

ND Board of Pharmacy

Mark J Hardy, Pharm D

Executive Director

Objectives

- Provide an increased awareness of opioid issues in North Dakota
- Discuss initiatives of the Board to provide pharmacy driven solutions to address diversion and abuse
- Outline the ND Prescription Drug Monitoring Program and its impact to prevent diversion

Prescription Drug Abuse

- According to the Centers for Disease Control, overdose deaths in North Dakota have increased from 20 deaths in 2013 to 43 deaths in 2014.
- The United States makes up 5% of the world's population and consumes 75% of the world's prescription drugs.
- 54.2% of prescription drug users get them free from a friend or relative
- A 2008 report by the Coalition Against Insurance Fraud estimates that the abuse of opioid analgesics results in more than \$72 billion in medical costs alone each year.

Reducing Pharmaceuticals Narcotics in our Communities

- Task force made of stakeholders throughout the state.
- Includes representation from the medical community, law enforcement, treatment professionals, state leaders
- Discuss issues in a multidisciplinary approach and look for solutions on those issues
- Many legislative initiatives were spearheaded out of this committee

New DEA Rule on Take Back in Pharmacies

- Board has agreed to work with Yellow Jug Old Drugs to provide pharmacies a take back receptacle and participation in their program (cost is about \$400 per participating location)
- Information was sent to all pharmacies on how to register with the DEA and Yellow Jug Old Drugs to get receptacle for their location.
- The Board encourages you to participate and provide this service to ensure the public has a widespread opportunity to properly dispose of controlled substances to prevent diversion and addiction issues
- Currently have around 75 pharmacies with containers and envision another 20 registered pharmacies will apply to have receptacle. Information to the public is available on our website and on the Attorney General's website in conjunction with the "take back" program in police offices.

Prescriptive Authority for Naloxone by Pharmacists

- The 2015 Legislature gave authority for the Board to develop rules to allow pharmacists to prescribe Naloxone for patients
- The rule was finalized and implemented to allow for this practice
- A easy to complete and follow process was developed to implement the rule
- Allows a pharmacist to provide an accessible option for patient at risk or caregivers to help save a life in the unfortunate case of an overdose.
- www.nodakpharmacy.com/naloxone

Prescriptive authority for Naloxone by Pharmacists

Naloxone Prescribing for Pharmacists

Pharmacists can now prescribe Naloxone as a vital link in preventing over-dose deaths from heroin and other illegal and illicit narcotics – alone or in combination with other drugs and / or alcohol.

[Naloxone Prescribing Pharmacy Search](#)

What does the pharmacist need to do?

FIRST: Review the rule at <https://www.nodakpharmacy.com/pdfs/61-04-12.pdf>.

SECOND: Take one of the available training programs:

- A. Pharmacist Letter: accessible to any NDSU preceptor or via a subscription to Pharmacists Letter:
<https://pharmacistsletter.therapeuticresearch.com/logon.aspx?bu=/ce/ceCourse.aspx?pc=16-242>
- B. Boston College and SAMHSA Program:
http://www.opioidprescribing.com/naloxone_module_1-landing
- C. College of Psychiatric & Neurologic Pharmacists:
<https://cpnp.org/guideline/naloxone>
- D. California Society of Addiction Medicine:
<http://www.csam-asam.org/naloxone-resources>
- E. Prescribe to Prevent Videos for Pharmacists, Prescribers and Patients:
<http://prescribetoprevent.org/video/>
- F. Substance Abuse and Mental Health Service Administration SAMSHA:
<http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2016/SMA16-4742>

