

## Intent:

This report contains high-level information on the Prescription Drug Monitoring Program (PDMP) and is intended to provide a summary of registration and reporting data specific to your profession. This report includes data up to September 2018.



## Overview:

The PDMP began in 2008 and is housed with the Board of Pharmacy under the Department of Commerce, Community, and Economic Development (DCCED) – Corporations, Business, and Professional Licensing (CBPL) section. Mandatory registration, reviewing, and reporting requirements went into effect in July 2017. All actively licensed practitioners with a valid DEA registration are required to register with the database; however, there are both practice-specific and supply-duration exemptions in AS 17.30.200(k) and (u) in which practitioners are not required to consult the PDMP. Generally, practitioners are required to review patient prescription history before prescribing, administering, and/or directly dispensing a federally scheduled II – IV controlled substance. If directly dispensing, practitioners must report this information to the PDMP on a daily basis. Information on exemptions can be found [www.pdmp.alaska.gov](http://www.pdmp.alaska.gov) under the Registration and Use Exemptions tab and includes information for federally-employed practitioners and pharmacists as well as information on situational exemptions to PDMP use. If mandatory registration and use exemptions do not apply and a licensee fails to register with the PDMP, disciplinary action may be taken by the State Medical Board.

Delegate access is allowed so long as the delegate holds an active license, certification, or registration under AS 08. Delegate access can help relieve time-constraints as reviewing and reporting tasks can be distributed to qualified staff.

With regards to prescriptive guidelines, CBPL's Joint Committee on Prescriptive Guidelines met in 2016 and came up with several recommendations, namely to recommend Washington's prescriptive guidelines, with the exception of reducing from a 120 morphine milligram equivalent (MME) threshold to a 90 MME threshold for consultation with a pain specialist. A summary of the recommendations and a copy of Washington's *Interagency Guideline on Prescribing Opioids for Pain* can be found on the PDMP website at [www.pdmp.alaska.gov](http://www.pdmp.alaska.gov) under the Prescribing Resources tab. Dr. Paul Barney, O.D., served on this committee to represent this profession.

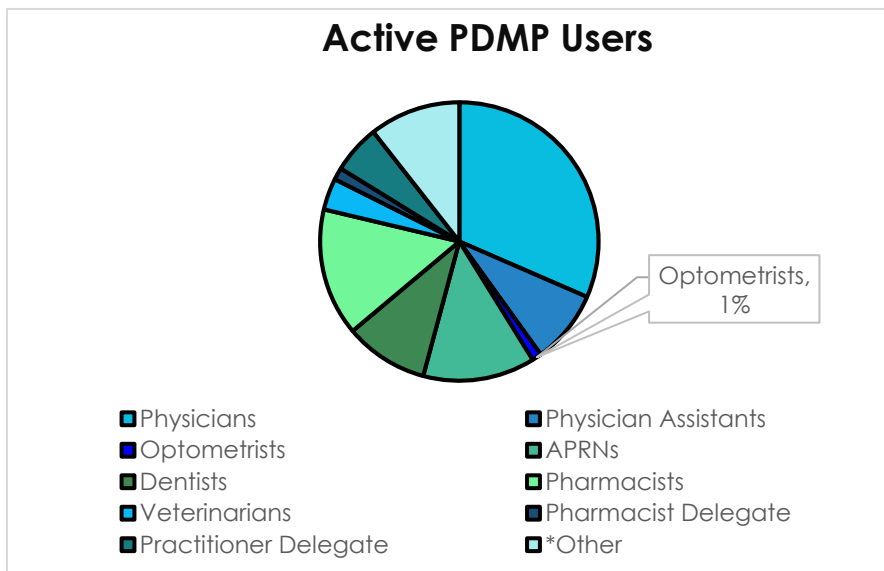
## Updates and Imminent changes:

- PDMP fees for initial and continued access went into effect on April 22, 2018 by authority of AS 17.30.200, which was subsequently implemented under 12 AAC 02.107. This requires a \$25.00 fee to be submitted before access to the controlled substance prescription database is granted.
- Effective July 1, 2018, applicants seeking licensure and who have a Drug Enforcement Administration (DEA) registration must complete no less than two hours of education in pain management and opioid use and addiction within two years immediately preceding the date of application. Similarly, licensees with DEA registrations must complete at least two hours of continuing medical education (CME) for license renewal and to remain registered with the PDMP. Please visit the State Board of Examiners in Optometry website for additional information relating to CMEs.

