

Statement of recommendation – Reduce the timeframe in which dispensers must report to the PMP from within 7 days of dispensing to within 24 hours of dispensing.

ADDITIONAL INFORMATION: The numbers below reflect the number of individuals identified as meeting or exceeding the described criteria. For example: On May 4, 2015 541 individuals received prescriptions from 2 or more prescribers.

Within 7 Days Date Range	>=2 Prescribers	>=2 Pharmacies	>2 Prescribers and Pharmacies
5/1-5/7	9529	5017	2934
4/1-4/7	8987	4966	
3/1-3/7	8844	4495	2644
2/1-2/7	8947	4986	
1/1-1/7	8531	4903	
Within 3 Days Date Range	>=2 Prescribers	>=2 Pharmacies	
5/4-5/6	2992	1502	769
4/4-4/6	2946	1500	
3/4-3/6	2529	1208	591
2/4-2/6	2905	1493	
1/4-1/6	2339	1249	
Within 24 Hours Date	>=2 Prescribers	>=2 Pharmacies	
4-May	541	189	79
6-Apr	510	277	
6-Mar	473	220	78
6-Feb	523	239	
6-Jan	529	290	

Virginia’s Prescription Monitoring Program to add MEDD score to Patient Reports

New information was added to PMP patient reports on June 2, 2015. An “Active Cumulative Morphine Equivalent” score will be displayed just to the right of the patient information section of the report if the patient has active prescriptions for opioids. Also commonly known as the Morphine Equivalent Daily Dose (MEDD), this feature is meant to readily identify the potency among different opioids as a single score describing the equivalent dose of morphine taken on a daily basis.

Active Cumulative Morphine Equivalent
****See explanation provided at the end of the report****

135

At the end of the PMP report the following information will be displayed:

The CDC reports that an MEDD score of 100 or more represents a significant increase in overdose risk for patients.

Morphine Equivalent Table

Drug	Morphine Equivalent Multiplier
Buprenorphine	10
Codeine	0.15
Fentanyl	7.2
Hydrocodone	1
Hydromorphone	4

Drug	Morphine Equivalent Multiplier
Methadone	3
Morphine	1
Oxycodone	1.5
Oxymorphone	3
Tramadol	0.1

This table will show the prescriptions used to compute the MEDD score.

US Department of Health and Human Services, Center for Disease Control

Rx#	Drug	Strength		Multiplier		Quantity		Days		Daily MED
02083844	METHADONE HYDROCHLORIDE, 10 MG, TAB	10 MG	X	3	X	84.00	+	28	=	90.00
02083843	OXYCODONE HYDROCHLORIDE, 10 MG, TAB	10 MG	X	1.5	X	84.00	+	28	=	45.00
Active Cumulative Morphine Equivalent										135.00

This score calculates a score for opioids dispensed to a patient. It does not reflect any information on the use of any other type of controlled substance such as benzodiazepines, stimulants, or sedatives.

Additionally, if a patient does not have an active prescription for an opiate no score will be visible on the report.

Additional Information Links:

National Guideline Clearinghouse-- Interagency guideline on opioid dosing for chronic non-cancer pain: an educational aid to improve care and safety with opioid therapy:

<http://www.guideline.gov/content.aspx?id=23792>

CDC common elements in guidelines for prescribing opioids for chronic pain:

http://www.cdc.gov/homeandrecreationalsafety/pdf/Common_Elements_in_Guidelines_for_Prescribing_Opioids-a.pdf

Presentation—Clinical Guidelines for Opioid Analgesic Prescribing:

<http://www.nascsa.org/Conference2014/Presentations/jones.pdf>

MEDD Calculators:

https://www.ohiopmp.gov/portal/MED_Calculator.aspx

<http://agencymeddirectors.wa.gov/mobile.html>

<http://www.nyc.gov/html/doh/html/mental/MME.html>



Department of Health Professions

Phone:(804)367-4566 Email:pmp@dhp.virginia.gov Fax:(804)527-4470

Patient RX History Report

PMPITESTFIRSTNAME PMPITESTLASTNAME

Date: 06-08-2015

This report may contain another person's controlled substance information. Please review the "Patients that Match Search Criteria" section located below to ensure all prescriptions belong to the requested individual.

Page: 1 of 3

Search Criteria: ((Last Name Begins 'pmpitestlastname' AND First Name Contains 'pmpitestfirstname') AND (D.O.B = '01/01/1980' AND State = 'VA')) AND Request Period = '06/08/2014' To '06/08/2015'

Patients that match search criteria

Pt ID	Name	DOB	Address
1926	PMPITestLastName, PMPiTestFirstName	01/01/1980	Test Street Richmond VA 23223

Active Cumulative Morphine Equivalent

See explanation provided at the end of the report

7.5

Prescriptions

Fill Date	Product, Str, Form	Quantity	Days	Pt ID	Prescriber	Written	Rx #	Daily MED ¹	Active ²	N/R	Pharm	Pay
06/01/2015	OXYCODONE-ACETAMINOPHEN, 500 MG-5 MG, CAP	30.00	30	1926	PMP PM00	06/01/2015	0010001	7.50	Y	N	TT0000000	
02/15/2015	OXYCODONE-ACETAMINOPHEN, 500 MG-5 MG, CAP	30.00	30	1926	PMP PM00	02/15/2015	0010001	7.50	N	R	TT0000000	

N/R: N=New R=Refill

Pay:01=Private Pay 02=Medicaid 03=Medicare 04=Commercial Ins. 05=Military Inst. and VA 06=Workers Comp 07=Indian Nations 99=Other

¹Daily MED : The morphine equivalent per day for the individual prescription based on CDC conversion chart, the days supply and quantity dispensed provided by the pharmacy.

²Active - Indicates whether a prescription is active (Y/N) based on the date filled and the days supply provided by the pharmacy.

Total Prescriptions: 2

Prescribers for prescriptions listed

PMP PM00 PMPiTestLn PMPiTestFN



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Pharmacies that dispensed prescriptions listed

TT0000000 PMPi Test Pharmacy;

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US Department of Health and Human Services, Center for Disease Control

Disclaimer: The Commonwealth of Virginia does not warrant the above information to be accurate or complete. The Report is based on the search criteria entered and the data entered by the dispensing pharmacy. For more information about any prescription, please contact the dispensing pharmacy or the prescriber.



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Rx#	Drug	Strength		Multiplier		Quantity		Days		Daily MED
0010001	OXYCODONE-ACETAMINOPHEN, 500 MG-5 MG, CAP	5 MG	X	1.5	X	30.00	÷	30	=	7.50
Active Cumulative Morphine Equivalent										7.50

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