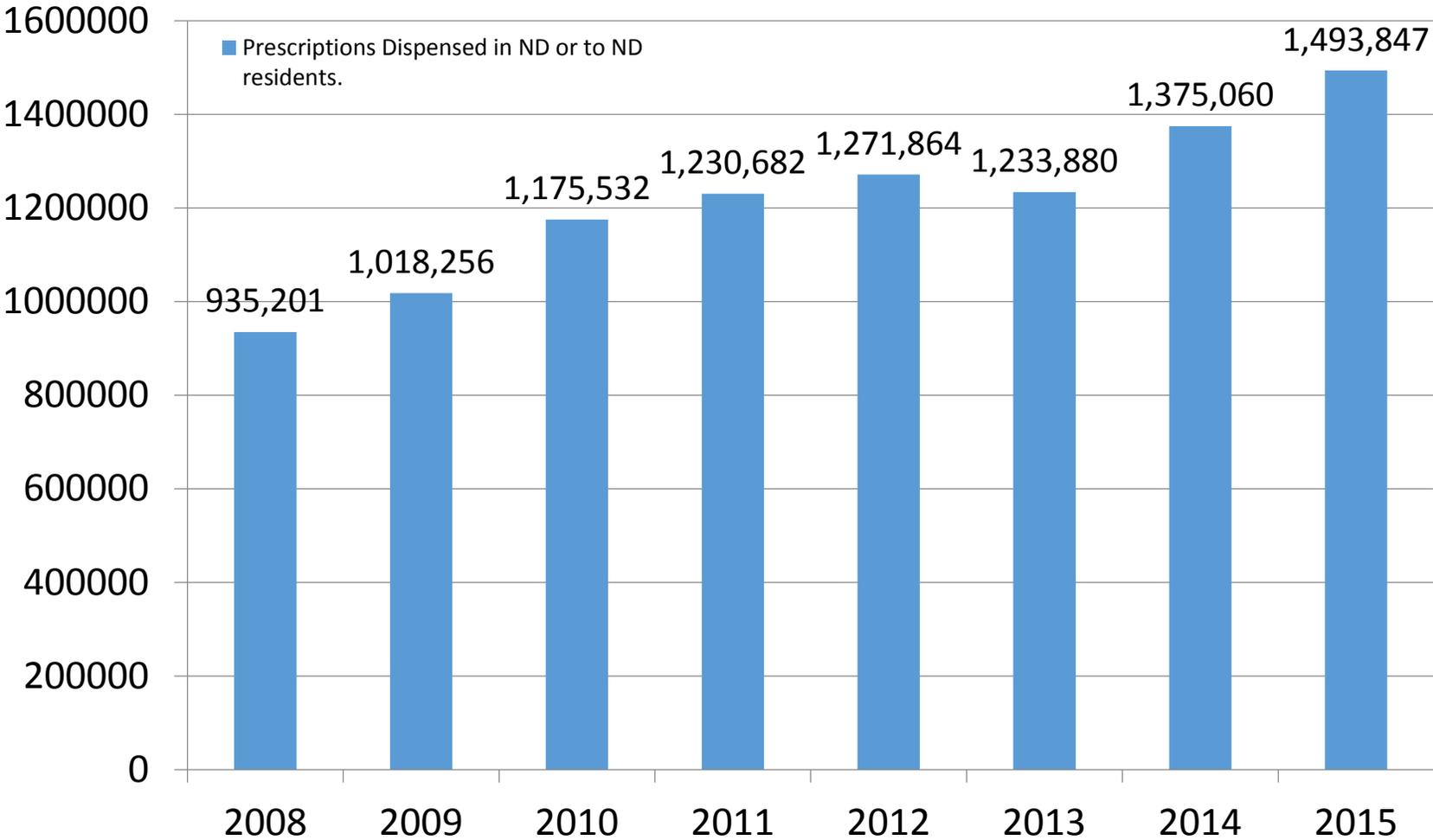
THIRD: Click [here](#) to sign up as a trained pharmacist, which will let the public find you and your pharmacy, when needing a prescription.

