

# Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover



# Introduction to the The Strategic Prevention Framework for Prescription Drugs (SPF Rx) Grant Program

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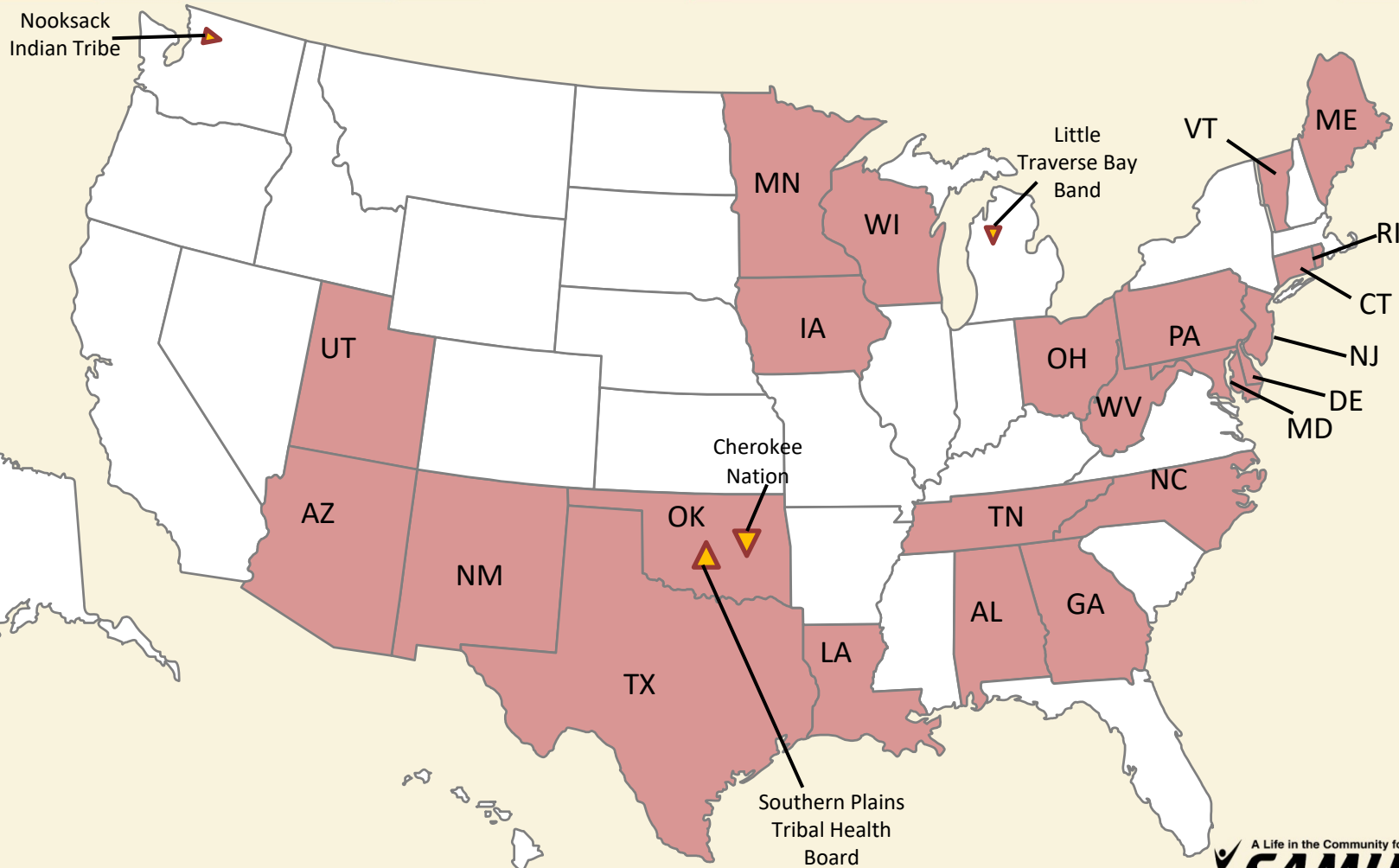
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# SPF Rx: Background

- The Strategic Prevention Framework for Prescription Drugs (SPF Rx) grant program intends to assist grantees in developing capacity and expertise in the use of data from state-run Prescription Drug Monitoring Programs (PDMPs).
- SPF Rx builds on the established SPF-based state and tribal prevention infrastructures.
- The focus of SPF Rx is on prescription drug misuse among youth ages 12-17 and adults 18 years of age and older.

