The St. Louis County Prescription Drug Monitoring Program (PDMP), operated by the Saint Louis County Department of Public Health (DPH), is starting to provide quarterly Prescribing Summaries to controlled substance prescribers.

The St. Louis County PDMP monitors the prescribing and dispensing of schedule II-IV controlled substances to assist in the identification and prevention of prescription drug misuse and abuse. Currently, 75 jurisdictions across Missouri have enacted legislation to participate in the St. Louis County PDMP. A list of all participating jurisdictions and links to enacted legislation can be found on the PDMP section of the DPH website, www.stlouisco.com/PDMP.

Prescribing Summaries provide information about your controlled substance prescribing compared to that of your peers (by specialty) and all prescribers in the PDMP.

Physicians, dentists, optometrists, and podiatrists are the types of healthcare providers initially receiving Prescribing Summaries. In the future, physician assistants and nurse practitioners with controlled substance prescribing authority will also receive Prescribing Summaries.

You are receiving a Prescribing Summary because you have prescribed 15+ controlled substances to 15+ patients in the previous quarter and either practice in a participating jurisdiction or have created a PDMP account. Receipt of a Prescribing Summary should not be understood to indicate inappropriate or risky prescribing.

Prescribing Summaries are intended to be an informative resource, comparing your prescribing information to your peers and highlighting potentially risky prescribing, such as co-prescribing opioids and benzodiazepines. Should your summary prompt you to take a closer look at your prescribing practices, consider utilizing the newly published Opioid Prescribing and Pain Management Toolbox, located at www.stlouisco.com/opioids.

Prescribing Summaries are being released to each individual provider and can be further shared as you deem appropriate. DPH will not share Prescribing Summaries with employers or make available to the public, even upon request.

Enclosed are 4 documents related to Prescribing Summaries:
- Prescribing Summary – your individual prescribing summary, including information on prescriptions written by you and filled in Quarter 3, 2019 (July-September);
- Interpretation Guide – indicator overview, interpretation guidance, and recommendations;
- PDMP Registration & Utilization Quick Guide – instructions for registering and using the PDMP; and
- Prescriber Toolkit & Safer Prescribing Quick Guide – overview of information included in the toolkit with a focus on the safer prescribing section.

Additional information on the PDMP and provider education resources can be found at www.stlouisco.com/opioids or by contacting DPH at PDMP.DPH@stlouisco.com or 314-615-0522.
Prescribing Summary
Quarter 3, 2019 (July, August, September)

Prescriber Demographics

Provider Name: 

Specialty Comparison: 

DEA Number(s): 

PDMP Account Status: Approved

Number of Delegates in PDMP

<table>
<thead>
<tr>
<th>Approved</th>
<th>Pending</th>
<th>Rejected</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

Number of PDMP Patient Searches

<table>
<thead>
<tr>
<th>You</th>
<th>Delegates</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>0</td>
</tr>
</tbody>
</table>

Patient Demographics

402

Number of patients you have prescribed schedule II-IV controlled substances

Age & Gender

Gender is not required field to report to the PDMP; 'Unknown' includes prescriptions submitted without a gender variable.

Payment Method

'Commercial' is insurance typically offered by an employer or through the healthcare Marketplace and does not include government-funded insurance programs, Medicaid or Medicare. 'Private Pay' are prescriptions not billed to insurance (cash pay). 'Other' is all payment methods not listed individually and includes military/VA, workers’ compensation, etc.

Potentially Dangerous Combinations

You may have written one or multiple prescriptions that create a potentially dangerous drug combination for your patient(s). Opioids, benzodiazepines, and carisoprodol are depressants; if taken in combination, your patient is at increased risk of respiratory depression (overdose). Consider using the PDMP to review your patients’ controlled substance prescriptions to ensure you are not contributing to a risky drug combination.

Below are the number of patient(s) with overlapping prescriptions (3+ days overlap).

<table>
<thead>
<tr>
<th>Overlapping Opioids</th>
<th>Overlapping Opioids &amp; Benzodiazepines</th>
<th>Overlapping Opioids, Benzodiazepines, &amp; Carisoprodol</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 Patients</td>
<td>63 Patients</td>
<td>1 Patients</td>
</tr>
</tbody>
</table>

This project was supported by Grant No. 2017-PM-BX-0030 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Department of Justice’s Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the SMART Office. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.
Comparison to peers (Specialty) and whole system (PDMP) are displayed.

Opioid Indicators

Note: This Summary does NOT include buprenorphine prescriptions, a medication primarily used to treat opioid use disorder.

Dosage by MME

Providers should prescribe the lowest effective dose and use caution when increasing a patient’s dose above 50MME per day. Increasing dosage above 90MME per day should be avoided unless there are specific extenuating circumstances. This indicator is based on the dosage of individual prescriptions, not a patient’s cumulative dosage if prescribed multiple opioids.

Prescription Length

Providers should limit the duration of prescribed opioids to 3 days or less for acute pain, including most post-surgical pain. If a patient needs more than 3 days of opioids, limit to 7 days and reassess the patient’s condition at that time.