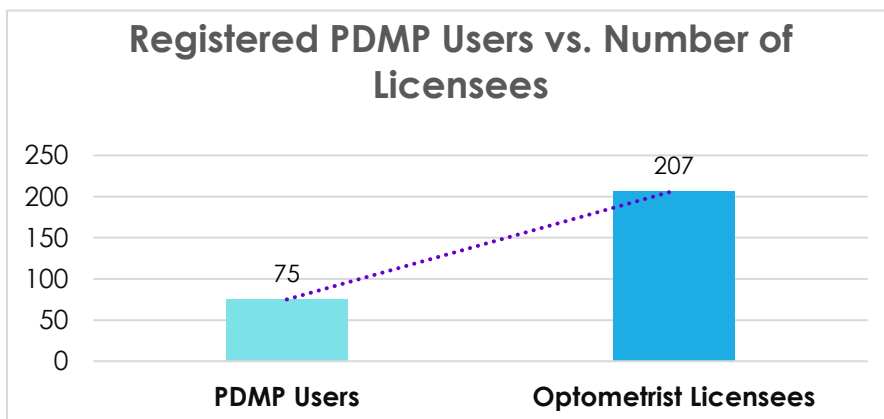
- An Awareness and Feedback Questionnaire, developed per the directive of the CDC, was made available from May 2018 to June 2018. Out of 402 total respondents, 4 (1%) of optometrists participated. Preliminary results can be found at [www.pdmp.alaska.gov](http://www.pdmp.alaska.gov).
- Beginning June 2018, the PDMP began separating federal practitioners and pharmacists from those *required* to register by updating user roles, e.g.: 'Physician' to 'IHS Prescriber' (Indian Health Service) Prescriber.
- Beginning June 2018, all newly registered and renewed PDMP users are issued separate PDMP registration numbers and are searchable by name under the program 'Prescription Drug Monitoring Program' at: <https://www.commerce.alaska.gov/cbp/main/Search/Professional>

**Data:**

The Alaska State Board of Examiners in Optometry regulates doctors of optometry (O.D.). As of September 30, 2018, there are a total of 6,375 registered users, 75 of which are optometrists (Figure 1). The proportion of total licensed optometrists registered with the PDMP is 36%; 64% are not registered due to potential non-compliance, not holding an active DEA registration, or due to being registered as an IHS, VA, or military prescriber (Figure 2).

