# **Department of Health**

Improving Best Practices for Patient Care: Optimizing the Use of the Prescription Drug Monitoring Program's Database









\*Funded by the U.S. Center for Disease Control Overdose Data to Action Grant



- Discuss the Florida Prescription Drug Monitoring Program (PDMP) Electronic-Florida Online Reporting of Controlled Substances (E-FORCSE) and the role of the Florida PDMP Foundation
- Review laws and rules surrounding the prescribing and dispensing of controlled substances
- Understand disciplinary actions related to the PDMP requirements
- Understand the value of PDMP database information
- Discuss prescribing information technology
- Review of the best practices for PDMP utilization





### PDMP (E-FORCSE) and Florida PDMP Foundation Formation

#### Presented by Bob Macdonald, MS





# **Legislative Authorization for PDMP**

- Established by legislature during 2009 session through passage of Section 893.055, Florida Statutes.
- Authorized Department of Health to maintain an electronic system to collect and store controlled substance dispensing information.
- The PDMP system *must*:
  - Not infringe upon the legitimate prescribing or dispensing of a controlled substance by a prescriber or dispenser acting in good faith and in the course of professional practice.
  - 2. <u>Be consistent with standards</u> of the American Society for Automation in Pharmacy.
  - 3. <u>Comply with the Health Insurance Portability and Accountability Act</u> as it pertains to protected health information, electronic protected health information, and all other relevant state and federal privacy and security laws and regulations.



# **Florida PDMP System Operations**

- For all registered prescribers and dispensers <u>the department assigns a</u> <u>unique identifier to each patient</u> for whom a record exists in the system. Such identifier may not identify or provide a reasonable basis to identify a patient by any person not authorized under this section to access personally identifiable information in the system.
- The department may collaborate with professional health care regulatory boards, appropriate organizations, and other state agencies to identify indicators of controlled substance abuse.
- The department can purge information in the database that is <u>more than 4</u> <u>years old.</u>





# **PDMP Database Administration**

- In order to calculate performance measures as required by law <u>the program</u> staff may have direct access to information that contains no identifying information of any patient, physician, health care practitioner, prescriber, or dispenser.
- 2. <u>The program staff must provide the department, upon request, data</u> that does not contain patient, physician, health care practitioner, prescriber, or dispenser identifying information <u>for public health care and safety</u> <u>initiatives purposes.</u>
- The program manager, upon determining a pattern consistent with the department's rules may provide relevant information to the prescriber and dispenser.



### **Dispensing of Controlled Substances**

- <u>Controlled Substance prescriptions must be entered into the PDMP database</u> within 24 hours or next business day.
- Pharmacists filling prescription must report in ASAP 4.2A:
  - <u>Prescriber information</u> to include: name, DEA number, National Provider ID, date of prescription, date filled and method of payment.
  - **Patient information** to include: name, address, telephone, and birthdate.
  - Drug information to include: controlled substance name and code, quantity and strength.
  - <u>Pharmacy information</u> to include: name, DEA administration registration number, DOH pharmacy permit number and whether prescription was an initial or refill and who picked up prescription.
- Dispensing practitioners must enter name, address, DEA number, NPI and license number with drug information.

# **Access to PDMP Database**

- The following entities may request information from the PDMP Database:
  - <u>Health care regulatory boards</u> for investigations involving licensees authorized to prescribe or dispense controlled substances.
  - <u>The Attorney General</u> for Medicaid fraud cases involving prescribed controlled substances.
  - A **law enforcement agency** during active investigations of potential criminal activity related to controlled substances.
  - A <u>medical examiner</u> when conducting an authorized investigation to determine the cause of death of an individual.
  - An impaired practitioner consultant.
  - A patient or the legal guardian or designated health care surrogate.





# **Florida PDMP Foundation**

- Authorized under Section 893.055 (15) as a <u>Direct Support Organization to</u> <u>the Department of Health</u> to provide supplemental funding for PDMP educational and outreach programs for healthcare practitioners and law enforcement officials.
- PDMP Foundation is a non-profit, tax-exempt corporation governed by a 11 member board of directors appointed by the State Surgeon General.
- Funding for the foundation's support of the state PDMP (E-FORCSE) comes from corporations, government agencies, grants, private foundations, law enforcement agencies and individual donors.
- Since its formation in 2009, the PDMP Foundation has raised over \$2.9M in support of the state prescription drug monitoring program.