Primary Ingredient

Hydrocodone, oxycodone, and tramadol are the top 3 prescribed opioids. ‘Other’ includes all opioids not listed individually and includes methadone, fentanyl, oxymorphone, codeine, etc.

Benzodiazepine Indicator - Primary Ingredient

Alprazolam, clonazepam, lorazepam, diazepam, and temazepam are the most commonly prescribed benzodiazepines. ‘Other’ includes all benzodiazepines not listed individually and includes triazolam, clorazepate, clobazam, etc.

Stimulant Indicator - Primary Ingredient

Amphetamine, methyphenidate, and lisdexamfetamine are the top 3 prescribed stimulants. ‘Other’ includes all stimulants not listed individually and includes modafinil, dextroamphetamine, armodafinil, etc.

Other Controlled Substance Indicator - Primary Ingredient

Muscle relaxants, zolpidem, and unclassified controlled substances comprise the remaining types of controlled substances not individually displayed above. ‘Unclassified’ includes controlled substances not classified as opioids, benzodiazepines, muscle relaxants, stimulants, or zolpidem; steroids and hormones are two examples of unclassified controlled substances.
PDMP Prescribing Summaries – Interpretation Guide

Prescribing Summaries provide information on your controlled substance prescribing behaviors compared to your peers (by specialty) and all prescribers in the PDMP. This Interpretation Guide includes all metrics included in the Prescribing Summaries, additional information for each metric, and notes for providers seeking to modify their prescribing behavior.

You are receiving a Prescribing Summary because you have prescribed 15+ controlled substances to 15+ patients in the previous quarter and either practice in a participating jurisdiction or have created a PDMP account. Receipt of a Prescribing Summary should not be understood to indicate inappropriate or risky prescribing.

Prescriber Information
This section contains basic information about you, your PDMP registration, and PDMP usage.

- **Provider Name** – your name.
- **DEA Number(s)** – DEA number or numbers included in your report. Prescribing under all of a provider’s DEA numbers are combined into one report. X DEAs, used to prescribe buprenorphine for the treatment of opioid use disorder, are not included in this report. Providers with inaccurate DEA numbers or additional DEA numbers to include can contact PDMP.DPH@stlouisco.com or 314-615-0522.
- **Specialty Comparison** – specialty selected in your PDMP, state licensing, or NPI registration.
  - Providers with no PDMP account, no specialty identified with state licensing, and no specialty identified in NPI system are classified as ‘Unspecified.’ To select a specialty for future summaries, create a PDMP account by visiting https://missouri.pmpaware.net.
  - To modify your specialty for future summaries:
    - Log into the PDMP (https://missouri.pmpaware.net), click your name in the top right corner, click ‘My Profile,’ add/remove/update specialty, and click ‘Save Changes.’
- **PDMP Account Status** – status of your PDMP account.
  - Approved – you have an approved PDMP account and can utilize the PDMP as part of patient care.
  - Pending – additional information is needed to complete your registration and approve your account. Please contact PDMP.DPH@stlouisco.com if you’re unsure of what is needed to complete your registration.
  - No Account – you do not have a PDMP account. To create a PDMP account, visit https://missouri.pmpaware.net, click ‘Create an Account,’ and complete the registration steps.
- **Number of Delegates**
  - Approved – number of delegates you have approved to utilize the PDMP on your behalf.
  - Pending – number of delegates awaiting your approval to utilize the PDMP on your behalf. Pending delegates cannot utilize the PDMP (or access any patient information) under your account until you have approved their access.
  - Rejected – number of delegates you have rejected/denied access to the PDMP under your account.
- **Number of Searches**
  - You – number of searches/patient requests you performed in this quarter.
  - Delegates – number of searches/patient requests your delegates performed in this quarter.

Patient Demographics
This section includes information on patients for whom you have written schedule II-IV controlled substance prescriptions for in this quarter.
Potentially Dangerous Combinations
- This section includes information on potentially dangerous drug combinations – overlapping prescriptions.
- This section focuses on 3 types of overlapping prescriptions: Overlapping Opioids, Overlapping Opioids & Benzodiazepines, and Overlapping Opioids, Benzodiazepines, & Carisoprodol (Soma®).
- **Patients** – number of patients who have received overlapping prescriptions for which you are one of the prescribers. You have written one or multiple prescriptions that combine with what other prescribers are writing for your patient.
- **Note:** Opioids, benzodiazepines, and carisoprodol are depressants, and when combined, your patient is at increased risk of respiratory depression (overdose). Consider using the PDMP to review your patients’ controlled substance prescriptions to ensure you are not contributing to a risky drug combination. See the Opioid Prescribing and Pain Management Toolbox, located at [www.stlouisco.com/opioids](http://www.stlouisco.com/opioids), for additional information.

Opioid Indicators
Opioids are medications used to treat pain. OxyContin®, Vicodin®, tramadol, codeine, and methadone are examples of opioids. **Note:** Prescriptions for buprenorphine, a medication primarily used to treat opioid use disorder, are not included in Prescribing Summaries.

