



# Impacts of Opioid Policy Changes: Overview and Updates from VPMS

June 27, 2019

In 2016, the Vermont Legislature passed Act 173, a multifaceted bill targeted at opioid issues

- Required the addition of standards for use of opioids for **acute** pain to existing standards for chronic pain
- Required dispensers of Schedule II – IV controlled substances to register with VPMS and check per VDH Rules before dispensing
- Changed reporting requirements to within 24 hours (was 7 days)
- Increased CME/CEU requirements for training on controlled substances
- Increased the manufacturer fee on drugs paid for by Medicaid to 1.5%

- ❑ Changes were made to the *VDH Rule Governing the Prescribing of Opioids for Chronic Pain*, eff. 8.1.2015, exp. 6.30.2017
- ❑ New Rule was *Rule Governing the Prescribing of Opioids for Pain*, eff. 7.1.2017
- ❑ New definitions added
- ❑ Adds Universal Precautions for Prescribing Opioids for Pain
- ❑ Adds Limits for Prescribing Opioids for Acute Pain
- ❑ Changes Rule for Chronic Pain
- ❑ Changes Query requirements for VPMS

- Compliance
  - ▣ Pharmacy Uploading
  - ▣ Prescribers
    - Registration
    - Querying
  
- Number of Patients receiving prescriptions
  
- Decrease in Total MME dispensed

## Pharmacies

*In 2016:*

- 83% all pharmacies were compliant with 7 day reporting
- 100% of Vermont in-state pharmacies were compliant with 7 day reporting

*In 2019:*

- 97% all pharmacies were compliant with 24 hour reporting
- 99% of Vermont in-state pharmacies were compliant with 24 hour reporting

## Prescribers

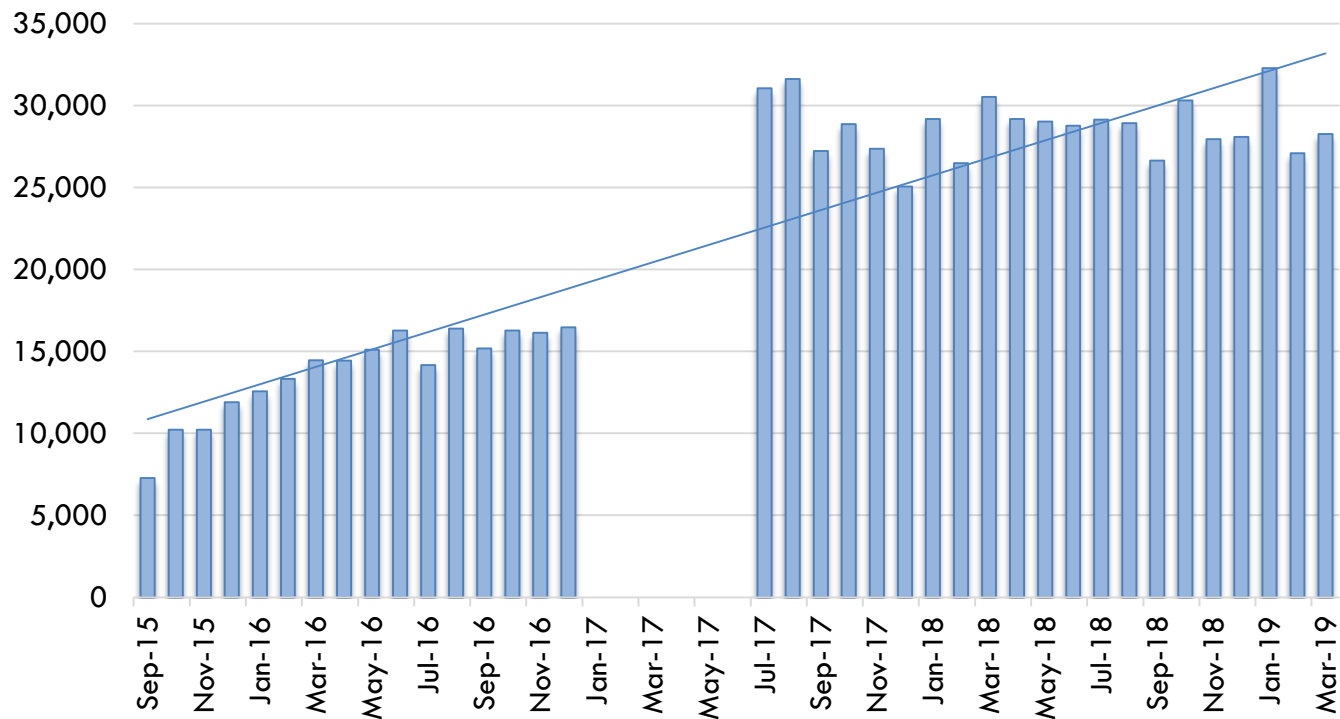
*In 2016:*

- 1,403 prescribers were registered
  - First check of prescriber compliance was in early 2018; 916 active, VT-licensed prescribers were unregistered

