

Important Information about the Prescription Monitoring Program (PMP)



WASHINGTON
**Medical
Commission**
Licensing. Accountability. Leadership.

PMPs continue to be among the most promising state-level interventions to improve opioid prescribing, inform clinical practice, and protect patients at risk. Although findings are mixed, evaluations of PMPs have illustrated changes in prescribing behaviors, use of multiple providers by patients, and decreased substance abuse treatment admissions.

The Medical Commission has been made aware that the Washington PMP is not the easiest program to sign-up for, or access, when it is not integrated into the EMR. [Washington's PMP](#) was developed and is maintained by the Department of Health. Your Medical Commission has no authority to modify or replace the current system.

Resources

While the Medical Commission has no authority or ability to make the PMP easier for you to use, we would like to point out a few resources that may make registering and accessing the PMP easier.

- If you need assistance, [email the PMP Program](#)
- [Registration instructions](#)
- [PMP Training Guide for Healthcare Practitioners](#)
- YouTube video: "[How to obtain a SAW account](#)"
- YouTube video: "[How to Register for PMP Access](#)"
- YouTube video: "[Practitioner Overview and Tutorial Compilation](#)"
- [Provider FAQ](#)

Notice:

If you received a brochure like the one on the right, please be advised, it does NOT contain the requirements for MDs and PAs. The WMC Opioid Prescribing booklet (read it here) with new rules for MDs and PAs will arrive to your mailbox soon. Make sure you are signed up to receive opioid updates via email at: <https://goo.gl/B5FHn3>.

Ease of Use Project

The PMP is working with our state Health Information Exchange (HIE) providing connectivity and [deploying solutions for seamless interfaces](#) between electronic medical record systems and the PMP. Healthcare providers who don't have access to this technology still need access to the PMP, and in a way that isn't overly burdensome or cumbersome. Solutions to make PMP web portal access easier, can't wait.

DOH is gathering feedback and evaluating options in collaboration with providers and professional associations. [Be a part of developing solutions](#) that effectively balance the need for security with ease of use to support provider use of the PMP in Washington.

PMP Reporting

As part of [ESHB 1427](#), the PMP is required to report on PMP usage to the provider, the governor's office and the appropriate committees of the legislature. As a registered user of the PMP you may receive the "Opioid Prescriber Feedback Report" (example on next page). This should not cause you anxiety or alarm. This is simply an informational report for you to use as a self-assessment tool. If you think the information on the report is inaccurate, you should [email](#) the PMP as soon as possible.



2018 Washington State Opioid Prescribing Requirements



Guide for Pharmacists

Pharmacy Related Highlights

- Enacted Substitute House Bill 1427 passed in 2017, requiring opioid prescribing requirements be written in response to the statewide opioid crisis.
- The new requirements for advanced registered nurse practitioners, osteopathic physicians, osteopathic physician assistants, and podiatric physicians become effective November 1, 2018.
- The requirements for allopathic physician assistants and MDs become effective January 1, 2019. The new requirements for dentists have not yet been adopted.
- The new opioid prescribing rules do not apply to treatment for cancer-related pain, inpatient hospital patients, procedural pre-medications, or palliative, hospice, or other end-of-life care.
- Health care practitioners must confirm or provide naloxone when prescribing opioids to a high risk patient or as clinically indicated (ARNP requirement for naloxone when 50 MED or above).
- Pharmacists with a Collaborative Drug Therapy Agreement for pain management prescriptions should consider the appropriate prescribing rules for their partnering practitioner.

Prescriber Name:

Specialty:

NPI #:

No. of patients aged ≤ 20 years:

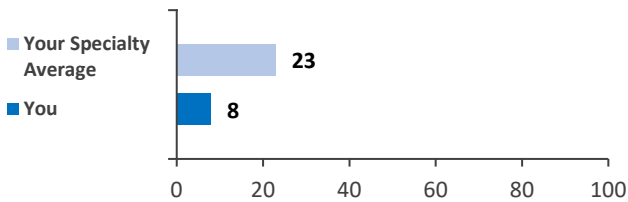
No. of patients aged ≥ 21 years:

Reporting Period: 01/2018–04/2018



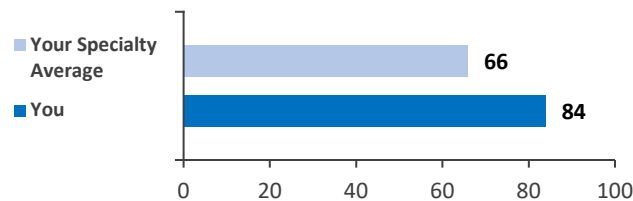
Washington State Opioid Prescriber Feedback Report

You are receiving this feedback report from the Washington State Department of Health because at least one of your prescribing measures below lies at or above the 95th percentile of all prescribers within your specialty. This report is authorized by Engrossed Substitute House Bill 1427, and in partnership with the Washington State Hospital Association, the Washington State Medical Association, and the Washington State Health Care Authority. The purpose of this report is to self-assess your opioid prescribing practices compared to those of your peers. Please review the following metrics based on your prescribing data in the Prescription Monitoring Program (PMP), and see recommendations for improving care on page 2.



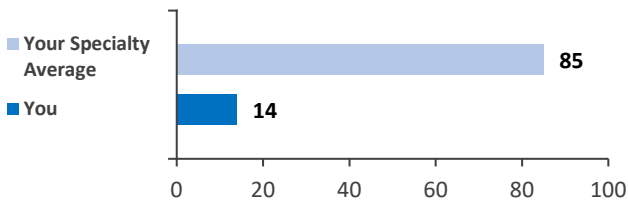
% ACUTE OPIOID PRESCRIPTIONS >18 DOSES FOR PEDIATRIC PATIENTS

Number of acute (<60 days' supply) opioid prescriptions for pediatric patients (≤ 20 years) containing >18 doses divided by the total number of acute opioid prescriptions for pediatric patients containing any dose in the current quarter



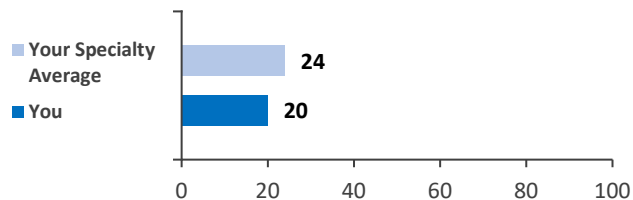
% ACUTE OPIOID PRESCRIPTIONS >42 DOSES FOR ADULT PATIENTS

Number of acute (<60 days' supply) opioid prescriptions for adult patients (≥ 21 years) containing >42 doses divided by the total number of acute opioid prescriptions for adults containing any dose in the current quarter



% NEW PATIENTS WITH >7 DAYS' SUPPLY OF OPIOIDS

Number of patients with a new (no opioid prescription in the previous quarter) opioid prescription with >7 days' supply (but less than 60) in the current quarter divided by the total number of patients with a new opioid prescription in the current quarter



% PATIENTS WITH CONCURRENT OPIOID AND SEDATIVE PRESCRIPTIONS

Number of patients who receive ≥ 1 day(s) of overlapping opioid and sedative prescriptions in the current quarter divided by the total number of patients with an opioid prescription in the current quarter

Healthcare providers should check the PMP before prescribing controlled substances.

You can connect your EHR for seamless access – www.doh.wa.gov/healthit

