



Findings from the Leveraging PDMPs and Health IT to Address Opioid Use Disorder and Substance Use Disorder (LPASO) Project

ONC Annual Meeting 2020

Maximizing the Use of Prescription Drug Monitoring Programs

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LPASO Project Overview

LPASO builds upon ONC's earlier activities and may be helpful in informing future state strategies and federal investments

- **Project Overview**

- To assess PDMP and health IT technical and policy ecosystems
- Effort to identify ways that health IT can be used to combat the opioid crisis
 - ONC funded, contractor-led project from June 15, 2018 – June 4, 2019

- **Project Activities**

- State Deep Dives
- Technical Expert Panels (TEPs)

- **Project Deliverable**

- ***Landscape Assessment:*** nationwide landscape assessment of key PDMP and health IT indicators

LPASO Landscape Assessment

ONC was most interested in indicators associated with improvement outcomes for the opioid use epidemic

• PDMP Indicators

- PDMP Data Placement in Health IT Systems
- Interpretation of PDMP Data
- PDMP Hospital Integration
- PDMP Access Roles
- Data Standards/Hubs used for PDMP Data Capture, Exchange, and Reporting

• Health IT Indicators

- Application of Health IT for Behavioral Health Providers
- Telehealth for Medication-Assisted Treatment (MAT)
- Electronic Prescribing of Controlled Substances (EPCS)

**The results of this landscape assessment represent a compilation and analysis of data gathered from mainly secondary data sources. When secondary sources were not available, state specific laws and regulations were analyzed and referenced*

PDMP Indicator: Data Placement in Health IT Systems

- **18 states with language that can allow, depending on legal interpretation, placement of PDMP data/report in medical records**
 - AZ, CA, CO, GA, IN, KY, LA, MA, MS, NH, NJ, OH, OK, TN, TX, VA, WA, WV
 - Florida proposed rule would allow placement
- **7 states with language that applies access, use, or disclosure policies governing medical or health information to PDMP data/report in medical records**
 - CA, CO, KY, NJ, TN, TX, WA
- **14 states with language that authorizes PDMP integration of interoperability with health IT systems but silent on placement**
 - DE, IL, IA, MD, NE, NV, NC, OT, PA, RI, SC, SD, UT, WI

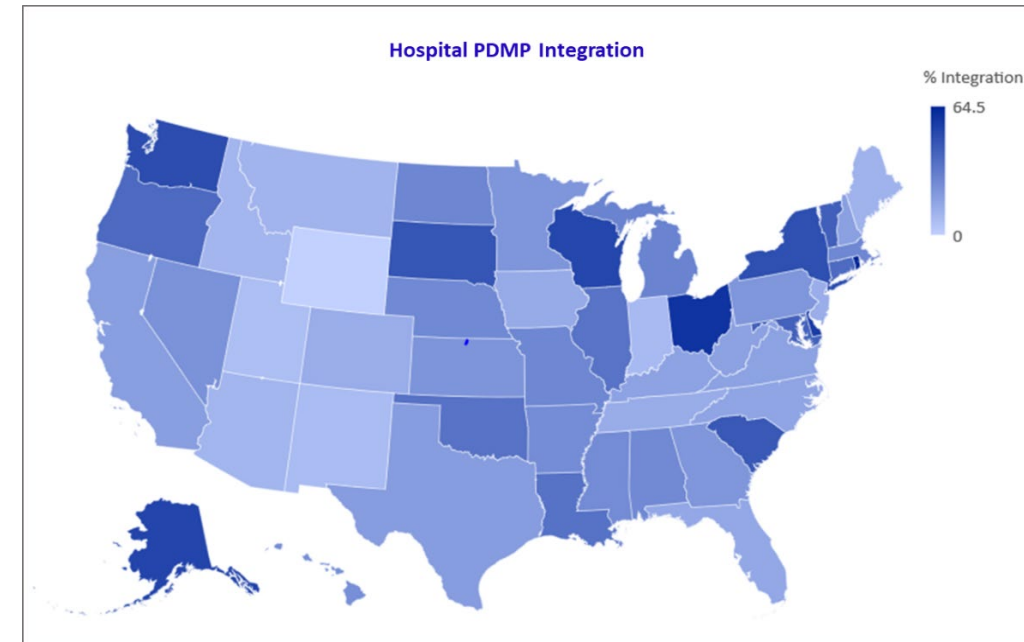
PDMP Indicator: Interpretation of PDMP Data

Features such as CDS and risk scores may be used to supplement raw PDMP data to help identify patient at risk for potential misuse and guide treatment decisions

- Currently no state has statutory or regulatory language prohibiting the development or use of interpretations of PDMP data such as risk scores, but most of those risk scores use proprietary algorithms

