



Louisiana Board of Pharmacy
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Annual Report

Fiscal Year 2019-2020

July 1, 2020

Mission

Created by the Louisiana Legislature in 1888, the mission of the Louisiana Board of Pharmacy remains unchanged over a century later: to regulate the practice of pharmacy in such a manner as to protect the public health, safety, and welfare of the citizens of Louisiana. Toward that goal, the Louisiana Pharmacy Practice Act specifically authorizes the Board to restrict the practice of pharmacy to qualified persons as well as regulate all persons and sites that sell prescription drugs or devices or provide pharmacy care services to consumers in this state.

Licensure

In order to facilitate the restriction of practice to qualified persons, the Board has established educational, experiential, and examination requirements for the credentialing of pharmacists and pharmacy technicians. As authorized by the legislature, the Board has contracted its high-stakes examination procedures with professional testing services.

A. *Examinations for Pharmacists*

The North American Pharmacist Licensure Examination (NAPLEX) and the Multistate Pharmacy Jurisprudence Examination (MPJE) are administered by the National Association of Boards of Pharmacy (NABP). These computer adaptive tests are administered in continuous window opportunities at multiple sites throughout the state. A minimum scaled score of 75 is required to pass each test; the maximum scaled score is 150 for the NAPLEX and 100 for the MPJE. NABP publishes summary data for the examinations on a trimester basis. The results for all Louisiana-based NAPLEX and MPJE candidates in Calendar Year 2019 are summarized here:

NAPLEX

	Jan – Apr	May – Aug	Sept – Dec
No. of Louisiana Candidates	24	186	41
State Mean Scaled Score	76.50	94.04	78.93
Louisiana Pass Rate	70.83%	88.17%	60.98%
No. of National Candidates	1,344	13,199	3,425
National Mean Scaled Score	77.80	95.54	80.17
National Pass Rate	61.24%	89.52%	64.55%

MPJE

	Jan – Apr	May – Aug	Sept – Dec
No. of Louisiana Candidates	157	309	157
State Mean Scaled Score	78.26	78.10	77.53
Louisiana Pass Rate	79.62%	84.41%	75.80%
No. of National Candidates	6,583	18,823	8,714
National Mean Scaled Score	77.38	78.12	76.90
National Pass Rate	76.77%	82.49%	72.66%

B. Examinations for Technicians

The Board has approved two pharmacy technician certification examinations – the Pharmacy Technician Certification Examination (PTCE) administered by the Pharmacy Technician Certification Board and the Examination for Certified Pharmacy Technicians (ExCPT) administered by National Healthcareer Association (NHA). Both examinations are computer adaptive tests which are administered in continuous window opportunities at multiple sites throughout the state. The results for all Louisiana-based PTCE and ExCPT candidates for Calendar Year 2019 are summarized here:

	PTCE		ExCPT	
	<u>Jan. – June</u>	<u>July – Dec.</u>	<u>Jan. – June</u>	<u>July – Dec.</u>
No. of Louisiana Candidates	540	467	121	115
Louisiana Pass Rate	45%	44.1%	67.8%	61.7%
No. of National Candidates	25,636	26,117	6,143	3,295
National Pass Rate	57.7%	56.1%	65.9%	72.2%

C. Census Data

At the close of the fiscal year on June 30, 2020, a review of our credential records yielded the following census information:

	<u>2020</u>	<u>2019</u>	<u>2018</u>
• Pharmacy Program			
1. Pharmacists			
> Number of active licenses	9,200	9,255	9,009
> Number of licensees within state	5,887	5,795	5,690
2. Pharmacy Interns			
> Number of active registrations	1,213	1,094	1,070
3. Pharmacy technicians			
> Number of active certificates	7,219	6,601	6,586
4. Pharmacy technician candidates			
> Number of active registrations	1,917	1,595	2,000
5. Pharmacies			
> Number of active permits	2,029	2,033	1,988
- Community – Independent	624	605	590
- Community – Chain	572	596	630
- Hospital	170	172	175
- Institutional	21	22	22
- Marijuana	9	8	0
- Nuclear	12	13	13
- Charitable	9	9	10
- Correctional	4	4	3
- Remote processor	1	2	1
- Nonresident	598	572	544
6. Equipment Permits			
> Emergency drug kit (EDK)	409	380	446
> Automated medication systems (AMS)	456	461	870
> Durable medical equipment (DME)	650	640	642

