



Alaska Prescription Drug Monitoring Program Report to the 33rd Alaska State Legislature (2023)

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Contents

INTRODUCTION	2
PERFORMANCE MEASURE: MAINTAIN SECURITY OF THE PDMP	2
PERFORMANCE MEASURE: REDUCE THE INAPPROPRIATE USE OR PRESCRIPTION OF CONTROLLED SUBSTANCES RESULTING FROM THE USE OF THE PDMP DATABASE ...	4

INTRODUCTION

The Prescription Drug Monitoring Program (PDMP) is the state’s controlled substance prescription database, created by the passage of Senate Bill 196 in 2008, and made mandatory for licensed prescribers with federal Drug Enforcement Administration (DEA) registration numbers by the passage of Senate Bill 74 in 2016. The PDMP is housed in the Board of Pharmacy, under the Department of Commerce, Community, and Economic Development (DCCED), Division of Corporations, Business and Professional Licensing (CBPL). At present, all 50 states, the District of Columbia, Guam, and the Northern Mariana Islands have operational PDMPs. For a historical account of the evolution of the PDMP, please see previous Legislative Reports found on the Alaska PDMP website: pdmp.alaska.gov.

Providers with an active Alaska license and a Drug Enforcement Administration (DEA) Registration Number from any state or practice location, and pharmacists who dispense federally scheduled II – IV controlled substances are required to register with the PDMP. Prior to prescribing, administering, or dispensing a federally scheduled II – III controlled substance, providers must review the patient’s prescription history in the PDMP. Pharmacists are exempt from reviewing but may choose to do so. Unless administered under an excepted circumstance, Pharmacists and dispensing practitioners are required to report all federally scheduled II – IV controlled substances daily (except on state holidays and weekends).

In 2022, the following boards participated in the PDMP: the State Medical Board, Board of Nursing, Board of Dental Examiners, Board of Examiners in Optometry, Board of Pharmacy, and the Board of Veterinary Examiners. The following table breaks down the number of registered users by board. This table does not include delegates, Veterans Affairs (VA), Military, IHS or out of state providers:

Licensing Board	# Registered Users
Dental	634
Medical	4,620
Nursing	1,158
Optometry	90
Pharmacy	710
Veterinarian	321

The following is provided in accordance with AS 17.30.200(m).

PERFORMANCE MEASURE: MAINTAIN SECURITY OF THE PDMP

(AS 17.30.200(M)(2)(A))

The PDMP complies with confidentiality requirements set out under AS 17.30.200(d) and ensures confidentiality when the database and information contained in the database is used by practitioners, delegates, and other authorized users.

SECURITY FOR THE PDMP ADMINISTRATOR

The PDMP Manager is the only personnel authorized to access the PDMP database for operational and review purposes in accordance with AS 17.30.200(d)(1). The PDMP vendor, Bamboo Health, has

issued a unique administrative log-in credential to this individual; credentials are not used or shared by any other employee of the State of Alaska.

SECURITY FOR PRACTITIONERS

In accordance with AS 17.30.200(d)(3), respective board staff review credentials and approve or deny registration requests. Credentials include an active professional license in Alaska and a valid DEA registration. Professional licenses are reviewed using a primary verification source, which is CBPL’s professional licensing database, CBP Portal. CBP Portal serves as a primary source verification because it is the system used to review application packets and issue licenses. Upon initial registration, the provider must agree to an End User Licensing Agreement statement related to the intended use of the PDMP and its confidentiality.

Once approved, providers are only given user rights to certain functions of the database, including the ability to conduct patient prescription history requests, approve delegate requests, access dashboard announcements, review their own reviewing compliance, and update profile information including specialty designations. Practitioners cannot update their own permissions, to ensure they cannot access other functions of the PDMP intended only for administrative use, such as reviewing registration requests or posting announcements on the dashboard. DEA registration numbers are not shared, and all but the last four digits of the DEA registration numbers are redacted when issuing prescriber report cards. PDMP passwords expire every 180 days to support continued confidentiality for each user authorized to access the database.

