

Alaska Prescription Drug Monitoring Program
Summary Prepared for the Board of Dental Examiners
August 2021



This report contains summary data from the Prescription Drug Monitoring Program (PDMP). Data is provided as a courtesy for the board and is intended to be used for informational purposes only.

Notices:

- We received approval for the Provider Outlier Module which will be available by October.
- Appriss is rolling out some changes to the patient report. Changes will be implemented on August 25th. Appriss is sending communication about the changes.
- License integration will be implemented in September.
- The communications module will be rolling out by the end of the year.
- We are continuing to discuss the Delinquent Reporting Notice with the states who have implemented the system and are anticipating enabling this feature. This enhancement will send notices to providers when at least one day of reporting is missed.

Registration

Portal (Professional license system)

Number of licensed Dentists: 753
Number of Dentists with DEA registrations: 685
Number of PDMP Dental registrations: 265 (renewal still in process)
Directly dispensing controlled substances: 5
Compliance rate (DEA and PDMP registrations): 35%

AWARxE (PDMP)

Number registered with the PDMP: 698

Use – Review Compliance

Federally scheduled II – III, over a three-day supply, some specialties omitted)
Q1 2021: 4.69% (384 dispensations; 18 searched)
Q2 2021: 4.96% (484 dispensations; 24 searched)

MME Use (Q1/Q2 2021)

Number of patients treated with over 90 MME: 29 (40% decrease from Q4 2020/Q1 2021)
Number of patients treated with over 120 MME: 9 (40% decrease from Q4 2020/Q1 2021)
Number of patients treated with dangerous combinations (benzodiazepines and opioids): 273
(3% decrease from Q4 2020/Q1 2021)

Delinquent Reporters

Providers who directly dispense are required to report daily. We are working with Appriss to develop a process for identifying delinquent reporters.

Recommendations

- Encourage increased reviewing, including the use of delegates
- Issue periodic reminders to licensees on mandatory reviewing and reporting
- Provide guidance to licensees on prescribing practices related to the use of dangerous combinations
- Develop a plan for communication with licensees about mandatory reporting

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- Develop a disciplinary matrix to guide appropriate actions taken against licensees who do not comply with mandatory registration and use

MME Use
Q1/Q2 2021

The CDC recommends that primary care clinicians should reassess evidence of the benefits and risks to the individual when increasing dosage to greater or equal to 50 MME/day and avoid increasing to greater or equal to 90 MME/day when possible due to an increased risk of complications. The CDC also recommends avoiding concurrent benzodiazepine and opioid prescriptions, given the high risk of adverse drug-drug interactions, specifically respiratory depression and death.

CDC checklist for prescribing opioids -

https://www.commerce.alaska.gov/web/portals/5/pub/PDMP_OpioidPrescribeCDC_06.2018.pdf

CDC guidelines for prescribing opioids for chronic pain -

https://www.commerce.alaska.gov/web/portals/5/pub/PDMP_OpioidPrescribeCDCPain_2018.10.pdf

Provider Type	# Providers Prescribing at Least Once	# Providers Who Reviewed 0 Patients	# Providers Prescribing >90MME	# Providers Prescribing >120MME	Dangerous Combo	
					Benzo Opioid	Benzo Opioid Carisoprodol
DEN	333	54% (181)	6% (19)	2% (6)	26% (85)	0
MED	1282	29% (370)	21% (273)	13% (165)	33% (425)	2% (24)
NUR	543	18% (98)	11% (62)	8% (43)	25% (138)	1% (7)
OPT	5	80% (4)	0	0	0	0
PA	347	14% (49)	19% (67)	12% (41)	29% (99)	1% (4)
VET	193	73% (141)	4% (8)	3% (6)	5% (9)	0