	<u>2020</u>	<u>2019</u>	<u>2018</u>
7. Special Activity Credentials			
> CDTM Registration	85	78	69
> Med. Administration Registration	3,325	3,161	3,073
> Special Work Permits	75	41	45
> Marijuana Pharmacy Designations	151	127	71
> PMP Access Registrations	21,882	19,686	15,835
<i>Subtotal of Credentials in Pharmacy Program</i>	<i>48,611</i>	<i>45,174</i>	<i>41,770</i>
• CDS Program			
1. Automated Medication System (AMS)	48	42	37
2. Advanced Practice RN (APRN)	3,880	3,435	2,980
3. Dentist	2,327	2,224	2,174
4. Drug Detection / Canine	7	6	8
5. Distributor	279	285	290
6. Podiatrist	167	163	158
7. Veterinarian	1,308	1,216	1,188
8. Animal Euthanasia Technician	29	28	29
9. Hospital	315	302	306
10. Laboratory	13	12	12
11. Physicians & Interns/Residents	14,636	14,196	13,144
12. Manufacturer	43	47	45
13. Medical Psychologist	93	91	91
14. Optometrist	363	360	349
15. Pharmacies	1,293	1,303	1,335
16. Physician Assistant	1,030	928	783
17. Registered Outsourcing Facility	16	19	19
18. Researcher	127	106	104
19. Substance Abuse Clinic	6	6	6
<i>Subtotal of Credentials in CDS Program</i>	<i>25,980</i>	<i>24,769</i>	<i>23,058</i>
<u>Total Active Credentials under Management</u>	74,591	69,943	64,828

D. New Credentials

During the past fiscal year, the Board issued 5,048 new credentials in the Pharmacy Program and 2,737 new credentials in the CDS Program. Of note within the Pharmacy Program, we issued 474 new pharmacist licenses, 505 new pharmacy technician certificates, and 1,013 new pharmacy technician candidate registrations during the past fiscal year. Of note within the CDS Program, we issued new CDS licenses to 1,553 physicians, interns and residents, as well as 568 advanced practice registered nurses, and 160 dentists.

E. License Transfer (Reciprocity)

Persons already licensed as a pharmacist by any other state who wish to obtain a license in Louisiana must successfully complete the MPJE as well as the application and criminal background check. Of the 474 new pharmacist licenses issued this past fiscal year, 213 were issued subsequent to completion of the reciprocity process.

Compliance

A. Enforcement

In order to control and regulate the practice of pharmacy in Louisiana, the Board employs seven pharmacist compliance officers to perform routine inspections and special investigations throughout the year in all places under the Board's jurisdiction. In addition to pharmacies, the compliance officers also inspect healthcare facilities to monitor compliance with controlled substance requirements. The compliance officers visited 1,403 pharmacies and other facilities during the year to perform routine inspections, site visits for permit changes and other calls for assistance. The compliance and administrative officers began the fiscal year with 179 cases from the previous fiscal years, received 403 new cases, and closed 400 cases, leaving 182 cases for the next fiscal year. Of the 400 cases closed during the fiscal year: 10 of the original complaints were withdrawn, 10 resulted from completion of previously imposed probationary periods, 96 were determined to be without violation, 11 cases were referred to other agencies, 84 resulted in field/administrative corrections, 46 resulted in administrative sanctions, and 143 cases were referred to the Board's committees. Those committees took no action in 11 of their cases and recommended voluntary consent agreements for 132 cases. Of that number, all but five accepted the proposed Board decision; those five respondents were referred for formal administrative hearings. The decisions from the formal administrative hearings resulted in three suspensions and two revocations.

Compliance officers coordinate other investigative activities with a wide range of agencies, including local police departments, parish sheriff departments, other state regulatory and law enforcement agencies, and federal agencies such as the Drug Enforcement Administration, the Food and Drug Administration, and the Consumer Product Safety Commission. Though the compliance officers utilize the educational approach as the fundamental mechanism to achieve compliance, certain circumstances warrant formal Board action.