PDMP Indicator: PDMP Hospital Integration

- **Authorized users must often access the PDMP outside of the clinical workflow (i.e. online portal)**
 - Lack of integration into the workflow adds to clinical burden and reduces the likelihood of checking the PDMP
- **Hospitals' ability to access PDMP data within EHRs also vary by state**
 - The degree of integration varies significantly within across states
 - Ranging from single sign on (SSO) to the PDMP from within the EHR to full integration of PDMP data into the patient medical record



PDMP Indicator: PDMP Access Roles

State laws and regulations determine the categories of users who are authorized to access and use a state's PDMP data

- **Considerable variability exists in the number (n=8-25) and types (e.g. prescriber, pharmacist, law enforcement, delegate, etc.) of access roles identified in each state territory**
 - Total of 63 unique access roles identified across all PDMPs
- **Lack of harmonized definitions of user roles can cause challenges with interstate data sharing**
 - Issues arise when one state allows data placement in the EHR and another does not
 - Once data is placed in the EHR, access roles defined by the PDMP are generally superseded by the EHR access roles
- **Most states do not allow behavioral health providers (without prescribing authority) to access the PDMP**

PDMP Indicator: Data Standards/Hubs for PDMP Data Capture, Exchange, and Reporting

- **Data capture, exchange, and reporting rely on the following components**
 - i. PDMP Processor
 - ii. PDMP Database
 - iii. PDMP Host/Operator
 - iv. Facilitation of PDMP Integration in Health IT Systems
 - v. Interstate Data Sharing Hubs
- **PDMP systems are comprised of various capacities (e.g. patient matching, calculation of MME scores) and components (e.g. web portals, firewalls) that vary significantly across states**
- **In any given state, the PDMP may include state-developed and vendor-based solutions with the core PDMP database**

LPASO 2.0 Project Overview

LPASO 2.0 builds upon the previous LPASO project and is an effort to support states and inform their approaches for implementation of PDMP data integration and enhancement, as well as relevant health IT supports

- **Project Deliverables**

- ***Toolkit:*** for states to identify and address PDMP, EPCS, and other health IT challenges

- **Project Activities**

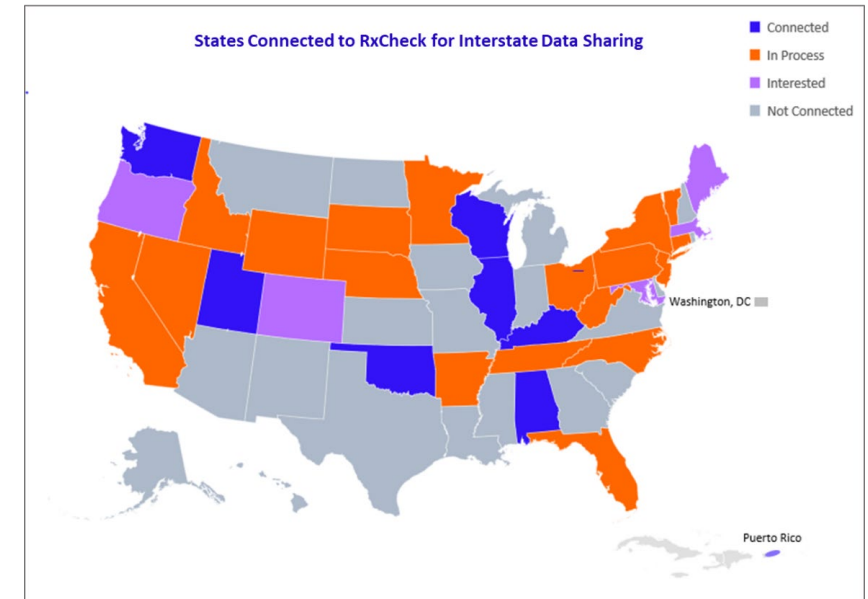
- ***Convening of States:*** comprised of invited key personnel to facilitate and assist in the development and deployment of programs and policies using the toolkit as a foundation
- ***Technical Assistance:*** select states will receive support to effectively implement strategies

Appendix

PDMP Indicator: Data Standards/Hubs for PDMP Data Capture, Exchange, and Reporting

Two Interstate PDMP Data Sharing Hubs

- **PMPInterConnect (n=47 states)**
 - National Association of Boards of Pharmacy (NABP)
- **RxCheck (n=7 states)**
 - Bureau of Justice Assistance (BJA)
 - 26 additional jurisdictions are either interested in, or in the process of, connecting to RxCheck



Prescription Drug Monitoring Program Training and Technical Assistance Center. (2019).
http://www.pdmpassist.org/pdf/RxCheck_states_map_20190411.pdf



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Health Information Technology

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