*In 2019:*

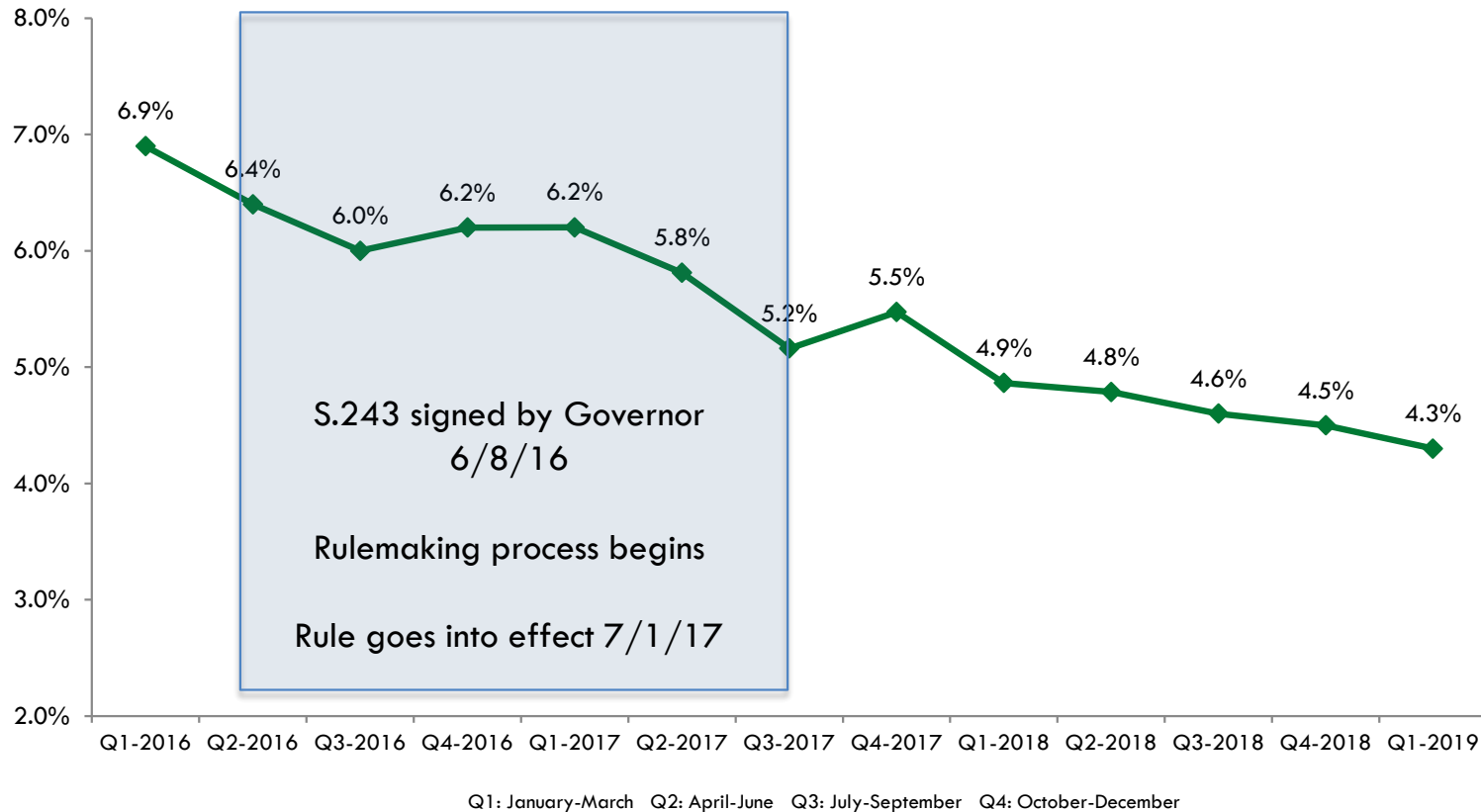
- 4,767 prescribers are registered
- 98% of active prescribers are registered