B. Adjudications

During the past fiscal year, the Board conducted two formal administrative hearings and levied formal disciplinary action against several credentials. A summary of all the Board's disciplinary decisions is presented here:

	<u>Pharmacist</u>	<u>Intern</u>	<u>Technician</u>	<u>Candidate</u>	<u>Permit</u>	<u>CDS</u>
<u>Sanction</u>						
Reinstatement	1	0	10	0	0	0
Change Previous Orders	19	0	2	0	0	0
Assessment	0	0	0	0	9	0
Letter of Warning	1	0	0	0	1	0
Letter of Reprimand	17	0	8	0	8	0
Voluntary Surrender	9	0	2	1	0	1
Probation	5	0	1	0	4	0
Suspension	6	0	4	0	0	0
Revocation	2	0	4	2	1	0
Other Decisions	9	0	3	1	1	0

C. *Disciplinary Restrictions*

From time to time, the Board imposes disciplinary restrictions on various credentials, including probation, suspension, and other practice restrictions. Probationary periods are typically imposed for defined periods of time, whereas suspensions may be imposed for defined or indefinite periods of time. As of July 1, 2020 there were several credentials on probation, including 12 pharmacist licenses, one pharmacy intern registration, two pharmacy technician certificates, seven pharmacy permits, and one controlled substance license at a pharmacy. The number of credentials on active suspension include 56 pharmacist licenses, one pharmacy intern registration, 87 pharmacy technician certificates, 21 pharmacy technician candidate registrations, 12 pharmacy permits, six controlled substance licenses for pharmacies, and 107 controlled substance licenses for practitioners.

D. *Practitioner Recovery Program*

The Board established its program in 1988 to assist practitioners obtain treatment for their impairment, maintain their recovery, and assist their re-entry into professional practice. As of July 1, 2020 there were 34 pharmacists and six pharmacy technicians actively engaged in the recovery program. They surrendered their credentials while in treatment; following treatment and upon favorable recommendation by board-certified addiction medicine specialists, they applied for the reinstatement of their credentials. The Board reinstated their credentials on probation, and the licensees practice under various restrictions designed to monitor their re-entry to professional practice. In addition, the credentials for 40 pharmacists, three interns, 17 technicians, and four technician candidates were still on active suspension for impairment reasons.

Board Activity

A. *Legislative*

During the 2020 regular session, the Board sponsored two bills, both of which were successful.

- Act 10 amended the state's list of controlled dangerous substances to harmonize the state list with recent federal scheduling actions.
- Act 202 added new fees for the issuance and renewal of permits for pharmacy benefit managers. The measure also clarified that existing renewal fees for all credentials are annual or per year.

The legislature also adopted HCR 71 which requires the Board to suspend the collection of renewal fees for credentials issued to existing businesses located within the state during the next fiscal year. The fiscal impact of that legislative mandate for the Board is estimated to be approximately \$300,000 in reduced revenue during Fiscal Year 2020-2021.

B. *Regulatory*

The Board's Regulation Revision Committee is tasked with the continuous review of the Board's rules and their recommendation for revision as appropriate. The Board initiated and completed 17 regulatory projects during the fiscal year.

- *Project 2019-1B ~ Licensing of Marijuana Pharmacies* corrected a drafting oversight in the original marijuana pharmacy rule which had omitted the

requirement for a site inspection prior to the initial issuance of a pharmacy permit to the marijuana pharmacy.