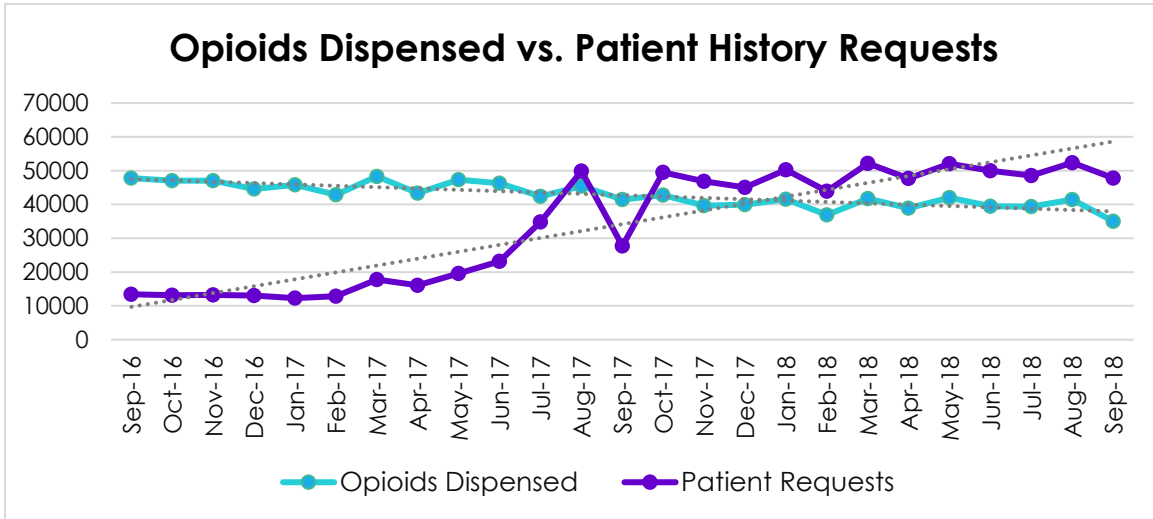


**Figure 1.** Optometrists comprise 1% of actively registered users. \*Other includes IHS and VA prescribers and dispensers, military prescribers, admin, medical examiners/coroners, and out-of-state pharmacists.

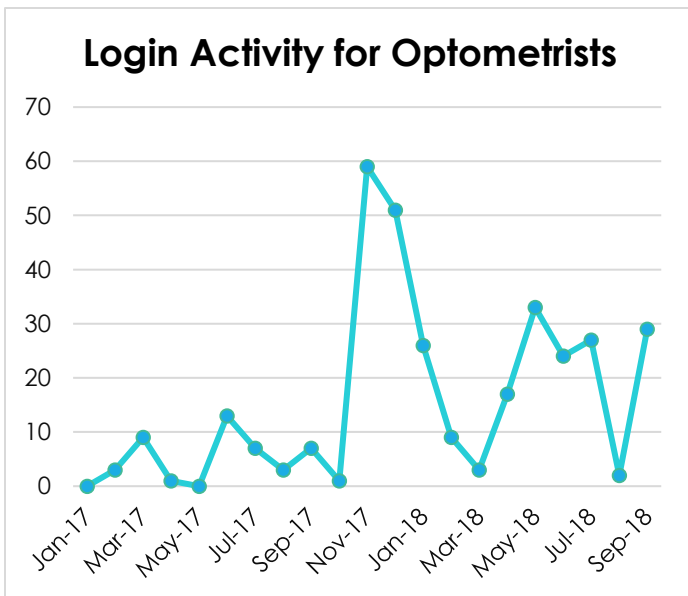


**Figure 2.** The proportion of licensed optometrists to registered PDMP users is represented; however, some licensed optometrists may be excluded from this figure as a possibility of not holding an active DEA registration or being inclusive in other user roles, such as IHS Prescriber, VA Prescriber, or Military Prescriber. These user roles are exempt from paying the fee and are registered with these user roles accordingly.

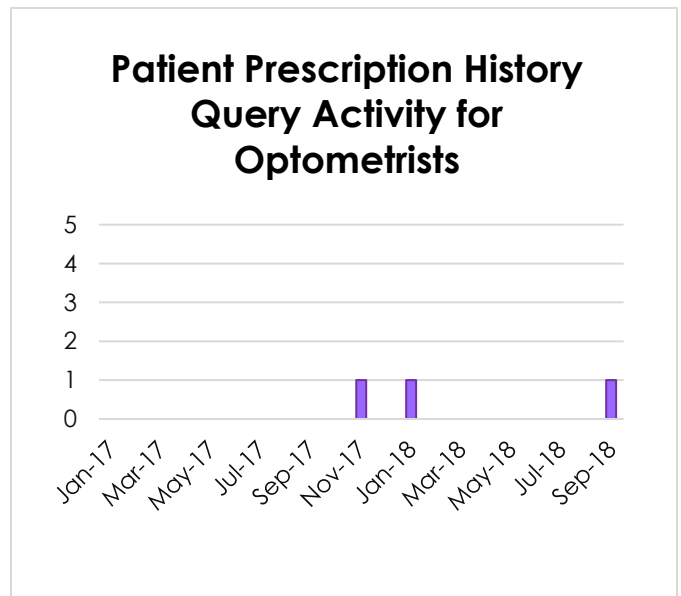
Figure 3 below shows the number of opioid prescriptions dispensed against the number of patient prescription history requests. Figures 4 – 6 shows the interaction activities of physicians and physician assistants captured from January 2017 to September 2018.