### PDMP Foundation Role in Support of E-FORCSE

- Develop and implement a statewide peer-to-peer educational course to train health care practitioners and their designees about the Best Practices for Use of the PDMP Database funded by a grant from the Center for Disease Control.
- <u>Allocate funds</u> for future enhancements of the PDMP system.
- Provide information about the PDMP: to prescribers, dispensers, designees and government agencies at conventions and trade shows; via printed materials; in articles in professional journals and by social media.





# **State PDMP Structure**

Department of Health (State Surgeon General)

Division of Medical Quality Assurance

Electronic-Florida Online Reporting of Controlled Substance Evaluation Program (E-FORCSE)

Prescription Drug Monitoring Program Foundation (DSO)







### Laws & Rules Related to the PDMP Database Operations

#### Presented by Jason D. Winn, Esq.





#### PDMP Legal Requirements Related To Prescribers and Dispensers

- Section 893.055 (8): A prescriber or dispenser or a designee of a prescriber or dispenser <u>must consult</u> the system to review a patient's controlled substance dispensing history before prescribing or dispensing a controlled substance for a patient age 16 or older. This requirement *does not* apply when prescribing or dispensing to a patient who has been admitted to hospice.
- Section 893.055 (8) (b): A prescriber or dispenser or designee of a prescriber or dispenser who does
  not consult the system under this subsection shall <u>document the reason he or she did not consult the
  system in the patient's medical record</u> or prescription record and <u>shall not prescribe or dispense</u>
  <u>greater than a 3-day supply of a controlled substance</u> to the patient.
- Section 893.055 (11): A prescriber or dispenser, or his or her designee, may <u>have access to the</u> <u>information</u> under this section <u>which relates to a patient of that prescriber or dispenser as needed</u> <u>for the purpose of reviewing the patient's controlled drug prescription history</u>. A prescriber or dispenser acting in good faith is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for receiving or using information from the prescription drug monitoring program. This subsection does not create a private cause of action, and a person may not recover damages against a prescriber or dispenser authorized to access information under this subsection for accessing or failing to access such information.



# Public Records Exemption for the PDMP

- Section 893.0551(2): <u>The following information</u> of a patient or patient's agent, a health care practitioner, a dispenser, an employee of the practitioner who is acting on behalf of and at the direction of the practitioner, a pharmacist, or a pharmacy that is contained in records held by the department under s. <u>893.055</u> is confidential and <u>exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution:</u>
  - a) Name
  - b) Address
  - c) Telephone number
  - d) Insurance plan number
  - e) Government-issued identification number
  - f) Provider number
  - g) Drug Enforcement Administration number
  - h) Any other unique identifying information or number





# **PDMP Rules and Regulations**

- 64K 1.002: American Society for Automation in Pharmacy Standards and Formats.
- 64K 1.003: Accessing Database.
- 64K 1.004: Management/Operations of Database.
- 64K 1.005: Privacy of Controlled Substance Abuse.
- 64K 1.007: Indicators of Controlled Substance Abuse.
- 64K 1.008: Electronic Health Recordkeeping System Integration.



## **Disciplinary Actions Under PDMP Law**

- Section 893.055 (4): <u>The PDMP program manager</u>, upon determining a pattern consistent with the rules and having cause to believe a violation has occurred, <u>may provide relevant information to the applicable law</u> <u>enforcement agency</u>.
- Section 893.055 (2) (c): <u>The department shall issue a non-disciplinary</u> <u>citation to any prescriber or dispenser who fails to consult the system</u> as required by this subsection for an initial offense. Each subsequent offense is subject to disciplinary action pursuant to s. <u>456.073</u>.
- Section 893.055 (9): A <u>person who willfully and knowingly fails to report</u> the dispensing of a controlled substance as required by this section <u>commits a misdemeanor of the first degree.</u>







#### Understanding the Value of the PDMP to Your Practice

#### Presented by Joshua D. Lenchus, DO, RPh, FACP, SFHM





# **Getting Registered**



#### PRESCRIBER, PHARM ACIST, and DESIGNEE REGISTRATION

E-FORCSE® requires that every individual register as a separate user, using their email address as their username within the system. Please note that if you had an account with the previous system, you may already have an account in PMP AWARxE. Please attempt to access your account by following the Reset Password instructions located in the PMP AWARxE User Support Manual before attempting to create a new account. Please utilize the email address associated with your previous account.