# SPF Rx: Grantees



# SPF Rx: Selection Criteria

- Need and utility of the grant to address prescription drug misuse within the applicant's state or tribe
- Proposed approach to address the goals and objectives of the grant program
- Capacity to use PMDP data
- Ability to collect and report data to show performance of grant program

# SPF Rx: Grantee Expectations

- Raise awareness of the dangers of sharing medications, and work with pharmaceutical and medical communities on the risks of overprescribing to young adults
- Implement prescription drug misuse prevention activities and education to schools, communities, parents, prescribers, and their patients

# Evaluation and Technical Assistance

- Role of Program Evaluation for Prevention Contract (PEPC)
- Role of the Center for the Application of Prevention Technologies (CAPT)

# SPF Rx Cross-Site Evaluation Questions

1. Did SPF Rx implementation improve prescription drug outcomes over time?
2. How was SPF Rx funding leveraged with other funding to address prescription drug misuse and opioid overdose?



# SPF Rx Cross-Site Evaluation Questions

3. What factors accounted for variation in performance on grantee- and community-level outcomes across grantees?
4. What are the barriers and facilitators associated with SPF Rx implementation?

# SPF Rx Technical Assistance

- Provides technical assistance with implementing the Rx program
- Key TA activities include:
  - Applying the Strategic Prevention Framework
  - Implementing evidence-based programs, practices and policies
  - Using data to inform strategic planning

