Workers' Comp

Ask The Pharmacist: Prescription Drug Monitoring Programs (PDMP)

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How are Prescription Drug Monitoring Programs used when managing or prescribing opioid medications?

Prescription Drug Monitoring Programs (PDMPs) are electronic databases designed to track and monitor controlled substance dispensing. These databases are run at the state level, and the main intent of such programs is to screen for suspected drug diversion (i.e., using drugs for illegal purposes such as selling prescribed medications for profit) and abuse.

Access to each PDMP is determined by the individual state, but they are typically available to health care providers and pharmacists as a means of reviewing a patient's-controlled substance history regardless of source of dispensing (i.e., pharmacy, clinic, hospital) or form of payment (i.e., cash, insurance claim, etc.). Most states also allow federal, state, and local law enforcement access when needed for investigative purposes, with some state programs housed and operated by a law enforcement agency (California, Hawaii, New Jersey, Oklahoma, Pennsylvania, Texas). Patients may access their own information in most states, with other types of authorized users varying state-to-state. Six states (Arizona, Ohio, Montana, North Dakota, Utah, Washington) include workers' comp specialists as authorized recipients of PDMP data.

Prescription data is uploaded to the databases by dispensers at different intervals depending on state regulations, with timelines ranging from "point of sale" (i.e., within five minutes) to daily, to every 72 hours, to weekly, to bi-weekly. PDMPs can be accessed or queried by authorized users to check a patient's prescription-controlled substance history, but they can also be used by states to analyze overall trends and areas of concern, including inappropriate prescribing patterns. Many states actively manage the PDMP data by sending initiative-taking "unsolicited reports" to providers and other entities when patients meet certain criteria identifying them as at risk for abuse, misuse, or overdose.

As of December 2022, there are 54 operational PDMPs in the United States (49 states; St. Louis County Missouri; the District of Columbia; and three U.S. territories—Guam, the Northern Mariana Islands and Puerto Rico). Missouri is the last state to enact a PDMP. Furthering the efforts of state PDMPs, the National Association of Boards of Pharmacy (NABP) provides a means for secure exchange of prescription data across state lines for participating state prescription monitoring programs. NABP and Appriss Health's technology PMP InterConnect celebrated its 10th anniversary in 2021 and facilitates data sharing to 52 of the 54 PDMPs in the U.S. and its territories with greater than 400 million interstate transactions processed each month.

PDMPs can be a useful tool for mitigating risk and for informing prescribing decisions to drive towards best practices. Prescribers who are considering opioids or other controlled substance medications for their patient should be encouraged to check their state's PDMP prior to initiating opioid therapy and periodically throughout treatment in accordance with clinical guidelines. More information on state PDMPs may be found on individual state websites and on the websites for the National Alliance for Model State Drug Laws (NAMSDL) and the Prescription Drug Monitoring Program Training and Technical Assistance Center (PDMP TTAC).

This information is meant to serve as a general overview, and any specific questions or concerns should be more fully reviewed with your health care professional such as the prescribing doctor or dispensing pharmacist.

Do you have a workers' compensation or auto related pharmacy question? Send us an email at AskThePharmacist@enlyte.com.

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