NEW MEXICO PRESCRIPTION MONITORING PROGRAM (PMP)

PMP Beginnings

- Legislation created PMP in 2004.
- Started collecting data in July 2005.
- Manual processing until 2012.
- Mandatory registration for CS registration holders in August 2012.
- 2012-2014 All health care boards enact mandatory PMP usage in rules.
- 2016 SB263 – All practitioners must check PMP on opioid prescriptions over 4 days and recheck every 3 months.

What PMP Does

- Secure Web-based program.
- Collects data on controlled medications dispensed.
- All schedules (II through V).
- May be accessed on a restricted bases.
- Includes all pharmacies filling CS prescriptions for persons living in NM.
- Must be reported within 1 business day.

How PMP Works

- CS prescribers and dispensers must register for an account.
- Patient information can be access through web-based account.

PMP Success and Accomplishments

- Increased utilization
    - 112 requests per day in 2010
    - 469 requests per day in 2012
    - 7,500 requests per day in 2016
- Increased number of users
    - 7500 user accounts (many seeded into PMP) in 2012
    - 9400 user accounts in 2016
- Decrease (11%) in those not using PMP at all by for 2015-2016
- Increase (19%) in those using PMP at least 25% of the time required 2015-2016
- Decreased number of doctor shoppers – 2010-2016
- IHS and VA reporting – beginning with Appriss AWARxE
- Decreased death rate in 2015

PMP Challenges

- No reporting by some federal facilities (such as military bases and rehabilitation facilities like a Methadone clinic).
- State and Federal laws protect Methadone clinic patients from reporting
- Increasing practitioner compliance with registration ~85% of those required have accounts 2016.
- Increasing utilization by those with accounts – although 2015-2016 saw a 20% increase, request rate still only at about 43% for chronic use patients.

Plans to Increase PMP Utilization

- Requiring an active PMP account status in order to renew a practitioner's controlled substance license.
- Building a better prescriber file (reducing multiple entries, etc.) to better assess our registration rate and identify non-registered prescribers.
- Moving to a new PMP computer platform that will allow easier identification of those not using the PMP as required by their board regulations.
- Hired a new PMP employee (through DOH CDC grant) who will aide in identification and outreach to those providers not compliant with the PMP.
- Sending out a Prescriber Feedback Report to practitioners. This report shows details of their controlled substance prescribing compared to others in their specific field of practice. It includes many dangerous prescribing behaviors as well as their PMP usage.
- Reporting to each licensing board of prescribers with no PMP use.
- Report to each licensing board of prescriber with "high risk" prescribing behavior.

Plans for next 2 years

- Hosting by Appriss – Oct 31, 2016
- Expansion of "Unsolicited Reports" or now Alerts
- Continued Implementation of "Prescriber Feedback Reports"
- Integration of PMP into Electronic Health Records across the state