- *Project 2019-2 ~ Pharmacy Immunizations* responded to stakeholder input in two areas. The state health department noted continuing laxity among pharmacist immunizers in reporting immunizations to the state immunization registry. The rule now requires the reporting of immunizations to the state immunization registry within 72 hours of the immunization. Immunizing pharmacists had expressed concern with inadequate staffing in certain pharmacies hosting immunization activities. The rule now contains minimum standards for staffing as well as sufficient equipment and supplies to address patient emergencies.
- *Project 2019-3 ~ Investigational Drugs* established minimum standards for all pharmacies participating in clinical drug studies and dispensing investigational drugs.
- *Project 2019-4 ~ Telepharmacy Dispensing Sites* responded to stakeholder input and reduced two restrictions placed in the original rule. The previous requirement that no other pharmacy be located within a 20-mile radius of the telepharmacy dispensing site was modified to a 15-mile radius. The previous requirement that a telepharmacy dispensing site close permanently when a regular community pharmacy opened within a 20-mile radius was modified to require a telepharmacy dispensing site to convert to a regular community pharmacy permit when its dispensing activity achieved an average of 100 prescriptions per day.
- *Project 2019-5 ~ Correctional Center Pharmacies* implemented the provisions of Act 310 of the 2016 Legislature. That law expanded the authority for state owned and operated correctional facilities to reuse prescription drugs previously dispensed to their offenders, to also include correctional facilities owned and operated by local law enforcement agencies. The rule was modified to include that expansion and other technical changes as well.
- *Project 2019-7 ~ Veterinary Hospital Pharmacy* amended the rules for hospital pharmacies to recognize veterinary hospital pharmacies owned and operated by a public university within the state and permit the pharmacist-in-charge at such hospitals to allow after-hours access to the pharmacy for emergent purposes.
- *Project 2019-8 ~ Dispensing Prescription Refills* responded to stakeholder input to address the automatic dispensing of refills not requested or approved by patients. The rule for dispensing prescription refills now requires the approval or request of the patient or caregiver, with an exception for persons residing in long-term care facilities.
- *Project 2019-9 ~ Delays of Licensure Examinations* responded to stakeholder input. The rule changes remove the required one-year delay after the third failure of a licensure examination for both pharmacists and pharmacy technicians. The rule now permits the applicant to retake such examinations as permitted by the test administrator.
- *Project 2019-10 ~ License Transfer for Pharmacy Technicians* simplified the process for pharmacy technicians licensed and practicing in other states who wish to transfer to this state.
- *Project 2019-11 ~ Continuing Education Records* amended the rule for pharmacists which had required them to maintain paper copies of their

continuing education activities at their primary place of pharmacy employment. The rule now requires pharmacists to maintain such records with CPE Monitor® and to allow the Board to access their records for audit purposes.

- *Project 2019-12 ~ Partial Fill of Schedule II Prescriptions* implemented Act 32 of the 2018 Legislature which authorized partial fills of Schedule II prescriptions, consistent with recent federal legislation. The rule change amended the state rules for controlled substances to permit such partial fills within the limits noted in federal and state law.
- *Project 2019-13 ~ CDS License for Third Party Logistics Providers* implemented Act 186 of the 2018 Legislature. That law amended the state controlled substance law to require third party logistics providers which distribute controlled substances to obtain a state controlled substance license from the Board. The rule change integrated third party logistics providers, a subset of drug distributors, into the existing rules for credentialing, security controls, and recordkeeping.
- *Project 2019-14 ~ Rulemaking Procedures* implemented a requirement of the state's Administrative Procedure Act which requires state agencies to promulgate rules to inform consumers and stakeholders how to initiate rulemaking requests to the agencies.
- *Project 2019-15 ~ Drug Disposal by Pharmacies* amended several chapters of rules to permit pharmacies to accept returns of previously dispensed prescription drugs and devices for disposal purposes. The rule changes include minimum standards for disposal of controlled substances and hazardous drugs.
- *Project 2019-16 ~ Pharmacy Compounding* amended the current compounding rule to update references to federal laws and rules and to clarify the current limitation on compounding of commercially-available preparations.
- *Project 2019-17 ~ Pharmacy Records* implemented the provisions of Act 602 of the 2018 Legislature. That law introduced a new term in the pharmacy law relative to chart orders; these orders for drugs and devices are used within institutional facilities and are analogous to prescription drug orders. The rule changes integrated chart orders into all existing rules on prescriptions and recordkeeping, and made other technical changes.
- *Project 2019-18 ~ Cannabis Metered Dose Inhaler* implemented Act 284 of the 2019 Legislature. That law amended the state medical marijuana law to authorize the Board to allow the use of cannabis metered dose inhalers as an allowable dosage form. The rule change added metered dose inhalers to the existing list of allowable dosage forms.

