

MA Department of Public Health



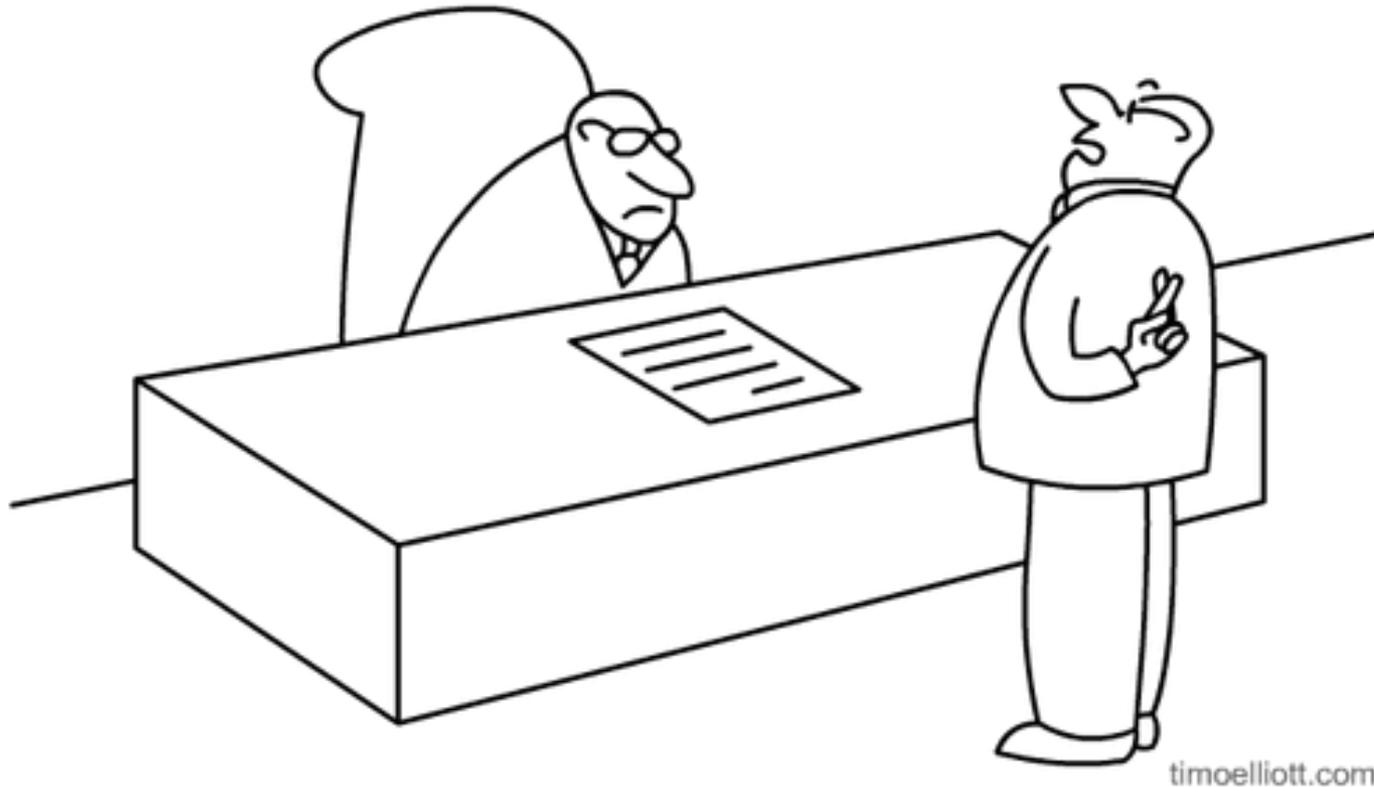
**Bureau of Justice Assistance Harold Rogers
PDMP National Meeting
June 26-27, 2019**

The MA PMP collects dispensing information on Massachusetts Schedule II - V controlled substances dispensed pursuant to a prescription. As of August 1, 2017 MA PMP required the reporting of Gabapentin (a Schedule VI medication)

- The Department reviews and analyzes PDMP data to:
 - ✓ Determine prescribing and dispensing trends;
 - ✓ Provide patient prescription history information to prescribers and dispensers;
 - ✓ Provide educational information to health care providers and the public;
 - ✓ Provide case information to regulatory and law enforcement agencies concerning drug distribution and diversion.