The registration process is comprised of threes creens: the account settings screen, the role selection screen, and the demographics screen. All three screens must be completed before the user can successfully submit their registration for approval.

#### **Registration Process**

- 1 To request a new account in PMP AWARxE, open an Internet browser window and navigate to: https://florida.pmpa ware.net. If a pass word reset is needed, us e the Reset Password link.
- 2 Click the Create Account link. The next screen requires the user to enter a valid email address and select a password. The password must be entered a second time for validatio. N ote: the password must contain 10 characters, including 1 capital letter and 1 special character (such as !, @,#,\$). Click Save and Continue.



Create an Account



# **Getting Registered**

- 3 Click on the +Healthcare Professional User Role and select the appropriate role. Click Save and Continue.
- 4 Enter the following personal, employer and delegate (designee) informatio. Note: Required fields are indicated with a red asterisk.

Personal Informatio : Prescriber's DEA number and prescriber's or pharmacist's NPI number (if applicable), professional license number (do not include prefix), license type (use license prefix ME, OS, DN, ARNP, PA, PO, PS, and OPC), positio, ram e, date of birth, last 4 digits of social security number, specialty (if applicable), and primary contact phone.

*Employer Informatio* : DEA and NPI numbers (if applicable), name, location and address, and phone.

Delegate (Designee) Informatio: All designees must enter the email address (es) of their supervisor(s).

Once complete, click Submit Your Registration.

- 5 Onceryour registratio is approved, you will be notified via email. Please add no-reply-pmpaware@globalnotifications.com to your email address book to ensure that you receive system-generated emails.
- 6 Registration is complete. Supervisors with designees must authorize their access. Follow the detailed instructios in the PMP AWARxE User Support Manual located on your Dashboard to approve their account.

For more information visit www.e-forcse.com.

For technical assistance, please contact our Help Deskat (877) 719-3120.







# **Getting Registered**

		rt from another browser. Import fa	vorites	
<u> </u>				Joshua Lenchus
Home	RxSearch	User Profile	Training	PDMP Links
Dashboard PMP Announcements	Patient Request Bulk Patient Search Requests History MyRx Prescriber Report	My Profile Default PMPi States Delegate Management Password Reset Log Out	NarxCare Overview Narx Scores Overdose Risk Score AWARxE/NarxCare User Guide Lorazepam Milligram Equivalents Help	Support Request E-FORCSE NarxCare Navigati NarxCare Interpre More Links
			sharing has be	s pleased to announce that data een enabled between Florida and alth System. This will a more

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#### **Development of Reports and Studies**

- The department shall conduct or participate in studies to examine the feasibility of enhancing the prescription drug monitoring program for the purposes of public health initiatives and statistical reporting. Such studies shall respect the privacy of the patient, the prescriber, and the dispenser. Studies will be directed to:
  - a) Enhance the quality of health care services and safety by improving prescribing and dispensing practices for controlled substances;
  - b) Take advantage of advances in technology;
  - c) Reduce duplicative prescriptions and the overprescribing of controlled substances; and/or
  - d) Reduce drug abuse.





# **Update of PDMP Utilization**

- As of 2019, there has been a 43.3 percent and 100.1 percent increase in dispenser and prescriber registrations, respectively. As of June 2019, <u>dispensers and prescribers made 50,688,241 queries for information from the PDMP</u>.
- <u>Prescriber registrations have increased 100.1 percent</u> from 43,738 in 2018 to 87,537 in 2019. To increase utilization, health care practitioners employed by the U.S. Department of Veterans Affairs, Department of Defense, and Indian Health Service, were authorized to access the database.
- Dispenser registrations increased 43.1 percent from 18,766 as of June 2018 to 26,885 as of June 2019.





#### PDMP Database Registered Users by Health Care Profession

Total Healthcare practitioners by profession, as of June 2020				
6,507				
6,842				
63				
42,027				
2,301				
1,006				
17,714				



#### **How to: RxSearch**



#### PRESCRIBER AND PHARMACIST PATIENT RXSEARCH

Practitio ers and pharmacists may request patient-specific information from the E-FORCSE® Prescriptio Drug Monitoring system to guide their prescribing and dispensing decisions.