Concerns persist about the lack of audit trail of users accessing PDMP data under the login of a facility medical director. Potential updates in technology provided to all user health care facilities may resolve this problem.

SECURITY FOR DELEGATES

In accordance with AS 17.30.200(d)(3)(4) and 12 AAC 52.860, PDMP staff ensure individuals submitting registration requests as delegates are screened for requisite information, which includes holding an active professional license in Alaska (unless employed by the Veterans Affairs which are permitted access under 38 CFR Part 17). Delegate registrations are not approved by the PDMP staff until an authorizing practitioner under whom the delegate is requesting access has also approved that delegate. If delegates have indicated multiple supervising practitioners, delegate registration will be approved after one practitioner has approved the individual. The individual will only be able to query or report on behalf of the approved supervisor(s). Delegates can have up to ten supervisors to ensure the delegate has a meaningful relationship with the patient/client.

Delegate Role	# Registered Users
Prescriber Delegate - Licensed	484
IHS Prescriber Delegate – Licensed	46
Military Prescriber Delegate – Licensed	1
VA Prescriber Delegate – Licensed in AK	7
VA Prescriber Delegate – Unlicensed in AK	4
Pharmacist's Delegate - Licensed	93
IHS Pharmacist’s Delegate – Licensed	8

SECURITY FOR LAW ENFORCEMENT

In accordance with AS 17.30.200(d)(5), the PDMP Manager screens requests for patient, prescriber, and dispenser search and dispensation history for documentation that demonstrates probable cause for investigative access to the confidential information. Per AS 17.30.200(d), information contained within the database is not released to federal, state, or local law enforcement unless a court-ordered subpoena or search warrant is presented with the request. All requests processed are logged and a transmittal receipt letter is generated to document when reports are submitted to these agencies. The PDMP Manager responded to 87 subpoenas in 2022.

SECURITY FOR DATA PURPOSES

The PDMP shares information with emergency departments and Alaska hospitals through secure information exchange networks. Providers can query the PDMP to review patient prescription history information using a single sign-on mechanism if their clinic or institution's electronic health record (EHR) system has integrated with the PDMP through the intrastate data sharing hub, Statewide Gateway. Data is not stored for reuse or redistribution. In 2020, CBPL began executing Memorandums of Understanding (MOUs) with healthcare entities to improve access to patient prescription information within the patient's medical record; and created a standard template MOU for integrations. PDMP information is also shared with the Department of Health (DOH) through the Commissioner or Commissioner's delegate; however, data transmitted to DOH is de-identified and contains regional information only.

SECURITY FOR MEDICAL EXAMINERS AND MEDICOLEGAL DEATH INVESTIGATORS

Medical examiners employed by the State of Alaska are authorized to have direct access to the PDMP under AS 17.30.200(d)(9) for investigating the cause and manner of death. The PDMP Manager manually reviews a medical examiner's account details prior to approval.

PERFORMANCE MEASURE: REDUCE THE INAPPROPRIATE USE OR PRESCRIPTION OF CONTROLLED SUBSTANCES RESULTING FROM THE USE OF THE PDMP DATABASE

(AS 17.30.200(M)(2)(B))

Although the PDMP serves as a tool to assist authorized law enforcement in detecting drug diversion, misuse, and abuse, its contribution to reduce the inappropriate use or prescription of controlled substances is indirect. Additionally, it is not possible to quantify the reduction of inappropriate use of, or prescription of these medications as the PDMP does not contain or receive prosecutorial data from law enforcement agencies (e.g.: the DEA, local police departments, or state and federal courts) regarding diversion cases when an individual, whether a patient or provider, has avoided inappropriate use or prescribing. Because of these limitations, the PDMP is not able to report on inappropriate use or prescriptions of controlled substances. There may also be other factors attributed to reductions of inappropriate controlled substance use or prescribing, if any, including provider education, which is independent of the database. Further, the PDMP does not log when a practitioner or pharmacist has considered, but ultimately declined, to prescribe, administer, or dispense a controlled substance.

Each licensing board makes the ultimate determination following an investigation and due process as to whether a licensed provider has prescribed or dispensed prescriptions inappropriately or outside the scope of generally safe standards of practice.