As directed by other legislative acts and by its own initiative, the Board started six additional regulatory projects during the fiscal year. Four of those are in various stages of the promulgation process. The proposed rule to license and regulate pharmacy benefit managers is still under review by the Occupational Licensing Review Commission for approval to initiate the formal promulgation process. The Board also adopted an emergency rule to implement the legislative mandate to suspend the collection of renewal fees for credentials issued to existing businesses located within the state during the next fiscal year.

C. Prescription Monitoring Program

The Board continued its operation of Louisiana's Prescription Monitoring Program (PMP). The vendor contract to operate the program is held by Appriss, Inc., based in Louisville, KY. The vendor's operating platform is AwareRx. Further, through its Gateway portal, the Louisiana PMP connects to other federal and state prescription monitoring programs to allow for seamless interstate data inquiries. The number of prescribers and dispensers authorized to access the program's database continues to increase, as has the average number of queries per day. Since the program is required to file an annual report to the legislature, we have appended that report to this one to facilitate its separation.

D. Public Health Emergency

The World Health Organization declared the Novel Coronavirus Disease, COVID-19, a pandemic on March 11, 2020. Louisiana declared a public health emergency due to the COVID-19 disease that same day. The Board office worked with the Board President to begin issuing a series of guidance documents beginning March 13. We reminded our licensees of the provisions of Rule 519 relative to states of emergency and then addressed a number of requests for guidance on different topics. We have issued approximately 30 guidance documents, with some containing temporary waivers of rules and extensions of deadlines.

When the Governor issued the Stay-at-Home order on March 23, we closed the Board office to visitors and sent most of the office staff home. However, the supervisors and administrative officers remained on duty in the office; in addition, the compliance officers remained on duty but suspended their inspections to all but the most critical for new pharmacy permits. Since the Governor declared pharmacies to be essential businesses encouraging them to remain open, and the Board supports those businesses with regulatory services, we have remained open for business. By the end of the first week of the Stay-at-Home order, it became clear we needed all available staff in the office. The floor plan of the Board office building facilitates physical distancing among the staff. We returned the office staff to the office on March 30. Two staff members were required to establish temporary office space in the Board's meeting room, and two particularly vulnerable staff members are still working from home. With the lifting of the Stay-at-Home order and some minor work in the building lobby, we re-opened the office to visitors on May 26.

Like many other organizations, the Board acquired virtual meeting technology in order to continue our essential meeting functions. Although we did not resume formal administrative hearings by the end of the fiscal year, we did transition our board meetings and some committee meetings to a virtual platform. Since committees involve a fewer number of participants, we continued physical meetings for some committees.

We continue to monitor the phased re-opening plan established through various proclamations issued by the Governor. We have developed an exit strategy relative to the temporary waivers, exemptions, and exceptions previously issued during the emergency period. When the Board determines it appropriate to rescind any previous guidance, we will provide advance notice of the effective date of any such changes.

Board Office

The Board currently employs 23 people on a full-time basis in a variety of professional, technical, and clerical roles; the Board also supports the local Cooperative Office Education (COE) program in Baton Rouge area high schools by hiring high school senior students on a temporary basis. The physical and mailing address of the Board office is:

Louisiana Board of Pharmacy
3388 Brentwood Drive
Baton Rouge, LA 70809-1700

The Board's website address is www.pharmacy.la.gov and general email is received at info@pharmacy.la.gov.

Conclusion

The Board has had an active year on several fronts, and all of these activities have contributed to the overall mission of the board. The officers and members of the Board, as well as the entire office staff, are committed to achieving our goal of protecting the public's health, safety and welfare through appropriate regulation of the practice of pharmacy in this state. We understand that public service is a privilege, and we endeavor to render that service honorably.

Respectfully submitted,
Malcolm J Broussard
Executive Director



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Prescription Monitoring Program Annual Report

Fiscal Year 2019-2020

July 1, 2020

Introduction

The Louisiana Prescription Monitoring Program (PMP) is an electronic database used to collect and monitor prescription data for all Schedule II, III, IV, and V controlled substances, as well as certain drugs of concern, dispensed by a pharmacy in Louisiana or to a Louisiana resident from a pharmacy located in another state. The PMP also provides a venue for monitoring patient prescription history for practitioners.