Perform the following steps when making a request in PMPAWARXE, the service provider for E-FORCSE 🖱

- 1 Open an Internet browser window and navigate to: www.https://flo\_ida.pmpaware.net. If a password reset is needed, use the Reset Password link.
- 2 Click the Menu button, then under RxSearch, choose Patient Request. Home
- 3 Entersearch criteria. At a minimum, you must provide:
  - ∀ First name (full br partia\* )
  - ∀ Last Name (full or partial\*)
  - ∀ Date of birth (MM/DD/YYYY\*)
  - ∀ Prescription fill dates (MM/DD/YYY)

əmə	RxSearch	User Profile	PDMP Links	Training
Dashboard PMP Announcements	Patient Request Requests History MyRx Bulk Patient Search	My Profile Delegate Management Password Reset Log Out	PMP Support	Aware User Guide Help
725 8 1725				Patient Rs Request Tutorial
Patient Re	quest			Cantiview the 1107 Get Adobe Acrobat Reader
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Patient Info First Name*	Last Na	tial Spelling	ient Request :	Cantiview the tife? Cell Adobe Acrobal Reader * Indicates Required Field

Doctor Jordan



### How to: RxSearch

- 4 Click Search at the bottom of the screen to submit your request.
- 5 The Patient Report will now display. If multiple patie ts are identif d, you will be presented with the option to refine your search by providing additional search information or you may select a single, multiple, or all returned patient groups to include in your patie t results.
- 6 Click Run Report, the patient prescription results will be displayed.
- 7 You may retrieve your Patient Reports and the Patient

Search	

Prescription Fill Dates

From"

04/11/2017

Zip Code

Also Search

Select All

O PMP Interconnect

Alabama

Patient Location

No earlier than 2 years from today

To\*

Search accuracy can be improved by including the address

04/11/2018

@ RxCheck

 ✓ \*Partial Spelling: Using partial spelling can be helpful for hyphenated or commonly abbreviated names (Will vs. William). At a minimum, enter the first three characters of the patient's first and/or last name.
 ✓ Prescription Fill Dates: The maximum

∀ For in-state searches only: To broaden search results, do not enter ZIP code.

tim frame for a search is 24 months.

#### O None of the above

 Also search: Allows you to search other participating state Prescription Drug Monitoring Program databases for the patient records. To improve the likelihood of finding a specific patient limit your search to only the required fields.

Reports of any designee by clicking on the Requests History tab.

*E-FORCSE® recommends against printing patie* treports, however if the informatio is printed it should be safeguarded and not shared or released. The penalty for improper release of the informatio is considered a third degree felony. For more information visit www.e-forcse.com or technical assistance (877)719-3120.





#### **Queries to PDMP Database by Users**

Total number of queries by practitioners, as of June 2020				
2,090,611				
771,251				
602				
21,385,225				
786,073				
88,396				
37,061,985				





# **Training and Technical Assistance**

- The Department of Health (E-FORCSE) provides the following materials to assist practitioners to use the PDMP properly:
  - User Support Manual
  - Quick Reference Guides
  - Designee Access Information and Certification
  - Florida Drug Related Outcomes Surveillance and Tracking System (FROST)
  - To obtain Information about all facets of the PDMP on its website at: <u>www.floridahealth.gov/statistics-and-data/e-forcse</u>
  - The E-FORCSE email is: <u>e-forcse@flhealth.gov</u>
  - The telephone number is: 850-245-4797





# **National Data Information System**

- National information on controlled substance reporting is available at:
  - PDMP Training and Technical Assistance Center (PDMPTTAC): <u>http://pdmpassist.org</u>
- Institute for Intergovernmental Research
  - Prescription Behavior Surveillance System (PBSS)







### Interpreting Performance Measures from PDMP Database Information

#### Presented by Joshua D. Lenchus, DO, RPh, FACP, SFHM





#### Identification of Performance Measures

- The Department staff will provide the following **performance measures** each year:
  - a) Reduction of the rate of inappropriate use of controlled substances through department education and safety efforts.
  - **b)** Reduction of the quantity of controlled substances obtained by individuals attempting to engage in fraud and deceit.
  - c) Increased coordination among partners participating in the prescription drug monitoring program.
  - d) Involvement of stakeholders in achieving improved patient health care and safety and reduction of controlled substance abuse and controlled substance diversion.





# **Use of Patient Advisory Reports**

- Apply for Patient Advisory Report (PAR) to E-FORCSE.
- Access Training Guide for Florida Practitioners and Pharmacists.
- Establish account online.
- PAR improves Best Practices by:
  - Preventing duplicate prescribing of controlled substances;
  - Identifying potential interactions and prevent adverse drug events;
  - **Detecting if a patient received multiple prescriptions** for the same drug from multiple health care practitioners;
  - Verifies therapeutic adherence.