## Number of System Queries by Month

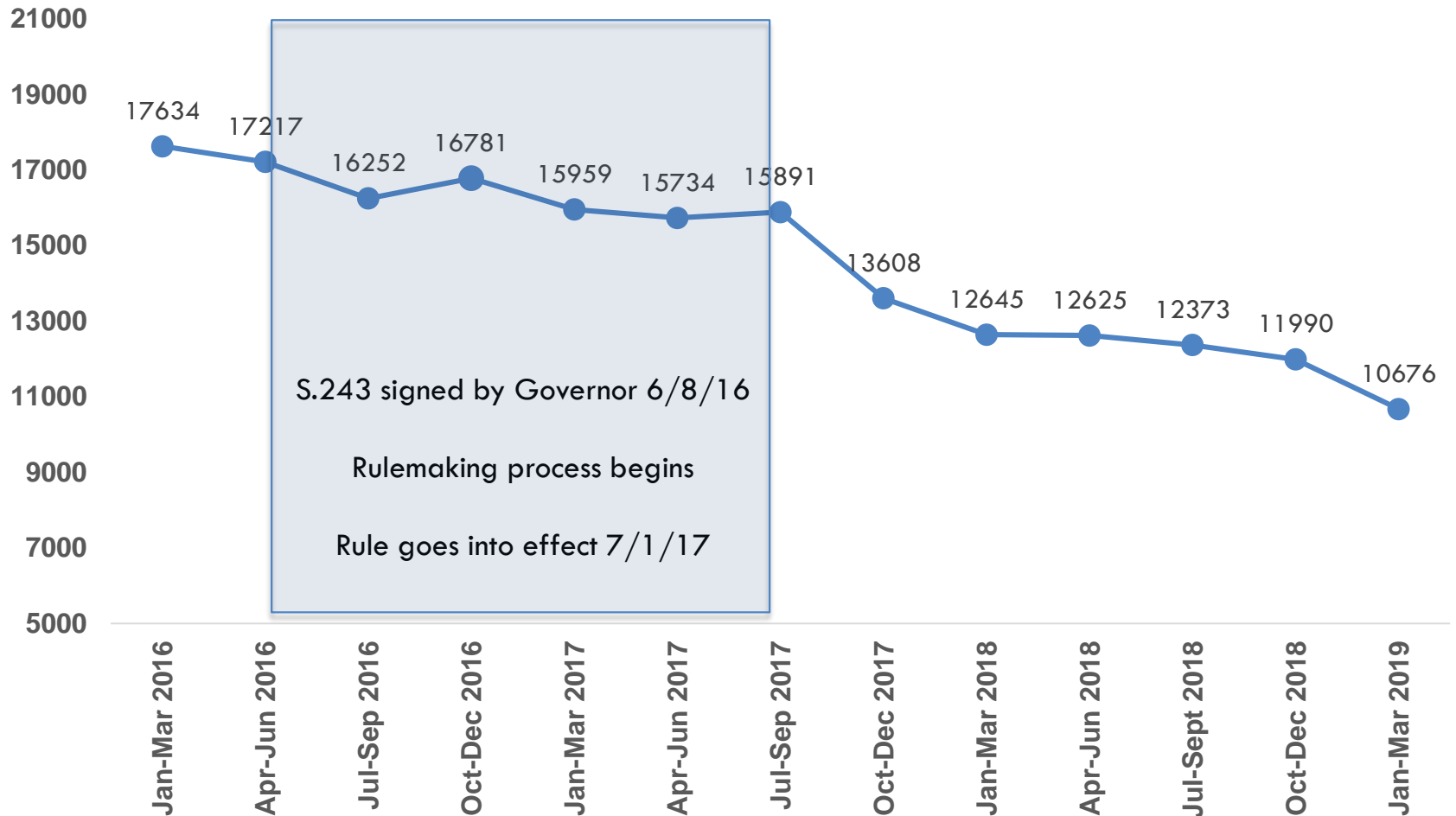


- Gap is due to reporting capabilities through two system platform changes – queries continued during those times

# Percent of the Population Receiving at Least One Opioid Analgesic Prescription



# Total MME Opioid Analgesics per 100 Residents began to decrease after S.243 was signed and prior to implementation



***There was an over 39% decrease in MME/100 people between Q1 2016 and Q1 2019***



- ❑ Formal Policy Analysis will be done in end of 2019
- ❑ Migration of VPMS from Optimum to Appriss in June 2017
- ❑ Prescriber Compliance
  - ❑ Prescribers were required to register in 2014. Many registered and then did not use the system
  - ❑ Accounts from our first migration were transferred as “shell” accounts. If they were not updated, their accounts were purged during the second migration.
- ❑ Drop in MME in final quarter due to two prescribers

- **Act 173 *An act relating to combating opioid abuse in Vermont***
  - <http://legislature.vermont.gov/assets/Documents/2016/Docs/ACTS/ACT173/ACT173%20As%20Enacted.pdf>
  
- **VDH Rule Governing the Prescribing of Opioids for Pain**
  - [http://www.healthvermont.gov/sites/default/files/documents/2016/12/REG\\_opioids-prescribing-for-pain.pdf](http://www.healthvermont.gov/sites/default/files/documents/2016/12/REG_opioids-prescribing-for-pain.pdf)
  
- **VDH Vermont Prescription Monitoring Rule**
  - [http://www.healthvermont.gov/sites/default/files/documents/2016/12/REG\\_vpms-20170701.pdf](http://www.healthvermont.gov/sites/default/files/documents/2016/12/REG_vpms-20170701.pdf)

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