- PDMP data are typically one of the most complete and accurate data sources relied on by public health/law enforcement agencies and health care providers across the Commonwealth.
- However, pharmacies can make systematic or random errors in submitting prescription data that have varying impact on the overall quality of PDMP data.
- PDMPs are only as good as the data they provide.

Is This You?



"Yes sir, you can absolutely trust those numbers"

Quality Nightmares

by MasterControl



MA PMP Data Quality Initiative

- MA PMP received funding from BJA to improve the timeliness of reporting and to address data quality issues.
- Brought on a temporary contractor to follow-up with pharmacies that were continuously delinquent in reporting and/or routinely having data quality issues.
- Working to develop partnerships with pharmacies, our allies in this effort, to ensure the best possible data close to real time.

Here we discuss some data quality issues and the actions taken to address them.

Delinquent Reporting:

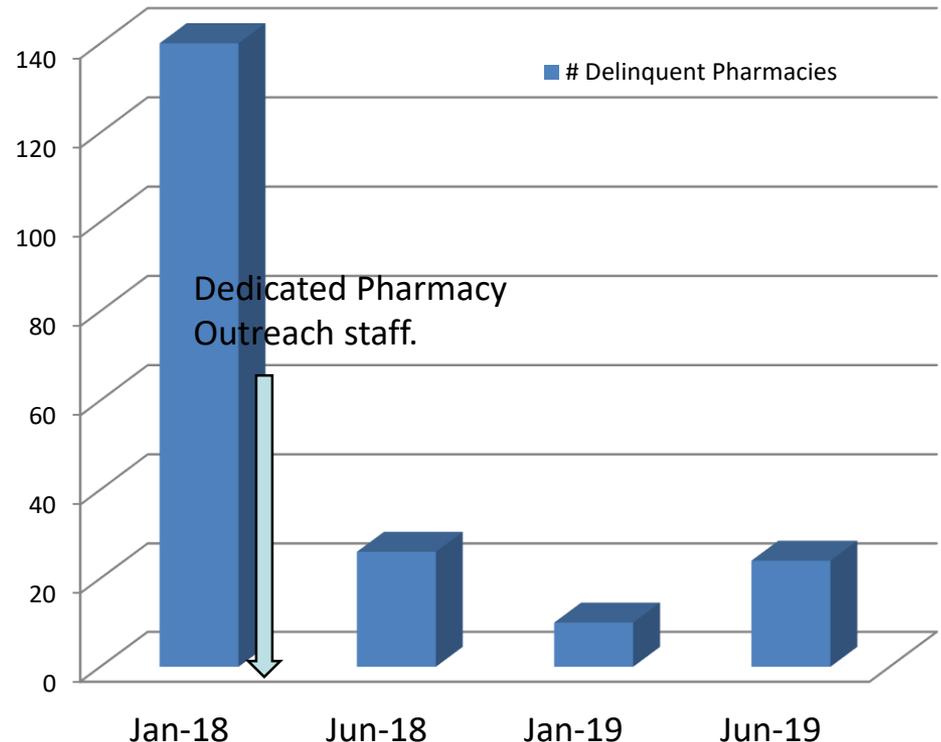
Pharmacies not reporting within 24 hours or the next business day

Action Taken:

- Delinquency is trending downward due to frequent monitoring and use of the Compliance tools on the PDMP system.
- Identify pharmacies not reporting regularly and contact them (and/or their data submitter vendor) to assist with any technical issues or determine if a submission waiver is appropriate.

Results: The number of delinquent pharmacies has decreased since the outreach to pharmacies was initiated and it is now easier to monitor and track non-compliant pharmacies.

Delinquent Pharmacies



Submission Errors:

- Records are often rejected by Clearinghouse due to required information missing.
- Prescription records with uncorrected errors will not be in MassPAT, so it is imperative that the errors be corrected as soon as possible.
- We receive daily from Appriss a list of records that did not pass validation due to errors. We fax/email errors (no patient information included) to pharmacies with instructions and page numbers from the Dispenser Guide to assist in correction.