Act 676 of the 2006 Louisiana Legislature authorized the development, implementation, operation, and evaluation of an electronic system for the monitoring of controlled substances and other drugs of concern that are dispensed within the state or to state residents by pharmacies located in other states. The goal of the program is to improve the state's ability to identify and inhibit the diversion of controlled substances and drugs of concern in an efficient and cost-effective manner and in a manner that shall not impede the appropriate utilization of these drugs for legitimate medical purposes.

The PMP was implemented in August 2008. Pharmacies and dispensing prescribers were instructed how and when to transmit their dispensing transactions to the program vendor for assimilation into the PMP database. Prescribers, dispensers, and other persons authorized to access PMP information were instructed how to secure their access privileges. The web portal to the PMP database was opened to queries on January 1, 2009, and the program remains fully operational.

Advisory Council

The enabling legislation created the PMP Advisory Council to assist the Board in the development and operation of the program. The council consists of the following members, each of whom may appoint a designee:

1. The president of the Louisiana State Board of Medical Examiners;
2. The president of the Louisiana State Board of Dentistry;
3. The president of the Louisiana State Board of Nursing;
4. The president of the Louisiana State Board of Optometry Examiners;
5. The president of the Louisiana Academy of Physician Assistants;
6. The president of the Louisiana Board of Pharmacy;
7. The superintendent of the Louisiana State Police;
8. The administrator of the United States Drug Enforcement Administration;
9. The speaker of the Louisiana House of Representatives;
10. The president of the Louisiana Senate;
11. The chairman of the House Committee on Health and Welfare;
12. The chairman of the Senate Committee on Health and Welfare;
13. The secretary of the Department of Health;
14. The president of the Louisiana State Medical Society;
15. The president of the Louisiana Dental Association;
16. The president of the Louisiana Association of Nurse Practitioners;
17. The president of the Optometry Association of Louisiana;
18. The president of the Louisiana Pharmacists Association;
19. The president of the Louisiana Independent Pharmacies Association;
20. The president of the National Association of Chain Drug Stores;

21. The president of the Louisiana Sheriffs' Association;
22. The president of the Louisiana District Attorneys Association;
23. The president of the Pharmaceutical Research and Manufacturers of America;
24. The president of the Louisiana Academy of Medical Psychologists.

During Fiscal Year 2019-2020, the council convened three of their four regularly-scheduled quarterly meetings; the April 2020 meeting was canceled due to the COVID-19 public health emergency.. Representatives from six of the 24 organizations attended 100% of the meetings; nine entities attended 66%; four attended 33%, and five entities had no representation at any of the meetings. During each of the meetings, program staff presented data concerning the number of prescription transactions reported to the program database as well as the number of queries to the database by prescribers, dispensers, law enforcement, and regulatory agencies. The staff also reported on the addition of new states available through the PMP InterConnect interstate network, as well as the increased utilization by the private sector of the PMP Gateway service, which integrates the PMP access portal into existing practice information systems in a variety of settings, including hospitals, clinics, practitioner offices, and pharmacies. The council reviewed new legislation adopted during the 2019 legislative session, and staff provided updates on the operational implementation of the legislative mandates.

Program Highlights

- *October 8, 2019* – the Board transitioned to an auto-registration process for immediate access to the state prescription monitoring program (PMP) for pharmacist and medical interns.
- *October 29, 2019* – Clinical Alerts enabled. Clinical Alerts provide automatic electronic patient alerts delivered directly to a prescriber user's dashboard and registered email to notify the prescriber that the patient has exceeded a set prescriber/dispenser threshold, exceeded a daily active MME threshold, or has been prescribed an opioid and benzodiazepine concurrently.
- *April 28, 2020* – through participation with the PMP InterConnect™ sponsored by the National Association of Boards of Pharmacy, achieved connection with the United States Military Health System and 31 states/territory/district, including Alabama, Alaska, Arizona, Arkansas, Connecticut, Delaware, D.C., Florida, Georgia, Idaho, Iowa, Kansas, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Montana, Nevada, New Mexico, North Carolina, North Dakota, Oklahoma, Pennsylvania, Puerto Rico, South Carolina, South Dakota, Tennessee, Texas, Virginia and West Virginia.
- *May 21, 2020* – mandatory use monitoring reports relayed to the prescriber's licensing authority.

