I-STOP: Internet System for Tracking Over-Prescribing

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The C/S Rx Epidemic in New York

Roots of the problem are two-fold:

• First, lack of education and communication between practitioners significantly increases the likelihood of over-prescribing and dangerous drug interaction
The C/S Rx Epidemic in New York

• Second, access to an ever-increasing supply of prescription narcotics, through legal or illegal means, has grown fourfold in the past decade
Data from MFCU

New York State Medicaid spent over $1 billion on controlled substance prescriptions 2007 - 2010

The increase in Medicaid payments is due to the increase in prescriptions written for controlled substances during this period
NY Medicaid Fraud Control Unit

Approach:

Prescription Drug Abuse and Diversion

FINANCIAL FRAUD

Prosecution for fraudulent prescriptions averaged $1 Million loss to New York taxpayers per case
Typical Prescription Opioid Cases

- Doctor Shopping
- Drug Diversion (Pill Mills and Drug Trafficking)
- Doc-in-a-Box
- Stolen Prescription Pads
Limitations of New York’s Former PMP

• **System based on outdated presumptions:**
  - How and when data needed collection
  - Who had access to data
  - How data was used by practitioners and monitors

• **Practitioners were NOT required to Provide Data to PMP**

• **Most Practitioners DID NOT access Controlled Substance History despite on-line services availability**

• **NO mechanism for Pharmacists to ensure Valid Prescription**

• **PMP not designed to address stolen or forged prescription pads**
## New York’s Former PMP v. I-STOP

<table>
<thead>
<tr>
<th></th>
<th>Practitioner Reviewing</th>
<th>Practitioner Reporting</th>
<th>Pharmacist Reviewing</th>
<th>Pharmacist Reporting</th>
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</thead>
<tbody>
<tr>
<td><strong>Former PMP</strong></td>
<td>Optional; access to information restricted</td>
<td>None</td>
<td>None</td>
<td>Mandatory reporting of controlled substances at least once every 45 days</td>
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<tr>
<td><strong>I-STOP</strong></td>
<td>Mandated review of patient history prior to prescribing</td>
<td>Report issuing prescription at time of issuance, via E-Prescribing</td>
<td>Access to system is provided in “real time”</td>
<td>Mandatory reporting of controlled substances as they are dispensed, in “real time”</td>
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Internet System for Tracking Over-Prescribing

Prescriber Required by Law to Review Prescription History in Database (sch. II - IV drugs)

Pharmacy Dispenses & Reports Prescription in “Real Time” to Database

Prescriber Required by Law to Record Prescription at Issuance via E-Prescribing (March 2016)

Pharmacy may review Database to Identify Abuse
I-STOP Enhances The Effectiveness of New York’s PMP System

• Increasing Detection of:
  • Drug Diversion Activity
  • Doctor Shopping
  • Identification of Pill Mills

• Invalidating Stolen Prescription Paper and Ending “black market”

• Providing Practitioners and Pharmacists with Centralized Information to avoid Over-Prescribing and Harmful Interactions

• Substantially impairs Prescription Drug Traffickers

• Bona fide practitioners will more effectively identify patients who are at risk of prescription drug abuse, allowing practitioners to intervene on patient’s behalf and assist patients in obtaining counseling and treatment

• Disposal and Awareness Programs -- Increasingly Important
I-STOP & Institutional Dispensers

Institutional Dispensers (i.e., Hospitals & Nursing Homes) licensed by DOH may cause controlled substances to be administered or dispensed, pursuant to regulation.

-N.Y. Public Health Law § 3342

- Institutional Dispensers are EXEMPT from the Duty to Consult the Database in the Following Circumstances:
  - Practitioner prescribing or ordering a controlled substance for use ON THE PREMISES of an institutional dispenser
  - Practitioner prescribing IN THE EMERGENCY ROOM of a general hospital, provided the quantity prescribed does not exceed a 5 DAY SUPPLY
  - Practitioner prescribing for a patient UNDER HOSPICE CARE
Indications of Downward $$ Trend in Rx Scheduled Drugs

Sch. II, Top 5 Medicaid $$, NY
Future Challenges

E-Prescribing (and attempts to evade)

- Access Control to Passwords/Hardware
- Pressure at Emergency Departments and other Exempt Dispensers

Diversion within Facilities

- “Nurse Jackie” Cases – NYMFCU 10 convictions in 2013
- Larger Scale Takings???