Iowa's PRESCRIPTION Monitoring Program (PMP)

What should I consider when prescribing controlled substances?



Dosage

Consider explaining to your patient what Morphine Milligram Equivalents (MME) are and risks associated with exceeding 50MMEs per day. Discuss the possibility of tapering/reducing opioids as well as prescribing naloxone for patients taking 50MME/ day or more.

Multiple Providers



Counsel your patient and coordinate care with their other prescribers to improve safety and discuss the need to obtain opioids from a single provider. Check the PMP regularly and consider tapering or discontinuation of opioids or use of other non-pharmacologic methods.



Drug Interactions

When indicated, avoid prescribing opioids and benzodiazepines concurrently. Communicate with other prescribers to prioritize patient goals and weigh risks of concurrent opioid and benzodiazepine use.

Checking the PMP:

An important step to improving opioid prescribing practices



What is a PMP?

The PMP is a health care tool for practitioners to assist in identifying potential diversion, misuse or abuse of controlled substances by their patients while facilitating the most appropriate and effective medical use of those substances.

PMPs improve patient safety by allowing clinicians to:

- Identify patients who are obtaining opioids from multiple providers.
- Calculate the total amount of opioids prescribed per day (in MME/day).
- Identify patients who are being prescribed other substances that may increase risk of overdose – such as benzodiazepines.

When should I check the PMP?

The CDC recommends checking:

- Prior to prescribing any opioid or controlled substance.
- Every three months.
- Utilize support staff as your delegates or agents for checking the PMP when a patient arrives to the clinic or hospital to save time.

Check every 3 months!



What should I do if I find information about a patient in the PMP that concerns me?

Patients should not be dismissed from care based on PMP information. Use the opportunity to provide potentially life-saving information and interventions.

Confirm that the information in the PMP is correct. Check for potential data entry errors, use of a nickname or maiden name, or possible identity theft to obtain prescriptions.

Assess for possible misuse or abuse. Use a screening process such as SBIRT to assess for possible misuse or abuse with a valid tool: i.e., the Drug Abuse Screening Test (DAST). Assess risk with the Opioid Risk Tool (ORT), then partner with a treatment provider for referral when needed. Visit the www.yourlifeiowa.org website.



Discuss any areas of concern with your patient and emphasize your interest in their safety. Consider entering the patient into a formal pain contract, if not already established.

PMP Facts

- You may allow up to six delegates or agents (non-prescribing employees in your practice whom you designate to access the PMP) to register under your supervision.
- Iowa's PMP provides information from all states that utilize a PMP and have an agreement with the state of Iowa to share information.
- Only licensed pharmacies are required to report data to the lowa PMP.
- With recent legislative authority, the lowa PMP can connect with your clinic/hospital EHR/EMR software.

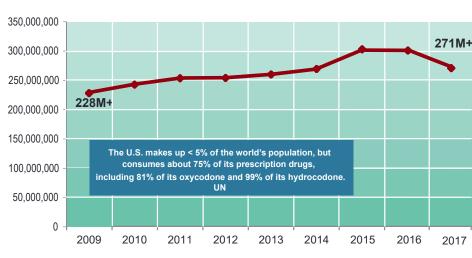
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How can I register and use the Iowa PMP?



Visit this link: https://pmp.iowa.gov/ IAPMPWebCenter/Login.aspx



Iowa PMP: Doses Dispensed

Controlled Prescription Drugs, Schedule II-IV

Iowa Department of Public Health, Board of Pharmacy, 2017