Louisiana PMP Statewide Integration Project

On January 1, 2019, the Board partnered with the Louisiana Dept. of Health's Office of Public Health, Bureau of Community Preparedness (LDH-OPH-BCP) and Appriss Health to provide a statewide PMP integration option to all healthcare providers in Louisiana utilizing a service called PMP Gateway®. Gateway offers healthcare

providers an option to integrate PMP data within the provider's electronic health record (EHR) or pharmacy information system to provide a streamlined clinical workflow for providers. The integration eliminates the need for providers to log in separately to the PMP web portal; instead, the EHR automatically initiates a patient query and returns the patient's PMP information directly within the provider's EHR or pharmacy information system.

Included as part of the integration, users now have access to an advanced analytics and patient support tool called NarxCare®. In addition to the existing Louisiana PMP functionality, NarxCare aggregates and analyzes prescription information from pharmacies and presents visual interactive information, as well as advanced analytic insights, machine learning risk scores and more to help prescribers and pharmacists provide better patient safety and outcomes for every patient. NarxCare also provides tools and resources that support patients' needs and assists a healthcare provider to connect their patient to treatment when appropriate. This statewide initiative is funded by a Centers for Disease Control and Prevention (CDC) grant awarded to LDH-OPH-BCP and covers the costs of the licensing fees associated with the integration and NarxCare service.

As of June 30, 2020, the Louisiana PMP was interoperable with 176 licensees (EHRs and pharmacy management systems) across the state. The 176 licensees represent more than 1,600 facilities in Louisiana and were responsible for 1,810,207 PMP requests in the month of June 2020. There are an additional 174 licensee applicants pending.

Program Metrics

The data on the following pages provide summary data for the operational aspects of the program for Calendar Year 2019. The first graphic presents information about the use of the information by the authorized users as identified in the governing legislation. Data for the different categories of prescribers are presented, including the number of prescribers authorized to obtain PMP access privileges, the number with active access privileges and the number of queries to the PMP database by those prescribers. Other authorized users include law enforcement and regulatory agencies; information concerning the number of queries originating from those entities is also presented.

The second graphic presents information concerning the numbers of controlled substance prescriptions dispense in the state, including summary data for different types of drugs like opioids and benzodiazepines. Just over 10.8 million prescriptions were dispensed in the state during Calendar Year 2019, with an average of 2.326 prescriptions per Louisiana resident – a 4% reduction from the previous calendar year.

PMP Healthcare Provider Role	Number of Providers <u>Eligible</u> for PMP Access (as of 12/31/2019)	Number of Providers <u>with</u> PMP Access Privileges (as of 12/31/2019)	Number of PMP Requests by Providers through AWA [®] During 2019	Number of PMP Requests by Providers through Gateway [®] During 2019
Physician (MD, DO)	13,140	8,760	1,610,093	8,316,025
Nurse Practitioner (APRN)	3,670	2,831	389,426	1,186,248
Dentist (DDS)	2,262	1,533	23,697	2,679
Physician Assistant (PA)	999	727	105,180	141,301
Optometrist (OD)	361	152	46	0
Podiatrist (DPM)	164	110	1,957	0
Medical Psychologist (MP)	91	80	21,654	0
Medical Intern/Resident	1,194	1,065	14,172	288
Prescriber's Delegate	NA	2,633	807,085	NA
Pharmacist (PST)	9,301	4,405	2,024,263	3,000,475
Pharmacist's Delegate	NA	1,021	177,687	NA
Totals	31,182	23,317	5,175,260	12,647,016

Law Enforcement, Prosecutorial Officials, & Specialty Courts		Regulatory Agencies		Other Roles	
DEA (patient requests)	447	Board of Medical Examiners	3,787	Medical Examiner/Coroner	321
Specialty Courts	62	Board of Dentistry	52	Louisiana Medicaid	395
FBI	284	Board Nursing	668	Total	716
Homeland Security	5	Board of Pharmacy	3,830		
Local Law Enforcement	285	DEA (licensee requests)	838		
HHS - OIG	12	Total	9,175		
State Attorney General	3				
State Police	15				
Total	1,113				



DISPENSATION DASHBOARD

A high level overview of reported dispensation activity.



