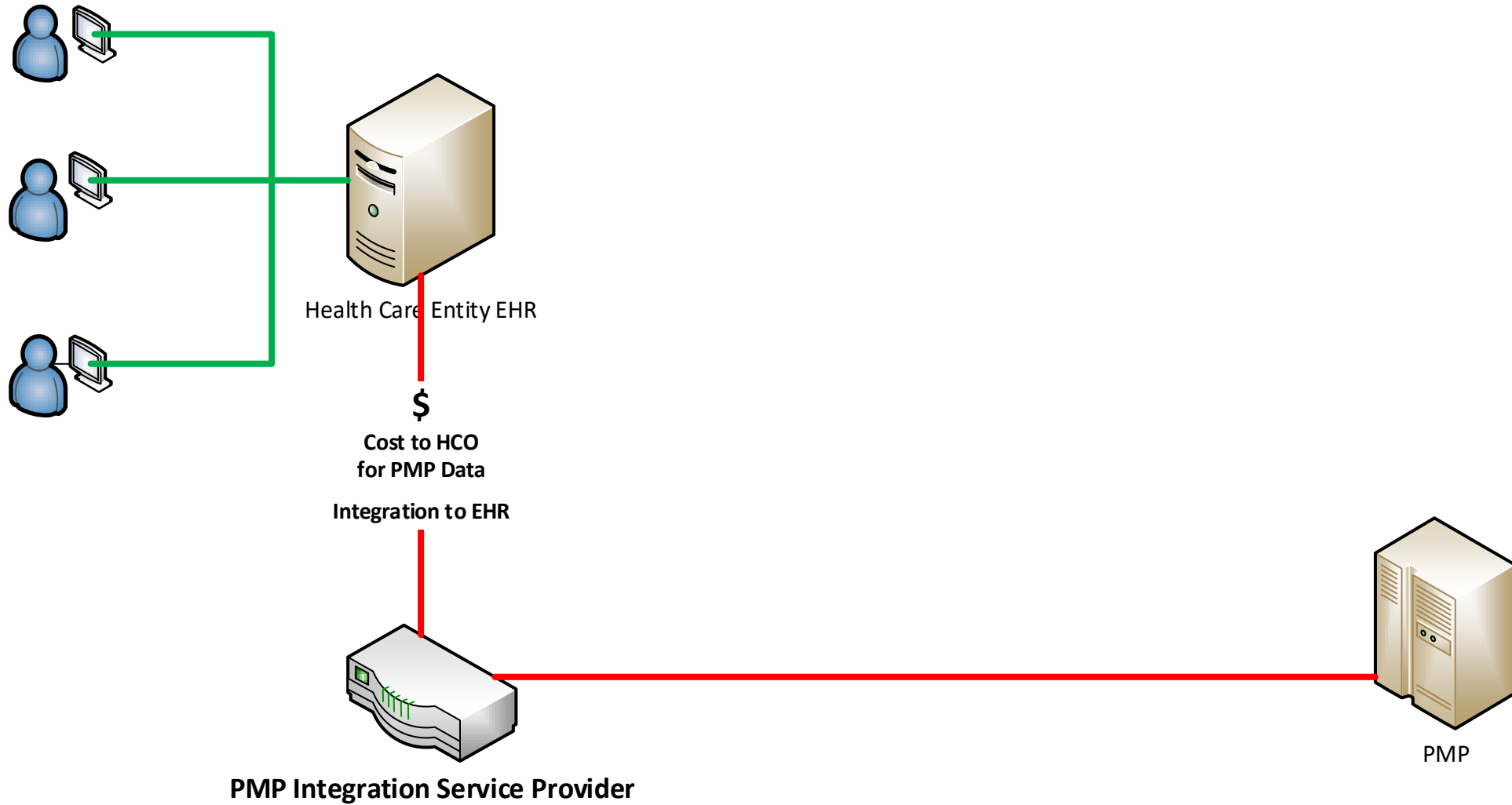
PMP Data and Utilization

PMP Queries and Controlled Substance Prescriptions by Calendar Year

Legend: Total Queries · Total