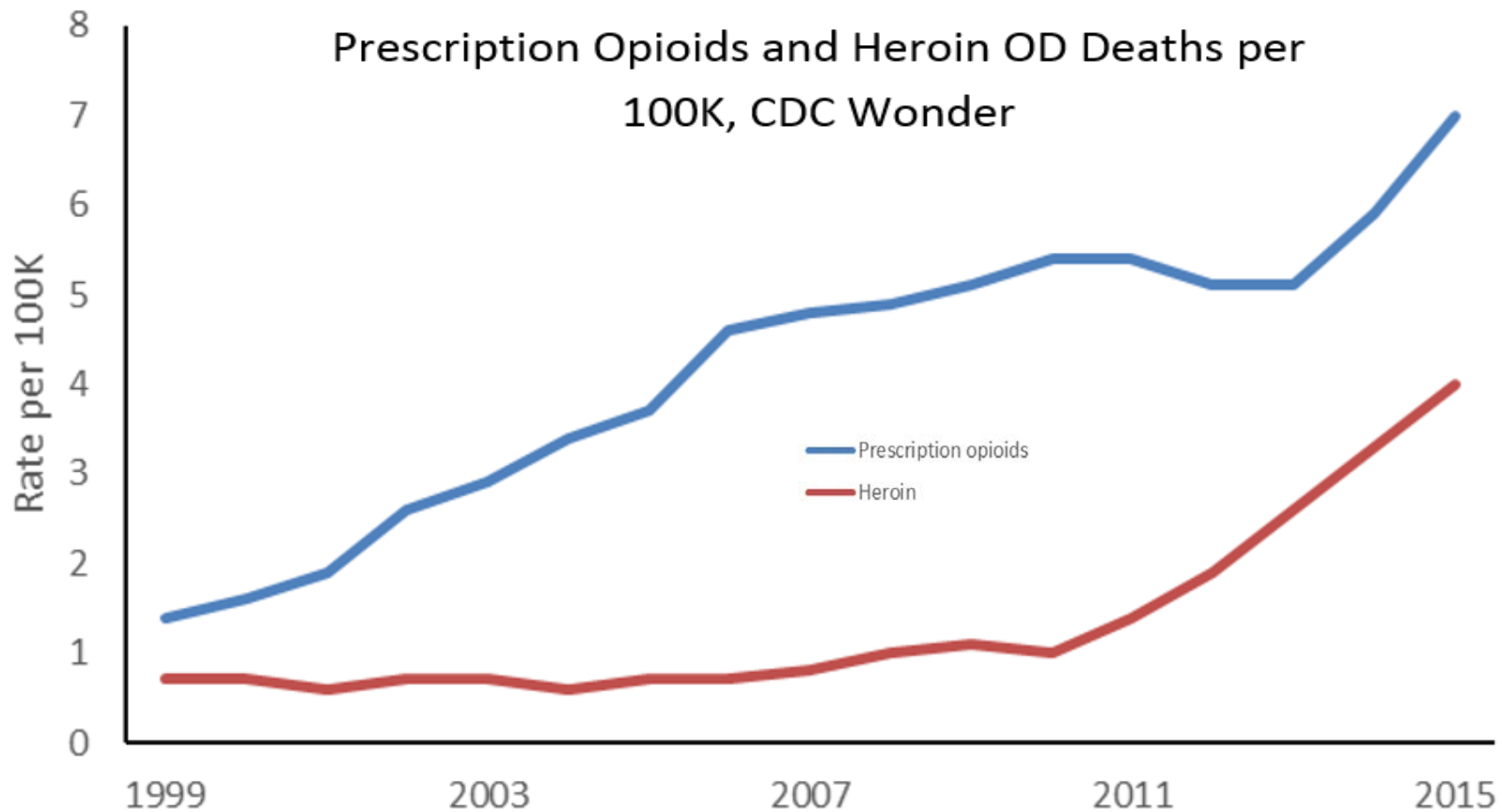


## Assessing Opioid Misuse and Overdose Using Prescription Drug Monitoring Programs (PDMP) and Other Data Sources

Sandeep Kasat, Associate Director of Epidemiology, CAPT Core

Alyssa O'Hair, Regional Coordinator, CAPT West Resource Team

# The Opioid Crisis: Prescription Opioids and Heroin Overdose (OD) Death Trends



# Why Look at PDMPs?

- About two-thirds of all opioid overdose deaths are related to prescription opioids
- PDMPs have been consistently tracking opioid prescriptions for years
- PDMP data strengths:
  - Available in “real time” (compared to other health data)