**Figure 3.** This graph shows the upward trend of patient prescription history requests in the PDMP, suggesting an inverse relationship between overall opioid dispensing in the state. The decrease in opioid dispensations may also be attributed to other factors, including prescriptive policies and salience of increased state-wide monitoring of prescribing practices as reflected in individual prescriber report cards.



**Figure 4.** Login activity for optometrists has been sporadic since January 2017. The average number of logins per day exceeded 1 only in November and December of 2017. In 2018, the average number of logins per day exceeded 1 in May. When interpreting this graph, it is important to consider the relatively low contribution of opioids prescribed by optometrists (see figures 6 and 7).



**Figure 5.** There have been a total of 3 patient requests conducted by optometrists since January 2017.

Figure 6 below shows the number of morphine milligram equivalents (MME) prescribed (subsequently dispensed) by profession. MMEs is a standardized measurement used to represent the potency of opioids but excludes buprenorphine as a partial opioid agonist.

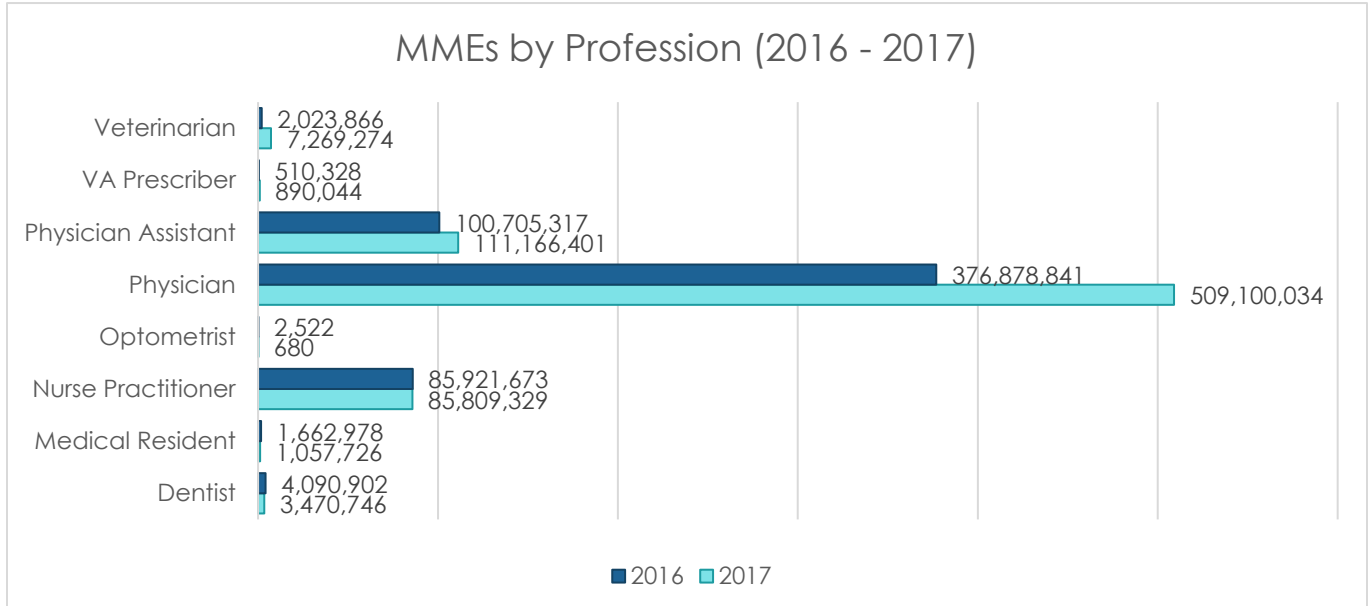


Figure 6. Optometrists prescribed less than 1% of total MMEs in 2016 and 2017.