Rx Dispensed (CS reported to PMP) · Prescriber · Pharmacist · HIE (EDIE and EHR Integrations)
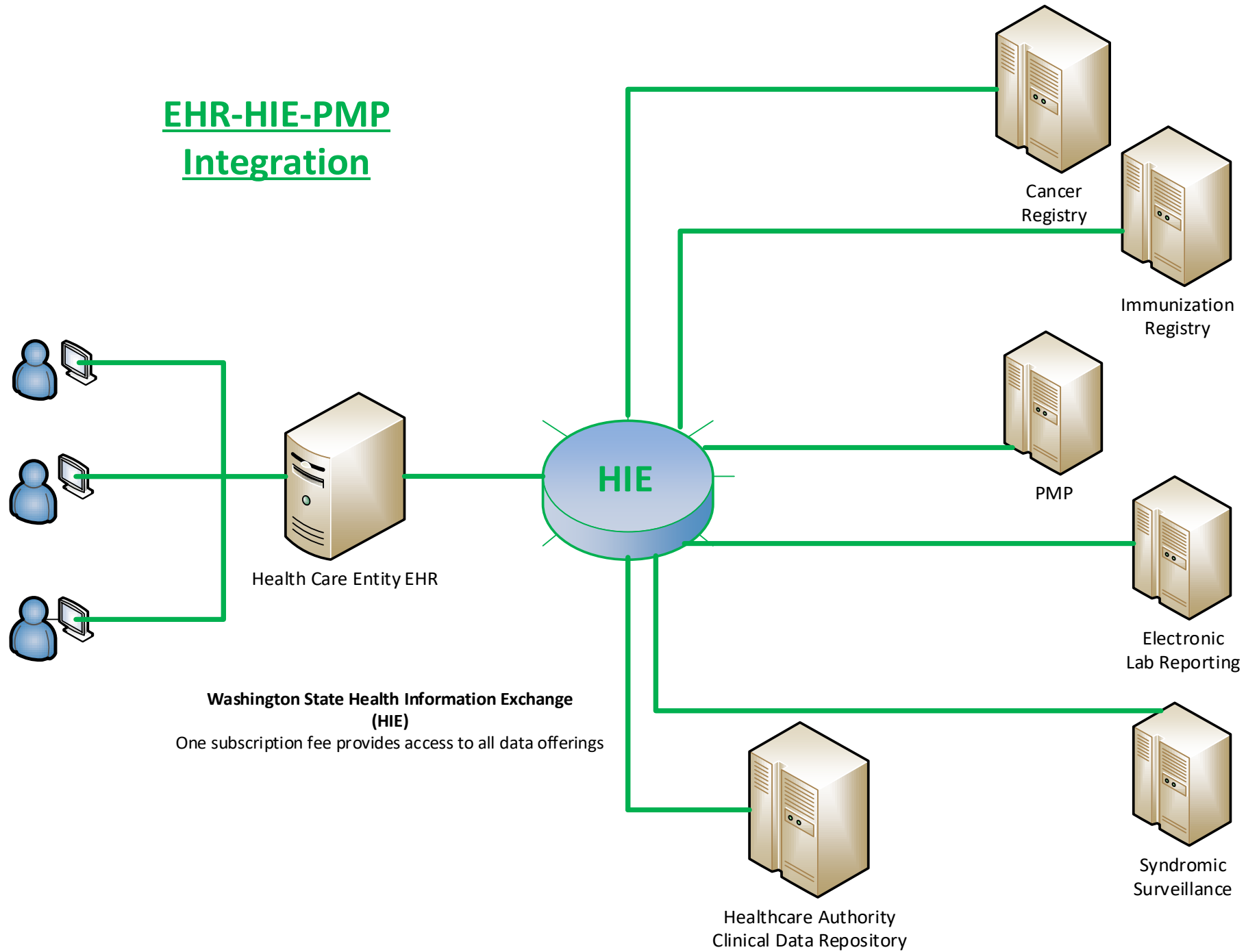
Supporting PMP Integration