  - Rates by state, county, region/city, and location over time
  - Available by drug type, patient, prescriber, and pharmacy

# PDMP Data in SAMHSA Initiatives

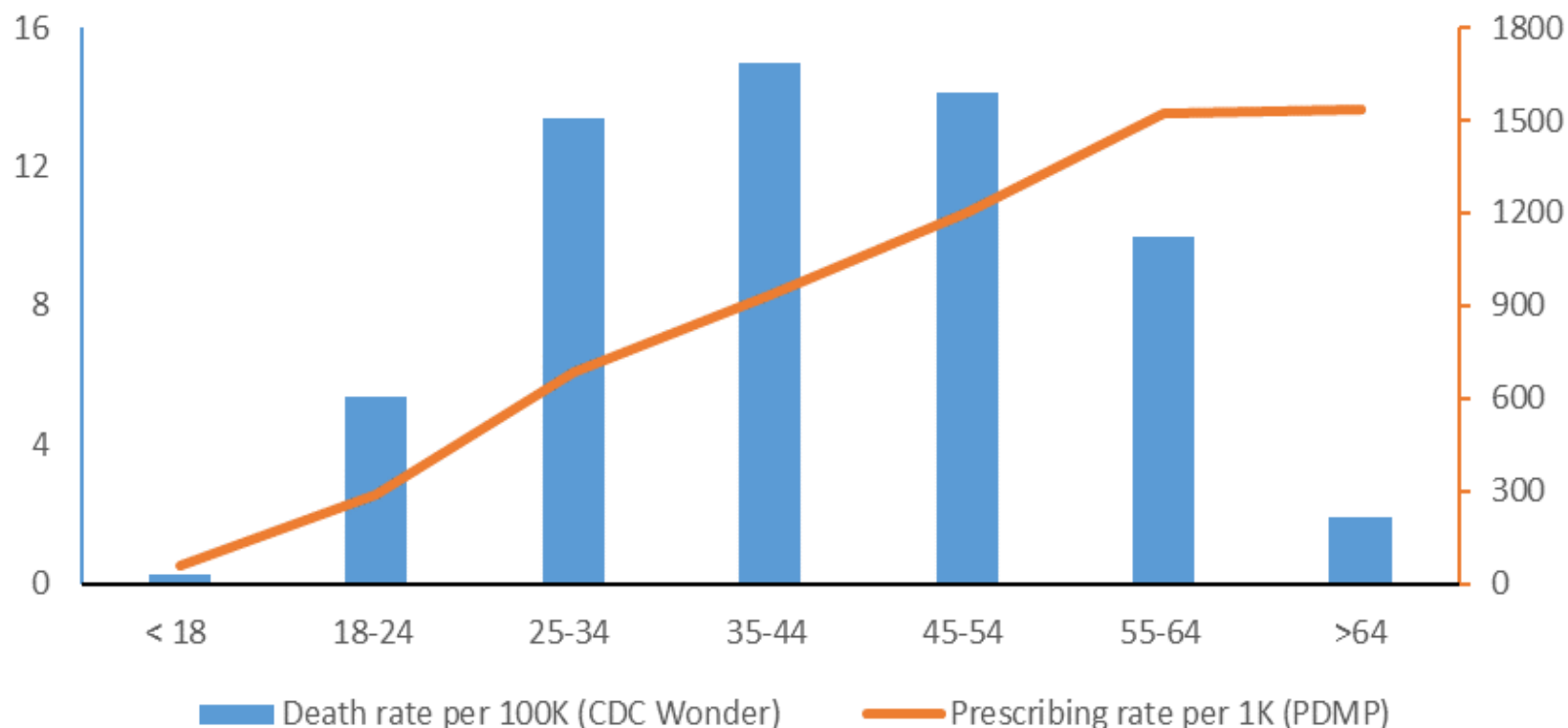
- **SPF Rx**
  - Use PDMP and epidemiological data to identify prevalence; identify and address PDMP data gaps
- **State Targeted Response to the Opioid Crisis Grants (Opioid STR)**
  - Use opioid overdose, PDMP, and other epidemiological data to conduct needs assessment; enhance use of PDMPs
- **Grants to Prevent Prescription Drug/Opioid Overdose-Related Deaths (PDO)**
  - Needs assessment of prescription drug/opioid overdose issue to identify areas/populations of greatest need