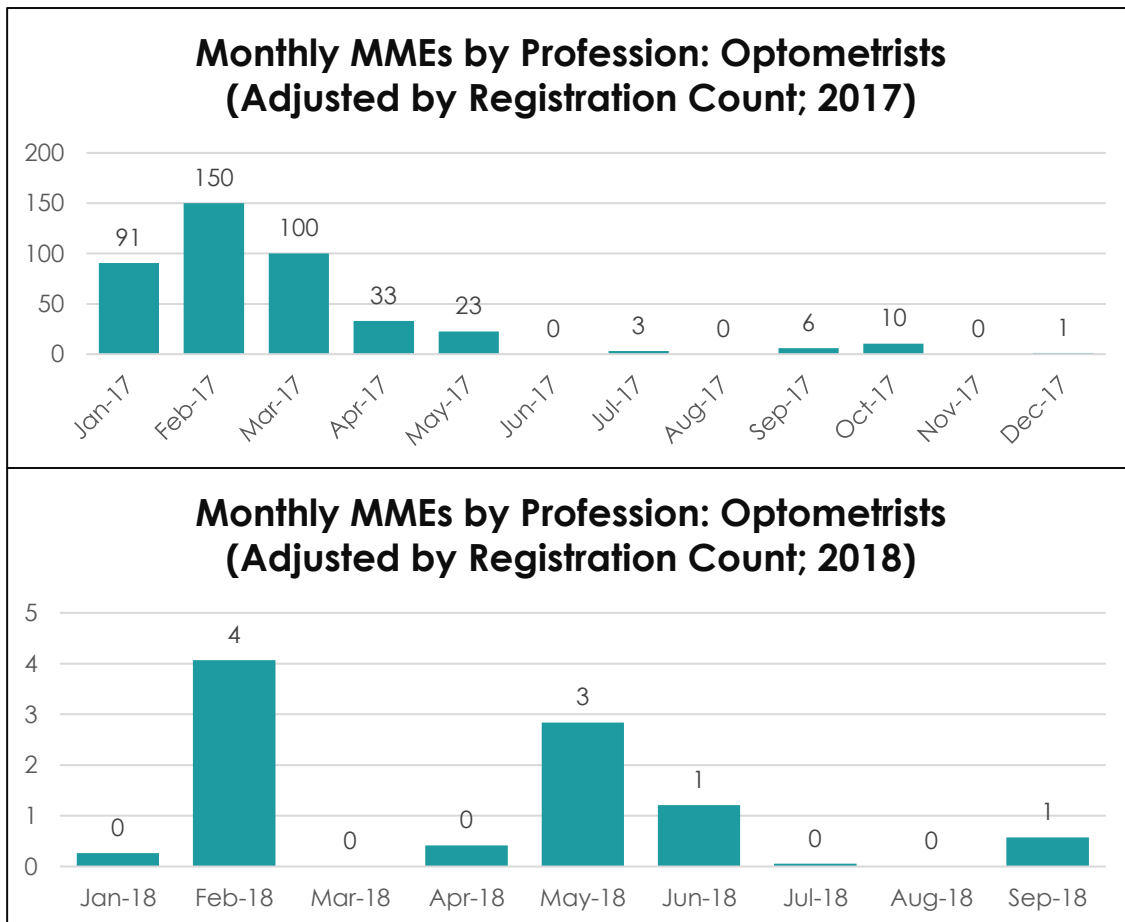
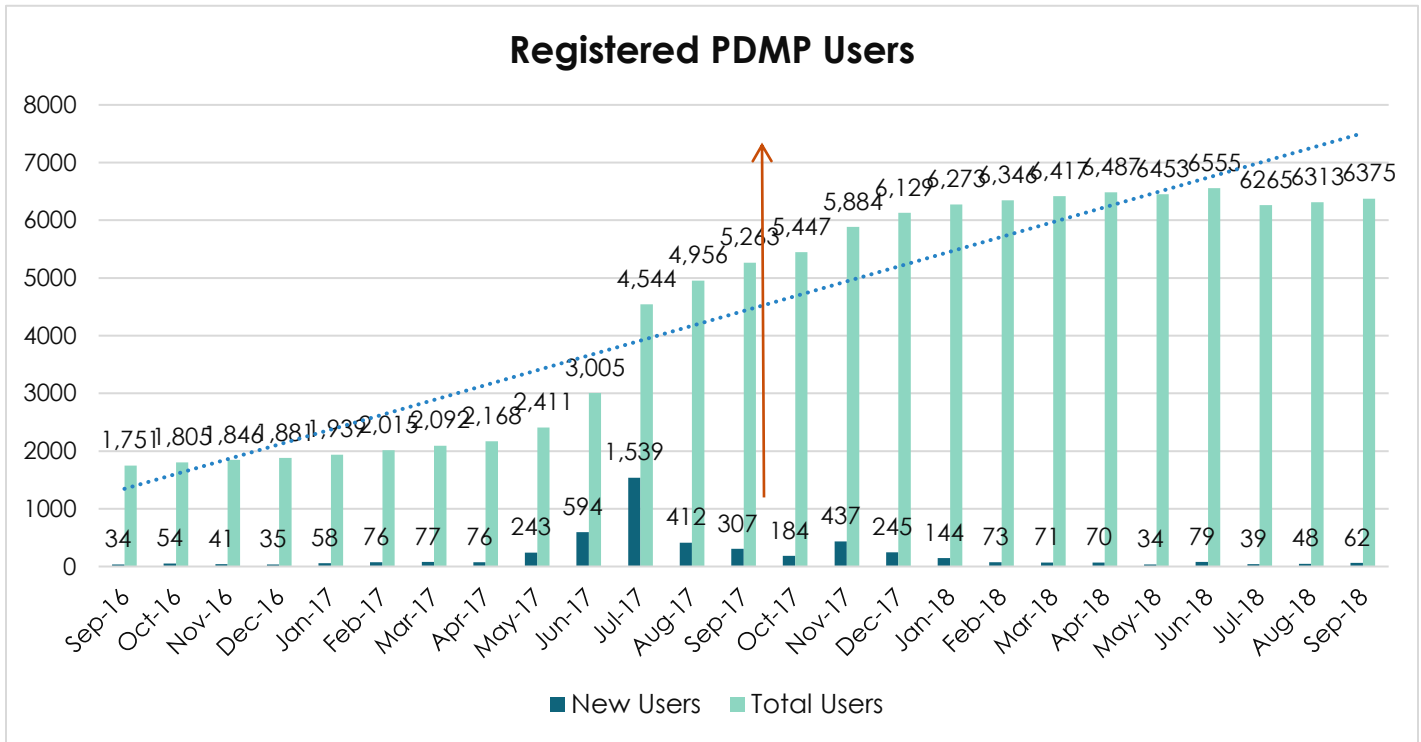


Figure 7. MMEs per month by profession and adjusted by registration count.



**Figure 8.** Registered users have steadily increased. New registrations peaked with 1,539 new practitioners and pharmacists, coinciding with the mandatory registration date of July 2017. The increase of new registrations for May and June may not correlate with the total number of registered users as PDMP registrations were deactivated and user roles changed due to filtering and clean-up processes beginning June 2018 for registration renewal.