- PMP integration available 2013 (HIE connection)
- Proof of concept (EDIE – 2014)
- Incentive (MU Specialized Registry)
- HIE

Stand Alone PDMP Integration Service

Health Care Entity EHR

$

**Cost to HCO
for PMP Data**

Integration to EHR

PMP Integration Service Provider

PMP

EHR-HIE-PMP Integration

Cancer Registry

Immunization Registry

PMP

Electronic Lab Reporting

Syndromic Surveillance

Healthcare Authority Clinical Data Repository

HIE

Health Care Entity EHR

Washington State Health Information Exchange (HIE)
One subscription fee provides access to all data offerings

Onboarding Support

Recap:

- ✓ Integration is a needed and valuable intervention
- ✓ Integration is well incentivized
- ✓ Proof of concept via Pilot program
- ✓ HIE offers cost-effective economy of scale for HCOs and synergizes with PH data sources

Identified Issues:

- o Technology project prioritization at HCO level (ICD 10 – not $)
- o Support

Onboarding Support

Grant funds allowed PMP to hire an onboarding coordinator (1 FTE) to:

✓ Follow up with HCOs having registered intent to integrate PMP

✓ Liaison between HCOs and HIE to support onboarding (technical connection and business arrangement)

✓ Liaison between HCOs, HIE, and PMP vendor for testing

✓ Liaison between HCOs and EHR vendors to support development of PMP transaction integration

✓ Liaison between approved 3rd party solution providers and EHR vendors

✓ Liaison between HCOs to develop and support a community of support and learning

Onboarding Support

Outcomes (so far):

- ✓ At the time of our grant application 1 EHR-HIE-PMP integrations. Now averaging almost 1 per month
- ✓ Monthly query totals have more than tripled since Jan 2018 (> 1M/mnth)
- ✓ Worked with HIE vendor to develop and implement a web services transaction in addition to AS2 connectivty

Access

Original Legislation Provided PMP Access for…

- ✓ Prescribers & dispensers – for patient care
- ✓ Licensing boards – for investigations
- ✓ Individuals – regarding prescriptions dispensed to them
- ✓ EDIE – Providing PMP in the ED
- ✓ DOH/Vendor – in regard to program operation
- ✓ Law Enforcement/Prosecutor – for bona fide investigations
- ✓ Medical Examiner/Coroner – cause of death determination
- ✓ HCA (Medicaid), L&I (Worker's Comp), DOC (Offenders)
- ✓ De-identified information may be provided for research and education

Access Continued ...

SB 5720 (2015)