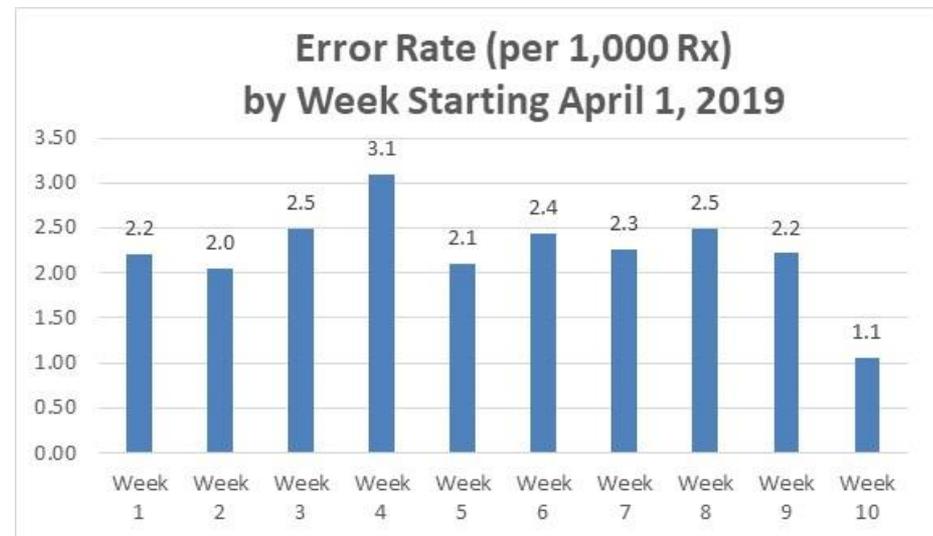
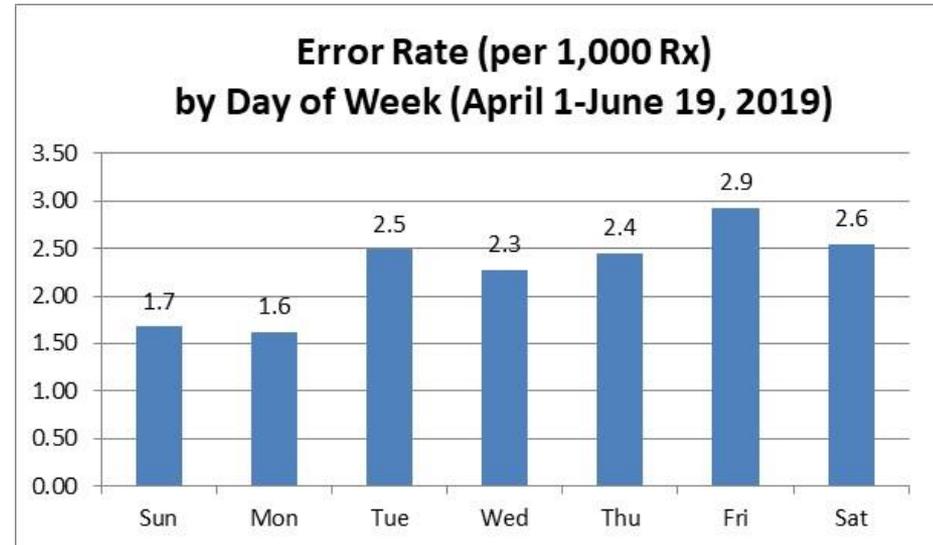
The most common errors are:

1. Missing or invalid prescriber DEA or NPI numbers
2. Missing or invalid pharmacy DEA numbers
3. Missing or incorrect dispensation information (e.g., NDC#, Quantity/Days Supply)
4. Missing patient demographic information- name, address, birthdate, gender

Submission Errors:

Action Taken: Pharmacy errors are routinely monitored by an error report that was developed as a collaborative effort with MA PMP and Apriss Health (our PMP vendor). PMP staff contact pharmacies who appear routinely on the error report.

Results: It is too early in our evaluation process and also somewhat challenging to accurately assess whether the number of errors from pharmacies has decreased over the last several months. We are still fine tuning the error report and continue to reach out to pharmacies that we identify as having large numbers or frequent submission errors.