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Quick Slicers:



2012 2013 2014 2015 2016 2017 2018 2019 2020



State Rx per Capita

2.326



Prescriptions

10,829,140

Quantity
Dispensed

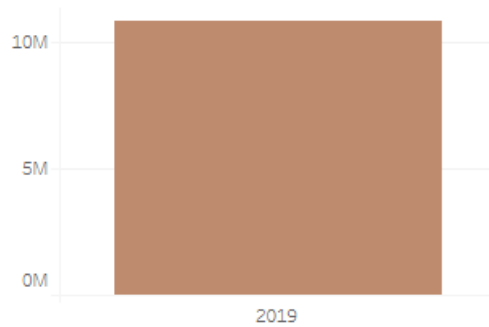
EACH (TABLETS, KITS, ETC..)	478,444K
GRAMS (SOLIDS)	3,048K
MILLILITERS (LIQUIDS)	71,666K
UNSPECIFIED	1,010K



Days Supply

254,729,528

YoY Prescriptions (#)



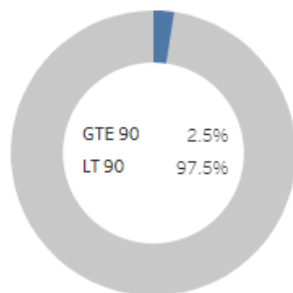
YoY Prescriptions (#) by Drug Schedule

Schedule 2	2019	4,916,105
Schedule 3	2019	740,493
Schedule 4	2019	4,337,886
Schedule 5	2019	503,530
Unscheduled	2019	319,628
Unspecified	2019	11,498

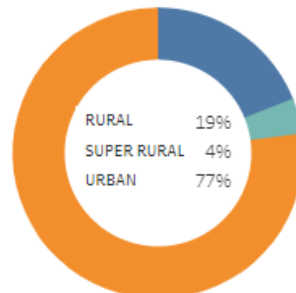
YoY Prescriptions (#) by Drug Classes

Opioid	2019	4,409,628
Benzo	2019	2,397,980
Anxiolytic, Hypnotics, Se..	2019	951,147
Other	2019	3,070,385

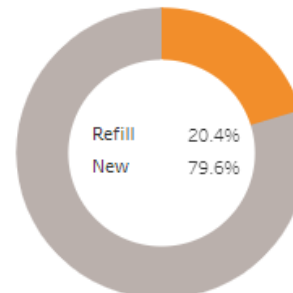
Prescriptions >= 90 MME vs. All



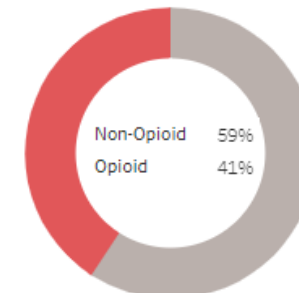
Rx by Patient Demographic Environment



New vs. Refill Prescriptions



Opioids vs. Non Opioids (%)



Conclusion

The program has completed 11 years of operation. Based on feedback from authorized users, it appears to represent an efficient and cost-effective use of resources. Data from the program suggests we have made some progress in the reduction of diversion of controlled substances. Our interstate collaborations have yielded high marks for our program design and operation. We look forward to fully developing the potential of our program to identify and inhibit the diversion of controlled substances in Louisiana.

We value and appreciate the contributions from and collaboration with our partners on the Prescription Monitoring Program Advisory Council. We also acknowledge the contributions from our administrative coordinators, Ms. Danielle Hartzog and Ms. Nerissa Montgomery, and the program manager, Mr. Joseph Fontenot, for their assistance with the development of this report and administrative oversight of the program.

Respectfully submitted,
Malcolm J Broussard
Executive Director