✓ Staff of Medical Testing Labs – for urinalysis testing and determining prescribed medication use.
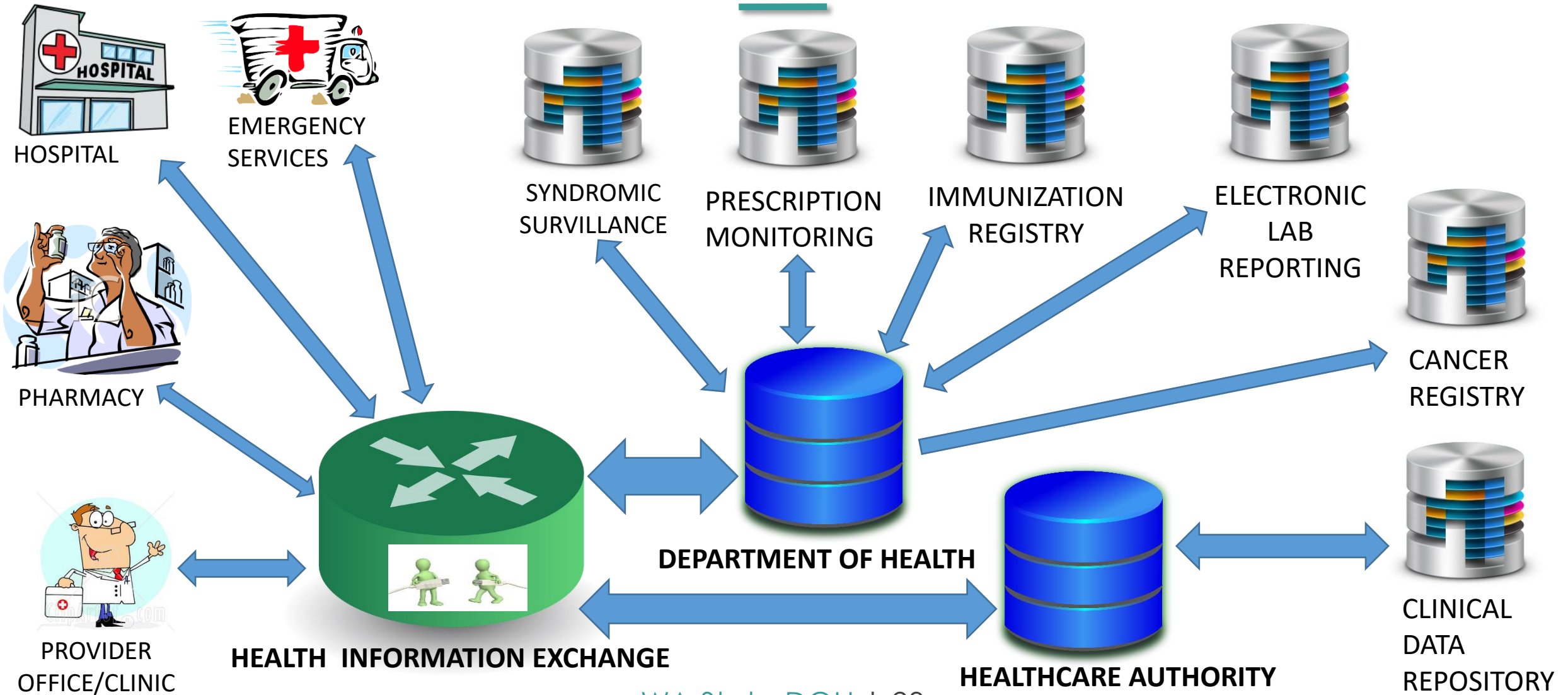
HB 2730 (2016)

✓ Health Care facilities and clinics when using a certified EHR connected to the state's Health Information Exchange (HIE)

✓ Access for legend drug prescribers (no DEA #)

✓ Delegate Access for DOH licensed Pharmacy Staff

ESHB 1427 (2017)

✓ EDIE - OD reports to recent prescribers

✓ WSHA CQIP, Health Care facilities, and provider groups of 5 or more can obtain PMP data for QI

✓ Federal and Tribal HC facilities using EHR-HIE

Questions?

HIE: PUBLIC HEALTH DATA INTEGRATION

HOSPITAL

EMERGENCY SERVICES

PHARMACY

SYNDROMIC SURVILLANCE

PRESCRIPTION MONITORING

IMMUNIZATION REGISTRY

ELECTRONIC LAB REPORTING

CANCER REGISTRY

DEPARTMENT OF HEALTH

PROVIDER OFFICE/CLINIC

HEALTH INFORMATION EXCHANGE

HEALTHCARE AUTHORITY

CLINICAL DATA REPOSITORY

Washington State Department of
Health

Grantee Project Status
and Discussion Forum

BJA Comprehensive Opioid Abuse Site-based Program
FY 2017 Grant Awards by Grant Category

State	Jurisdiction		State	Jurisdiction
Harold Rogers Prescription Drug Monitoring Program				
Alaska	State		New Hampshire	State
Indiana	State		Ohio	State
Iowa	State		Puerto Rico	Commonwealth
Kansas	State		Washington	State
Massachusetts	State		Wisconsin	State
Missouri	St. Louis County			

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