Other Types of Data Errors:

- these do not prevent the record from passing validation, but can prevent the patient from being found in a search or affect prescribing/prescription statistics.
- These types of errors are often not detected prior to being uploaded to MassPAT and affect the quality of data a prescriber or pharmacist might see in a patient's prescription history:

Patient Identifiers

- The middle name/initial information is sometimes entered at the end of the first name in the First Name ASAP field. This defeats our patient matching algorithm and causes the prescription records to be missed in a patient search in MassPAT.

Incorrect		Correct	
Pt First Name	Pt Middle Name	Pt First Name	Pt Middle Name
ALICIA M		ALICIA	M
ANDREW JAMES		ANDREW	JAMES
ANDREW P.		ANDREW	P

Species Code Errors

- If the prescription is for an animal the species code designation should be “02” rather than “01” for a human. Pharmacies This is very important because PMP data is a critical tool for researchers and we typically exclude non human data based on the species code.

		CY 2016	CY 2018
Explanation of Code	Species Code	Prescription Count	Prescription Count
Null		416,755	49,602
Not Valid	0	2,774	-----
Human	01	11,550,111	12,681,481
Not Valid	1	604	-----
Veterinary Patient	02	38,492	59,288

PMP DATA QUALITY

Data Quality Analysis of Veterinary PMP Data in MA (CY 2018)		
	Prescription Count	No. Prescribers
Schedule II-V Prescriptions Reported to the PMP	12,230,356	58,850
Prescriptions with Species Code '02' [†]	46,053	2,300
Prescriptions with Species Code '02' [†] Written by a Prescriber other than a Veterinarian	555 (1.2%)	176 (7.6%)
Prescriptions Written by Veterinarians Reported Incorrectly in the PMP Database	283 (0.6%)	47 (0.02%)
Prescriptions from a Prescriber with a DVM Degree with Species Code = '01' [‡]	22,891	1,853
[†] Species Code '02' is entered to indicate the prescription is for an animal		
[‡] Species Code '01' is entered to indicate the prescription is for a human		

Submitting Prescription Records Before Being Dispensed

- This creates problems for prescribers who are relying on MassPAT to assess whether their patient is compliant or making sure patients do not obtain the same medications from different prescribers/pharmacies.

Filling Prescriptions Under the Wrong DEA

- We frequently receive calls from prescribers reporting that prescriptions prescribed by other clinicians have been filled erroneously under their DEA numbers.

Filling Prescriptions Under Expired DEA

- Over 4,000 prescriptions were filled under expired DEA numbers in 2018. These errors impact calculations for reports and measures generated by the program including:
 - Multiple Provider Episodes
 - Prescriber Alert Notifications
 - Quarterly Reports (released to the public).

How are we fighting the good fight for better data?

- ✓ We receive from Appriss daily a list of errors preventing records from passing validation. Pharmacies are contacted to ensure they are aware of the errors and are provided support in correction.
- ✓ We are also noting error trends to determine items that need to be clarified further or changed in the Dispenser Guide, and identifying opportunities for training and education.
- ✓ In dealing with the larger chain pharmacies like CVS and Walgreens – MA PMP is engaging the corporate offices as well as contacting individual stores.
- ✓ For quicker error resolution, we are allowing prescription records that contain errors, but passed validation to be corrected directly using the “Rx Maintenance” feature in the Prescription Monitoring system (for accounts approved to use the feature).

Data Quality (cont.)

- ✓ We are noting error trends to determine items that need to be clarified further or changed in the Dispenser Guide, and identifying opportunities for training and education.
- ✓ Pharmacies that made chronic errors or with longstanding uncorrected errors received visits from Drug Control Program Pharmacy Investigators.

Simple Model for Improving Data Quality

Contact Pharmacy

- Inform (call, email, and or fax) of count/type of errors. State that because these records have errors, they have not posted to the PMP. Do not include DEA numbers on email.
- Note that the errors can be corrected through their data submitter, on Clearinghouse, or on MassPAT using the Error Correction feature (for which they would need to request access from us)
- Log details of call on the Pharmacy Log on the L drive

Follow up on Progress

- In 4 working days, review Pharmacy Error report to see if the pharmacy is still on the report with errors
- Contact pharmacy to inquire about any difficulties in correcting the errors

Recourse

- If the pharmacy continues to have errors remaining or continues to make prescription record errors, we may enlist the help of Pharmacy Investigators, who may visit the pharmacy and provide guidance and inform of regulations.

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THANK YOU