# **PDMP Prescriber Summary**

- Provides the following information:
  - Monthly average of number of persons prescribed opioids;
  - Number of prescriptions written for opioids;
  - Prescriptions by daily Morphine Milligram Equivalent (MME);
  - Opioid treatment duration;
  - Prescription volumes;
  - Monthly average of anxiolytic/sedative/hypnotic prescribing;
  - PDMP Usage:
    - Monthly requests by prescriber or delegate;
    - Similar prescriber and specialty field averages;
  - Combination therapies requiring close monitoring (e.g.: Opioids, Benzodiazepines and Carisoprodol)



# **Prescribing of Opioids**

- In 2019 there was a 13.6 percent decrease in the number of schedule II through IV opioid prescriptions dispensed to patients and a 53.3 percent decrease in the average daily Morphine Milligram Equivalents (MME) per prescription when compared to report year 2018. Additionally, 56,432 unique prescribers received prescriber summary reports from the PDMP.
- Through the proactive use of the PDMP database, Florida has seen an 80.7 percent reduction in the number of individuals having Multiple Provider Episodes (MPEs). The data supports that as registration and utilization of E-FORCSE by prescribers and dispensers increases, the number of MPEs decreases.





# **Opioid Prescribing Characteristics**

- From July 1, 2018 through January 31, 2019, 56,432 of registered prescribers with valid DEA registration numbers received a prescriber summary report from the PDMP. Of those, 21.7 percent (12,772) prescribers did not write any opioid prescriptions. Of the prescribers receiving information, 62.5 percent (35,279) prescribers prescribed one or more controlled substance prescriptions.
- There were 17,070,244 residents 18 years of age and older in Florida, of whom 5.0 million were prescribed one or more schedule II through schedule IV controlled substances in 2019, a decrease of 10.3 percent from 2018.
- The number of schedule II opioid prescriptions decreased by 14.7 percent from 921,684 per month in 2018 to 786,654 per month in 2019.



# **MME and Prescribing Pattern Data**

- There was a substantial decline in average daily MME per schedule II opioid prescription. On average, it **decreased from 166.4 in 2018 to 75.6** in 2019 (-54.5 percent).
- The prescribing pattern by days' supply showed a sharp increase in schedule II opioid prescriptions with 1-3 days' supply, while a significant decrease in those with 4-15 days' supply in July 2018. The prescriptions with 1-30 days' supply accounted for over 95 percent of total schedule II opioid dispensed. The proportion of 1-3 days' supply prescriptions increased from 13.1 percent in 2018 to 20.2 percent in 2019 while that of 4-7- and 8-15-days' supply prescriptions decreased 4.7 and 4.0 percentage points, respectively



#### Leading Prescribed Controlled Substances Reported to PDMP

- Alprazolam
- Hydrocodone Bitartrate/Acetaminophen
- Oxycodone HCL/Acetaminophen
- Tramadol HCL
- Clonazepam
- Zolpidem Tartrate

Lorazepam

**Oxycodone HCL** 

• Dextroamphetamine Sulf-Saccharate/Amphetamine Sulf-Aspartate




#### Leading Prescribed Controlled Substance Trends

	RY18		RY19		RY 18/19
Drug	Number of Prescriptions	%	Number of Prescriptions	%	Change (%)
Alprazolam	4,151,878	12.5	3,803,014	12.7	-8.4%
Oxycodone HCL/Acetaminophen	4,225,588	12.7	3,781,016	12.6	-10.5%
Hydrocodone Bitartrate/Acetaminophen	4,502,930	13.6	3,614,851	12.1	-19.7%



## **Prescriber and Designee MyRx Search**

- Prescribers with DEA registration numbers can search the database for a self-report of the following:
  - View what prescriptions for controlled substances were filled listing them as the prescriber;
- Designees may request patient specific information for Prescriber or Pharmacist.
- NOTE: Any printed patient records must be kept confidential and not released. Improper release of patient records is considered a Third Degree Felony.







