



# Louisiana Board of Pharmacy

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## Prescription Monitoring Program Annual Report

Fiscal Year 2014-2015

July 1, 2015

## **Introduction**

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 dispensed by a licensed pharmacy outside the state to an address within the state. 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 Prescription Monitoring Program (PMP) was implemented in August 2008. We notified pharmacies of their requirement to report all eligible prescription transactions to the program, and further, required them to report all historical data retroactive to June 1, 2008 no later than December 31, 2008. In December 2008, the Board notified all prescribers and dispensers wishing to acquire direct access privileges of the requirement to complete the web-based orientation program prior to receiving their access privileges. The web portal to the program database was opened to queries on January 1, 2009, and the program remains fully functional.

## **Advisory Council**

The enabling legislation created the PMP Advisory Council to assist the Board in the development and operation of the program. The Board shall seek, and the advisory council shall provide, information and advice regarding: (1) which controlled substances should be monitored, (2) which drugs of concern demonstrate a potential for abuse and should be monitored, (3) design and implementation of educational courses required by the PMP law, (4) methodology to be used for analysis and interpretation of prescription monitoring information, (5) design and implementation of a program evaluation component, and (6) identification of potential additional members to the advisory council. The original legislation specifically identified the 25 organizations named to the council and further, named the leader of the organization but permitted the leader to name a designee to function in the absence of the appointee. The organizations represented on the council include the licensing agencies for the prescribers and dispensers, the professional membership organizations for the prescribers and dispensers, organizations representing federal, state, and local law enforcement agencies, as well as representatives from the legislature. The advisory council has elected its own leadership, adopted policies and procedures for its operations, and meets on a quarterly basis.

## **Program Metrics**

The data on the following page provides summary data for the operational aspects of the program – number of prescription transactions reported to the program database, number of prescribers and dispensers registered to access the program data, the number of queries performed by those authorized prescribers and dispensers as well as law enforcement agencies and regulatory agencies.

Louisiana Board of Pharmacy  
Prescription Monitoring Program

| Calendar Year:                      | <u>2008</u> | <u>2009</u> | <u>2010</u> | <u>2011</u> | <u>2012</u> | <u>2013</u> | <u>2014</u> | <u>6/30/2015</u> | <u>Total</u> |
|-------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|------------------|--------------|
| <b>Prescription Database:</b>       |             |             |             |             |             |             |             |                  |              |
| Transactions Reported (in Millions) | 6.015       | 11.144      | 12.117      | 12.775      | 12.990      | 13.032      | 13.020      | 6.093            | 87.186       |
| <b>Access to Program Data:</b>      |             |             |             |             |             |             |             |                  |              |
| New prescribers registered          |             | 1,526       | 721         | 548         | 574         | 640         | 1093        | 453              | 5,555        |
| New prescriber-delegates registered |             |             |             |             |             |             | 473         | 342              | 815          |
| New pharmacists registered          |             | 728         | 483         | 361         | 494         | 509         | 466         | 170              | 3,211        |
| New pharmacist-delegates registered |             |             |             |             |             |             | 143         | 126              | 269          |
| <b>Searches Performed by Users:</b> |             |             |             |             |             |             |             |                  |              |
| Solicited by prescribers            |             | 235,985     | 368,376     | 496,270     | 650,514     | 842,139     | 942,733     | 578,347          | 4,114,364    |
| Solicited by prescriber-delegates   |             |             |             |             |             |             | 26,993      | 93,655           | 120,648      |
| Solicited by pharmacists            |             | 74,277      | 111,075     | 153,783     | 212,754     | 382,204     | 456,568     | 470,536          | 1,861,197    |
| Solicited by pharmacist-delegates   |             |             |             |             |             |             | 3,954       | 17,257           | 21,211       |
| Solicited by law enforcement        |             | 680         | 889         | 1,230       | 845         | 1,150       | 1,224       | 556              | 6,574        |
| Solicited by regulatory agencies    |             | 833         | 1,401       | 1,612       | 1,584       | 1,364       | 1,675       | 785              | 9,254        |
| Average queries per day             |             | 854         | 1,319       | 1,788       | 2,372       | 3,361       | 3,926       | 6,362            | 2,585        |

## **Legislative Mandates**

The 2014 Legislature adopted a number of measures which will serve to improve the program. Beginning August 1, 2014, pharmacies and other dispensers will be required to report their eligible prescription transactions to the program database no later than the next business day following the date of dispensing, instead of the previous seven day allowance. In addition, the Board has recently completed the rulemaking process authorized by the 2013 Legislature that will allow authorized prescribers and dispensers to appoint delegates for the purpose of retrieving data from the program's database.

The 2015 Legislature also adopted a measure that will require prescribers of certain controlled substances for the treatment of certain conditions to access the patient's history in the program database prior to initiating such treatment. The same measure will require pharmacists dispensing certain controlled substances to certain patients to access the patient's history in the program database prior to dispensing such medications.

## **Outlook for Next Fiscal Year**

The program continues to enroll new authorized users, and the daily average number of queries continues to increase. With assistance from the licensing agencies encouraging use of the program by their licensees, we hope to improve on the current 30% registration rate, as well as the daily query rate of approximately 3,000.

## **Conclusion**

The program has completed approximately seven 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 early contributions to 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 acknowledge the contributions from Ms. Danielle Meadors, our Administrative Coordinator, and Mr. Joseph Fontenot, Program Manager, for their operation of the program and the development of this report.

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