# Looking at PDMP and Other Data Sources to Understand the Opioid Crisis



# Prescribing Rates vs. Overdose Deaths in 2015 (PDMP and CDC Wonder)

OD Deaths and Opioid Prescribing by Age in 10 PBSS States\*

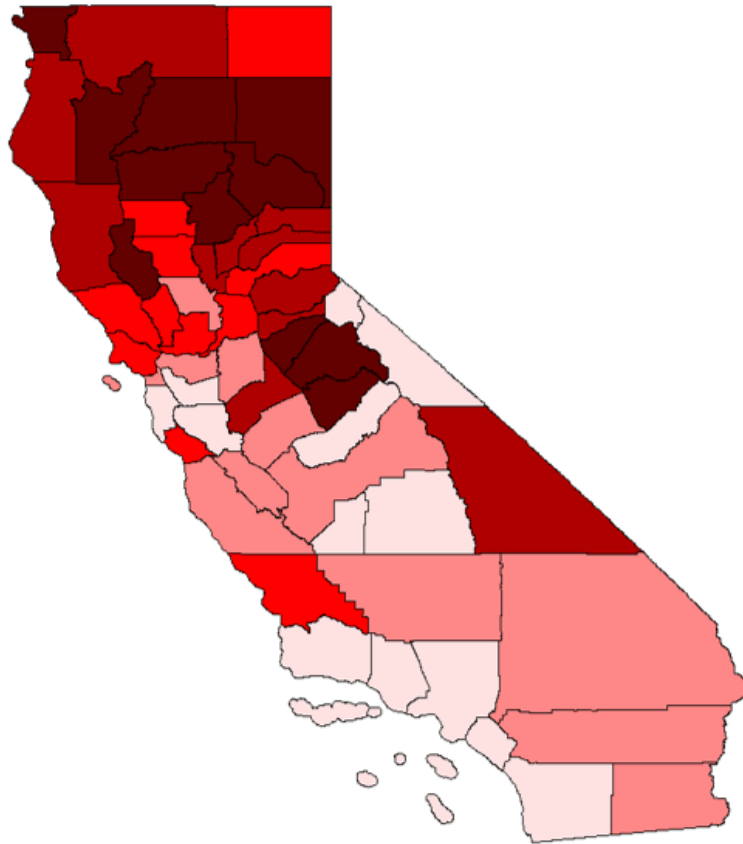


\*<http://www.pdmpassist.org/content/prescription-behavior-surveillance-system>

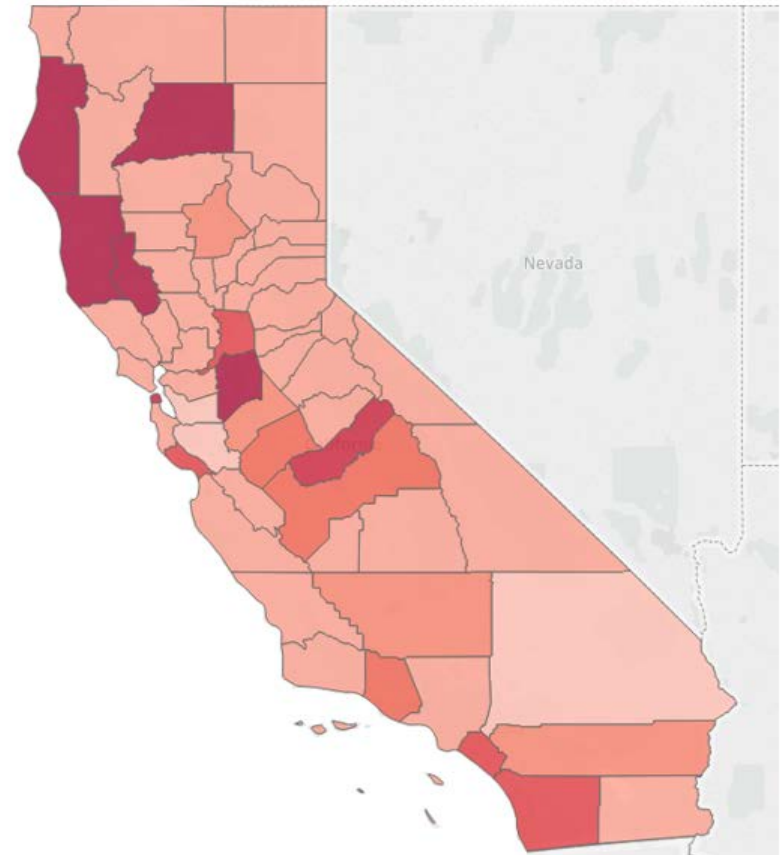


# Excessive Dosage and Overdose Deaths by County, California 2013

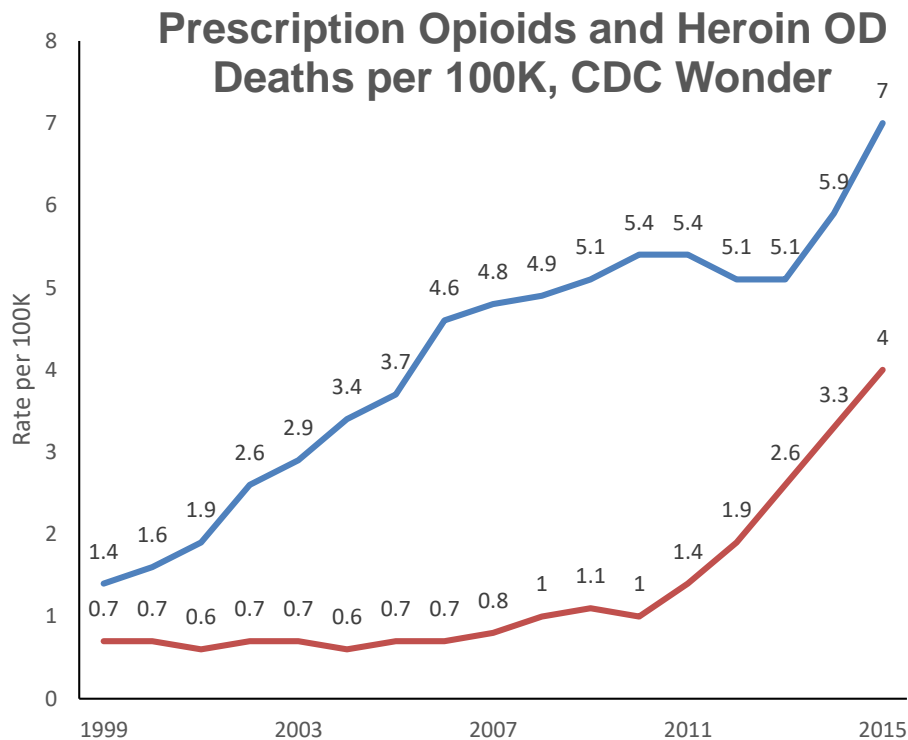
Percent of residents receiving >100 MME  
(Source: CA PDMP)