## Accessing Prescribing Information Technology

#### Presented by Joshua D. Lenchus, DO, RPh, FACP, SFHM





## Electronic Health Record Integration Into PDMP

- Section 893.055 (7): The department may enter into agreements or contracts to establish secure connections between the system and a prescribing or dispensing health care practitioner's electronic health recordkeeping system. The electronic health recordkeeping system owner or license holder will be responsible for ensuring that only authorized individuals have access to prescription drug monitoring program information.
- The PDMP has been integrated into 455 entities' EHR systems across the state. In June 2019, there were 5.7 million queries made through EHR integration.
- EHR integration is through PDMP service provider Appriss Health using PMP Gateway.
- For further information contact: <u>www.floridahealth.gov/statistics-and-data/e-forcse/ehr\_integration.index.html</u>



#### Queries requested through EHR System Integrations, July 2018 – July 2019



# **PDMP Compatibility**

- Section 893.055 (6): The department may enter into one or more reciprocal agreements or contracts to share prescription drug monitoring information with other states, districts, territories, the United States Department of Veterans Affairs, the United States Department of Defense, or the Indian Health Service if the prescription drug monitoring programs of such other states, districts, territories, the United States Department of Veterans Affairs, the United States Department of Defense, or the Indian Health Service are compatible with the Florida program.
- Nationally, 49 states have PMPs. The Florida PDMP is currently sharing data with 20 states and the Military Health Service. During the month of June 2019 there were 132,826 interstate queries performed.



# **PDMP Compatibility**



#### Interstate PDMP Requests by User Role





## Participating as Eligible Provider in Meaningful Use

- Meaningful Use is a Federal incentive program that provides payments to eligible professionals (EP) that are able to demonstrate the "meaningful use" of electronic health records technology. EPs demonstrate MU through Public Health Reporting.
- Florida's PDMP is a specialized registry for MU Stage 2. It is now classified as a public health registry.
- EPs must comply with <u>one</u> of the following to meet MU requirements:
  - 1. Submit patient specific controlled substance dispensing information electronically to E-FORCSE; or
  - 2. Electronically retrieve patient specific controlled substance dispensing information from E-FORCSE. To meet this objective, the EPs would need to: (1) electronically submit dispensing data using the American Society for Automation in Pharmacy (ASAP version 4.2A) standards, specifications, and vocabularies required by E-FORCSE; or (2) register with E-FORCSE and retrieve patient specific controlled substance dispensing information.
  - 3. The program will provide EHR incentive payments to EPs as they adopt, implement, upgrade, or demonstrate meaningful use of certified electronic health record technology (CEHRT)







#### Review of Best Practices for PDMP Utilization

#### Presented by Jill Rosenthal, MD, MPH, MA, FACOEM





- Access the PDMP database to review all patients' scheduled drug usage even if not planning to prescribe a controlled substance.
- Update PDMP database password every **90 days**.
- If dispensing a controlled substance, enter data into system within 24 hours or next business day.
- Review practitioner support manuals and quick reference guides to understand how to research the database for controlled substance information.
- Use Patient Advisory Report and PMP Prescriber Summary.
- Integrate PDMP into Electronic Health Records system.
- Keep current on MME and narcotic overdose risk scores as published in FROST.
- Identify and report patterns of controlled substance fraud and abuse.



# To Conclude...

- Florida's PDMP (E-FORCSE) is effective in improving clinical decision-making, reducing multiple provider episodes and diversion of controlled substances, and assisting in other efforts to curb the prescription drug abuse epidemic. The effectiveness of Florida's PDMP is reflected in a significant increase in registration and utilization resulting in a decrease in multiple provider episodes, decrease in morphine milligram equivalents, and reduction in oxycodone overdose deaths.
- The PDMP continues to be a critical tool in the fight to protect health and safety by reducing doctor shopping and controlled substance related deaths, while supporting sound clinical practice in the prescribing of controlled substances.







Bob Macdonald, Executive Director <u>executive.director@flpdmpfoundation.com</u> (850) 284-4490

Check the list of exhibitors to learn more about the PDMP Foundation/E-FORCSE at your upcoming professional association's state conferences! The staff are always happy to speak with you.



## **Question & Answer**

# Panel: Bob Macdonald, MS Jason D. Winn, Esq. Joshua D. Lenchus, DO, RPh, FACP, SFHM Jill Rosenthal, MD, MPH, MA, FACOEM





## **Evaluation**

#### YOU MUST FILL THIS OUT TO RECEIVE CREDIT FOR THE COURSE! PLEASE SCAN QR CODE OR FOLLOW LINK BELOW TO FILL OUT.



https://forms.gle/tgteadciF6jNE1qe6