- **Dosage by MME** – percent of opioid prescriptions by dosage (morphine milligram equivalent (MME)).
  - Dosage is categorized into 4 categories: <50MME, 50-89MME, 90-119MME, and 120+ MME.
  - As the primary ingredient of an opioid prescription varies, opioid dosages are converted to the MME for comparison across different types of opioids.
  - **Note:** Providers should prescribe the lowest dose possible and use caution when increasing a patient’s daily dose above 50 MME per day. Increasing dosage above 90 MME per day should be avoided unless there are specific extenuating circumstances. It’s important to consider the cumulative dosage of all of a patient’s opioid prescriptions and not just each individual prescription. The PDMP can be used to review a patient’s prescription history and determine the patient’s current cumulative opioid daily dose. See the Opioid Prescribing and Pain Management Toolbox, located at [www.stlouisco.com/opioids](http://www.stlouisco.com/opioids), for additional information.

- **Prescription Length** – percent of opioid prescriptions by prescription length (days supply).
  - Prescription length is categorized into 4 categories: <4 days, 4-7 days, 8-13 days, and 14+ days.
  - **Note:** It is recommended that providers limit the duration of prescribed opioids to 3 days or less for acute pain (including most post-surgical pain). Limiting initial prescriptions to 3 days reduces the risk of dependence or misuse (by the patient or others) if medication is left over. If a patient needs more than 3 days of opioids, limit to 7 days and reassess the patient’s condition at that time. See the Opioid Prescribing and Pain Management Toolbox, [www.stlouisco.com/opioids](http://www.stlouisco.com/opioids), for more information.

- **Primary Ingredient** – percent of opioid prescriptions by primary ingredient.

Benzodiazepine Indicator
Benzodiazepines are medications used to treat a variety of conditions, including anxiety, seizures, and insomnia. Alprazolam, clonazepam, Valium®, and Xanax® are examples of benzodiazepines. Benzodiazepines are displayed as percent of prescriptions by drug type.

Stimulant Indicator
Stimulants are medications often used to treat attention deficit hyperactivity disorder (ADHD). Adderall®, Ritalin®, Vyvanse®, and Concerta® are examples of stimulants. Stimulants are displayed as percent of prescriptions by drug type.

Other Controlled Substances Indicator
Muscle relaxants, zolpidem, and unclassified controlled substances are included in the ‘Other Controlled Substance’ category. These are not commonly prescribed medications but are included in this report to cover all categories of schedule II-IV controlled substances. Other controlled substances are displayed as percent of prescriptions by drug type.
CREATING AN ACCOUNT

To register, visit: [missouri.pmpaware.net](http://missouri.pmpaware.net).

- Upload validation documentation. Requirements vary by user type, but you will need one of the following:
  - State professional license;
  - Employer-issued ID; or
  - Employment verification letter.

To grant access to a delegate, supervisors must first register with the PDMP.

- Supervisors must approve delegates.
- Delegates should review ‘Individual Provider Registration’ at [stlouisco.com/pdmp](http://stlouisco.com/pdmp).

Review ‘Quick Links’ at [missouri.pmpaware.net](http://missouri.pmpaware.net).

For more information visit [stlouisco.com/PDMP](http://stlouisco.com/PDMP).
PERFORMING A PATIENT SEARCH

To **log in**, visit: [missouri.pmpaware.net](http://missouri.pmpaware.net).

To find a patient’s Rx history, click ‘RxSearch-Patient Request’

- Search by patient name and date of birth.

When reviewing a patient’s Rx record:

- Review ‘Suspected Prescriber/Pharmacy Shopper’ alert, if applicable.
- View patient’s prescriptions, prescribers, and dispensers.
- Use ‘Quick Links’ for prescribing, referrals, and treatment information.

To **manage delegates**, visit ‘User Profile-Delegate Management’.

For more information visit [stlouisco.com/PDMP](http://stlouisco.com/PDMP).
The Opioid Prescribing and Pain Management Toolbox highlights evidence-based practices and guidelines to help healthcare providers deliver compassionate, clinically appropriate pain management and opioid use disorder treatment. Below are the 6 main sections included in the Toolbox.

- Building a Supportive Patient-Provider Relationship
- Screening and Assessment
- Safer Prescribing
- Harm Reduction
- Treatment Across Healthcare Settings
- Training and Educational Opportunities

For more information, visit stlouisco.com/opioids.
Safer Prescribing

The Safer Prescribing section of the Opioid Prescribing and Pain Management Toolbox has 7 main sections:

1. Prescribe Opioids at the Lowest Effective Dose
2. Limit Duration of Opioid Prescriptions for Acute Pain
3. Limit Extended-Release/Long-Acting Opioid Prescriptions
4. Reduce Dangerous Drug Combinations
5. Voluntary Tapering
6. Increase Naloxone Access
7. Chronic Pain Management Resources

For more information, including the entire Opioid Prescribing and Pain Management Toolbox, visit stlouisco.com/opioids.