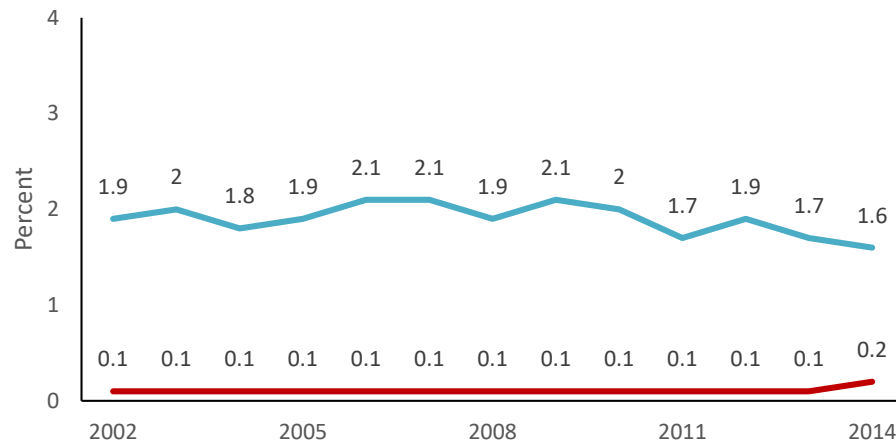
Prescription opioid-involved OD deaths per 100K  
(Source: CDC Wonder)



# The Opioid Crisis: Overdose Deaths and Misuse Trends



### Past Month Non-medical Prescription Painkillers and Heroin Use, NSDUH



# Making Sense of Data Findings

| Observation  | Possible Reasons  | Possible Solutions  |
|--|---|---|
| Opioid prescribing rate age categories do not match with overdose (OD) age categories for older ages | <ul style="list-style-type: none"> <li>• Opioid prescribing rate may not be the best indicator for predicting OD deaths</li> <li>• Legitimate opioid use more common in older adults</li> </ul>   | <ul style="list-style-type: none"> <li>• Look at doctor shopping/multiple provider episodes</li> <li>• Look at additional indicators like patient diagnosis</li> </ul>                  |
| High dosage rate counties do not match with high OD rate counties                                    | <ul style="list-style-type: none"> <li>• Age/gender may be playing a confounding role</li> <li>• Obtaining prescriptions from a doctor/pharmacy in adjacent county</li> <li>• Access to emergency room (ER)/hospital care in a county different than the prescription fill</li> </ul> | <ul style="list-style-type: none"> <li>• Look at demographic distribution across counties</li> <li>• Look at additional indicators (e.g., patient diagnosis, access to care)</li> </ul> |
| OD deaths do not match opioid misuse rates   | <ul style="list-style-type: none"> <li>• Past-month opioid/heroin misuse may not be the best indicator for predicting OD deaths</li> </ul>  | <ul style="list-style-type: none"> <li>• Look at additional indicators (e.g., high dosage prescriptions, dangerous combinations, ER admissions)</li> </ul>                              |

**Each data source only gives you one piece of the puzzle.  
Multiple data sources/indicators can help you see the bigger picture.**

# Limitations of PDMP Data

- Access to data is limited by each state's, tribe's, or jurisdiction's legislation
- Race and ethnicity not recorded on patient's prescription
- Does not include patient diagnosis (for example, cancer) or physical specialty (for example, pain management clinic)

# Summary

- PDMP data is useful, but PDMP data alone may not be helpful in identifying prevention needs.
- Looking at additional data sources (e.g., overdose, hospitalization, treatment, misuse) can help you identify priorities.
- PDMP data can be useful in identifying prescribers and pharmacies that should be involved in prevention efforts.

# Additional Data Sources

- Center for Disease Control and Prevention Multiple Cause of Death (CDC WONDER)\*
- Agency for Healthcare Research and Quality's (AHRQ) Healthcare Cost and Utilization Project (HCUP)\*
- SAMHSA's Treatment Episode Dataset (TEDS)\*
- Center for Medicare and Medicaid Services Medicare Part D Prescriber Data\*
- SAMHSA's National Survey of Drug Use and Health (NSDUH)\*
- Federal Bureau of Investigation Uniform Crime Reporting (UCR) System
- American Association of Poison Control Center's National Poison Data System (NPDS)

**\* Available on CAPT's Substance Abuse Prevention Planning and Epidemiology Tool (SAPPET) at [www.sappet-epi.com](http://www.sappet-epi.com) (password: sappet)**

# CAPT Resources on Opioid-related Prevention Planning

- Data System
  - Substance Abuse Prevention Planning and Epidemiology Tool (SAPPET)
- Archived Webinars
  - Using Prescription Drug Monitoring Program Data in Prevention Planning
  - Examples of Logic Models for Addressing Opioid-related Overdose Deaths
- Products
  - Preventing prescription drug misuse: factors and strategies
  - Opioid-related National Data Sources and Indicators
  - Preventing Heroin Use: Facts, Factors, and Strategies

# Thank you!

For more information, please contact:

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# Using Prescription Monitoring Program and Other Data for Prescription Drug and Opioid Misuse Prevention in Minnesota

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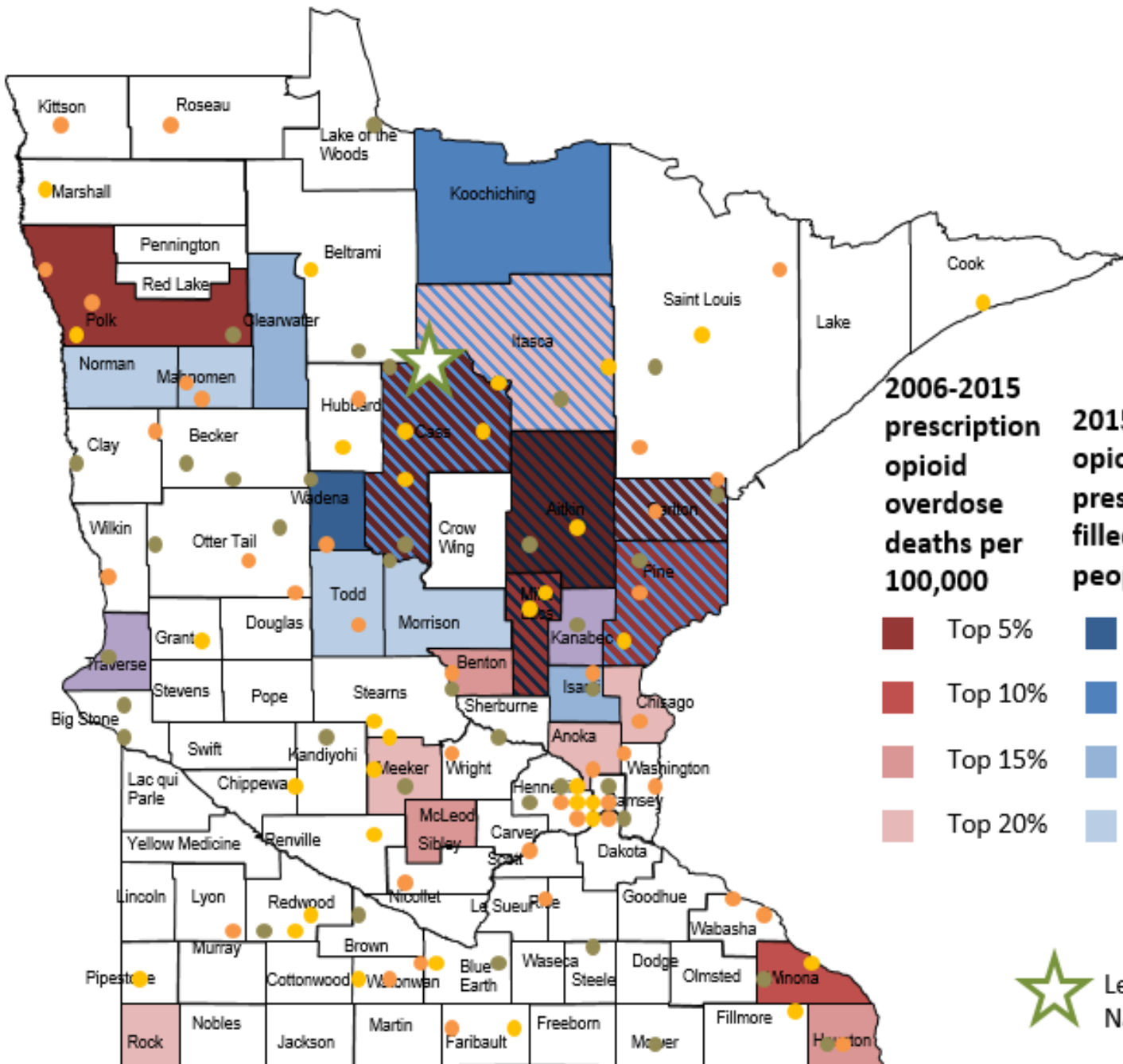
# Strategic Prevention Framework (SPF) Rx and State Targeted Response (STR) Prevention

- Partnering with Board of Pharmacy on statewide provider education
- Funding communities to implement SPF to address Rx drug misuse and illicit opioid use



# Prioritization Process

- Review of potential data sources and indicators: years available, geographic level, strengths, limitations
- State Epidemiological Outcomes Workgroup vote on final three indicators
  - Rate of opioid prescriptions filled (Prescription Monitoring Program)
  - Rate of opioid overdose deaths (vital statistics)
  - Percent of youth reporting past-year prescription pain reliever misuse (Minnesota Student Survey)



