



## **ACHIEVING BETTER CARE BY MONITORING ALL PRESCRIPTIONS (ABC-MAP) PROGRAM**

### **GENERAL INFORMATION**

#### **Q: What is a Prescription Drug Monitoring Program (PDMP)?**

A: The PDMP is a statewide program that collects information about controlled substance prescription drugs that are dispensed to patients within the state.

#### **Q: Why does Pennsylvania have a PDMP?**

A: The Office of the Attorney General (OAG) operates the former PDMP. The PDMP within the OAG requires the reporting of Schedule II controlled substances only. The legislature passed a new law, Act 191 of 2014, which requires monitoring Schedule II through Schedule V controlled substances. The Pennsylvania Department of Health is responsible for the development and the day-to-day operation of the new system.

#### **Q: Do other states have PDMPs?**

A: Forty-nine states, including Pennsylvania, have an operational prescription drug monitoring program or have enacted legislation to establish a PDMP and are in the process of creating one.

#### **Q: What is the purpose of the new PDMP?**

A: The purpose of the PDMP established by Act 191 of 2014 is:

- To be used as a tool to increase the quality of patient care by giving prescribers and dispensers access to a patient's controlled substance prescription medication history, which will alert medical professionals to potential dangers for purposes of making treatment determinations; and
- To aid regulatory and law enforcement agencies in the detection and prevention of fraud, drug abuse and the criminal diversion of controlled substances.

#### **Q: How does the PDMP work?**

A: Once the new PDMP is operational, by law, dispensers of monitored prescription drugs are required to collect and submit information to the PDMP about each dispensing of a controlled substance prescription drug within 72 hours. The PDMP stores the information in a secure database and makes it available to healthcare professionals and others as authorized by law.

**Q: What are controlled substances?**

A: Controlled substances are drugs that have varying degrees of potential for abuse or dependence. Drugs and other substances that are considered controlled substances under the Controlled Substances Act (CSA) are divided into five schedules. Substances are placed in their respective schedules based on whether they have a currently accepted medical use in treatment in the United States, their relative abuse potential, and likelihood of causing dependence when abused. The following are examples of Schedule II through Schedule V controlled substances:

- Schedule I – drugs with no currently accepted medical use in the United States and a high potential for abuse (heroin, LSD, and ecstasy).
- Schedule II - drugs with acceptable medical use, but with a high abuse potential that lead to dependence (morphine, methadone, oxycodone).
- Schedule III - drugs with less abuse potential and a moderate risk of abuse potential (aspirin/codeine combinations, buprenorphine).
- Schedule IV - drugs with a lower abuse potential (alprazolam, clonazepam, diazepam).
- Schedule V - drugs with less abuse potential than other schedule drugs contain limited quantities of a controlled substance (robatussin AC, phenergan with codeine).

**Q: Is the PDMP fully operational?**

A: Pharmacies should continue to report Schedule II controlled substances through the current system, PENNScript, within the Office of Attorney General until the new system is operational. Additional information regarding the transition time frame will be made available in the near future.

**Q: Will there be a training program for dispensers and prescribers to utilize the new system?**

A: Yes, training and support will be provided for users of the system.

**Q: What is required of dispensers?**

A: Once the new PDMP is fully operationalized, dispensers are required to submit record of all dispensed schedule II, III, IV, and V controlled substances to the system within 72 hours of dispensing.

**Q: What is required of prescribers?**

A: Once the new PDMP is fully operationalized, prescribers are required to query the system:

- For each patient the first time the patient is prescribed a controlled substance; or
- If a prescriber believes or has reason to believe, using sound clinical judgment, that a patient may be abusing or diverting drugs.

Once the new PDMP is fully operationalized, prescribers are required to indicate the information obtained from the system in the patient's medical record if:

- The individual is a new patient; or
- The prescriber determines a drug should not be prescribed or furnished to a patient based upon the information from the system

**Q: Will the new PDMP system be “real-time”?**

A: Dispensers, prescribers, and their delegates will have “real-time” access to the data stored by the PDMP at any given time. However, dispensers have up to 72 hours to submit data after dispensing a monitored prescription drug.

**Q: Do dispensers or prescribers have to pay anything for the program?**

A: A dispenser or prescriber shall not be required to pay a fee or tax specifically dedicated to the establishment, operation or maintenance of the program.

**Q: Will the PDMP offer any kind of referrals to treatment programs for suspected prescription drug abusers?**

A: The PDMP provides data to healthcare professionals to enable them to make more informed decisions about prescribing and dispensing monitored prescription drugs to their patients or potential patients. Healthcare professionals are encouraged to use the data obtained from the PDMP to improve their treatment of patients, including referring patients to substance abuse treatment. Information regarding drug and alcohol treatment services is available on the [Pennsylvania Department of Drug and Alcohol Programs](#) website.