**2006-2015  
prescription  
opioid  
overdose  
deaths per  
100,000**

**2015 rate of  
opioid  
prescriptions  
filled per 100  
people**

**2016 percent  
of youth past-  
year  
prescription  
pain reliever  
misuse**

- |           |           |           |
|-----------|-----------|-----------|
| ■ Top 5%  | ■ Top 5%  | ● Top 5%  |
| ■ Top 10% | ■ Top 10% | ● Top 10% |
| ■ Top 15% | ■ Top 15% | ● Top 15% |
| ■ Top 20% | ■ Top 20% |           |



# Minnesota Prescription Monitoring Program Data

## Strengths

- Available at the county level
- Data exchange with other states
- Use of PMP by providers and pharmacists is growing
- Data on 20 types of opioid prescriptions
- Tracks multiple prescriber and dispenser episodes

## Limitations

- County of residence on file with pharmacy not always up to date
- No data from treatment providers
- No data from non-Indian Health Service tribal providers
- Limited demographic data
- Data from 2014 and earlier no longer available

## Other Data Sources Used

| SOURCE   | INDICATORS  | DEMOGRAPHICS   | GEOGRAPHIC LEVEL |
|--|---|--|------------------|
| <b>Minnesota Student Survey</b>                | <ul style="list-style-type: none"> <li>•Any Rx misuse</li> <li>•Pain reliever misuse</li> <li>•Heroin use</li> <li>•Rx misuse risk</li> <li>•Rx misuse disapproval</li> </ul> | <ul style="list-style-type: none"> <li>•Grade</li> <li>•Sex</li> <li>•Race/ethnicity</li> <li>•Sexual orientation</li> <li>•Gender identity</li> </ul> | School district  |
| <b>Minnesota Survey of Adult Substance Use</b> | <ul style="list-style-type: none"> <li>•Pain reliever misuse</li> <li>•Heroin use</li> </ul>  | <ul style="list-style-type: none"> <li>•Age</li> <li>•Sex</li> <li>•Race/ethnicity</li> <li>•Sexual orientation</li> </ul>                             | Region           |
| <b>Vital Statistics/Death Certificate Data</b> | <ul style="list-style-type: none"> <li>•Rx opioid overdose deaths</li> <li>•Heroin overdose deaths</li> </ul>   | <ul style="list-style-type: none"> <li>•Age</li> <li>•Sex</li> <li>•Race/ethnicity</li> </ul>  | Zip code         |

## Other Data Sources Used

| SOURCE   | INDICATORS   | DEMOGRAPHICS   | GEOGRAPHIC LEVEL |
|--|--|--|------------------|
| <b>Medicaid Claims Data</b>                                    | <ul style="list-style-type: none"> <li>• Neonatal abstinence syndrome</li> <li>• Maternal opioid use (pain relievers, methadone, buprenorphine)</li> </ul> | <ul style="list-style-type: none"> <li>• Age</li> <li>• Race/ethnicity</li> </ul>                | Zip code         |
| <b>Drug and Alcohol Abuse Normative Evaluation System</b>      | <ul style="list-style-type: none"> <li>• Admissions for heroin as primary-tertiary substance of abuse</li> <li>• Admissions for other opioids</li> </ul>   | <ul style="list-style-type: none"> <li>• Age</li> <li>• Sex</li> <li>• Race/ethnicity</li> </ul> | County           |
| <b>National Emergency Medical Services Information System*</b> | <ul style="list-style-type: none"> <li>• EMS runs involving overdose</li> <li>• EMS runs involving naloxone</li> </ul>                                     | <ul style="list-style-type: none"> <li>• Age</li> <li>• Sex</li> <li>• Race/ethnicity</li> </ul> | Zip code         |

# Challenges and Opportunities

- Enhance collaboration between tribal nations and Board of Pharmacy
- Collect data on misuse of buprenorphine
- Evaluate efforts on-reservation, off-reservation among tribal youth, and off-reservation among non-tribal youth





# Minnesota Resources

- Minnesota Prescription Monitoring Program, Reports and Statistics:  
<http://pmp.pharmacy.state.mn.us/reports-and-statistics.html>
- Substance Use in Minnesota: [www.sumn.org](http://www.sumn.org)
- Minnesota Department of Health, Opioid Dashboard: *Coming soon!*

# Thank you!

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