FOURTH: *Get busy taking care of patients: You can be the prescriber so your name goes, as a mid-level, on the prescription. You can always work with a practitioner under a collaborative agreement and in that case that person's name goes on the prescription. Payment depends on the payer and whether the prescription is for the at risk individual or another party.*

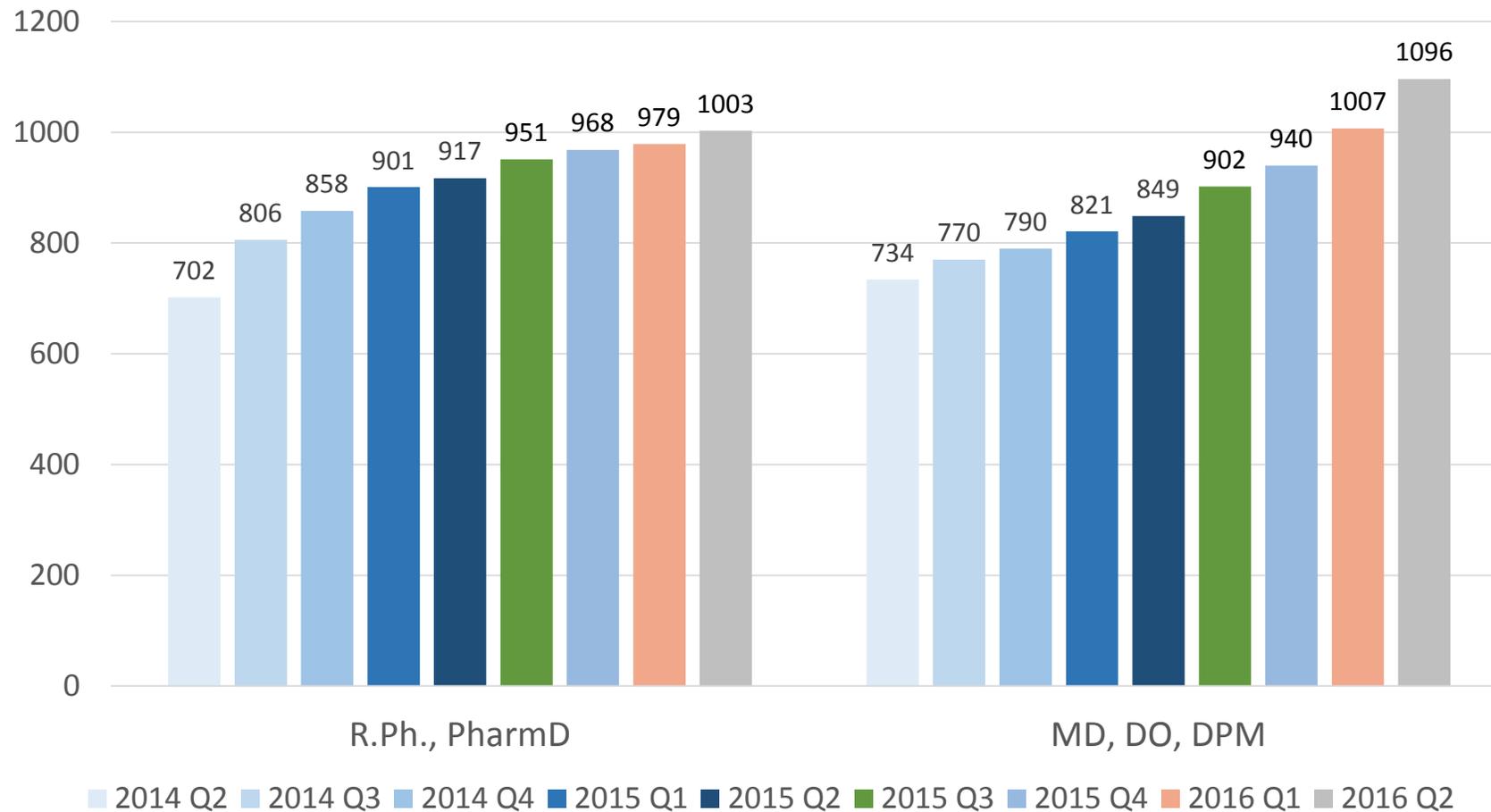
Prescription Drug Monitoring Program

Statistics and Trends

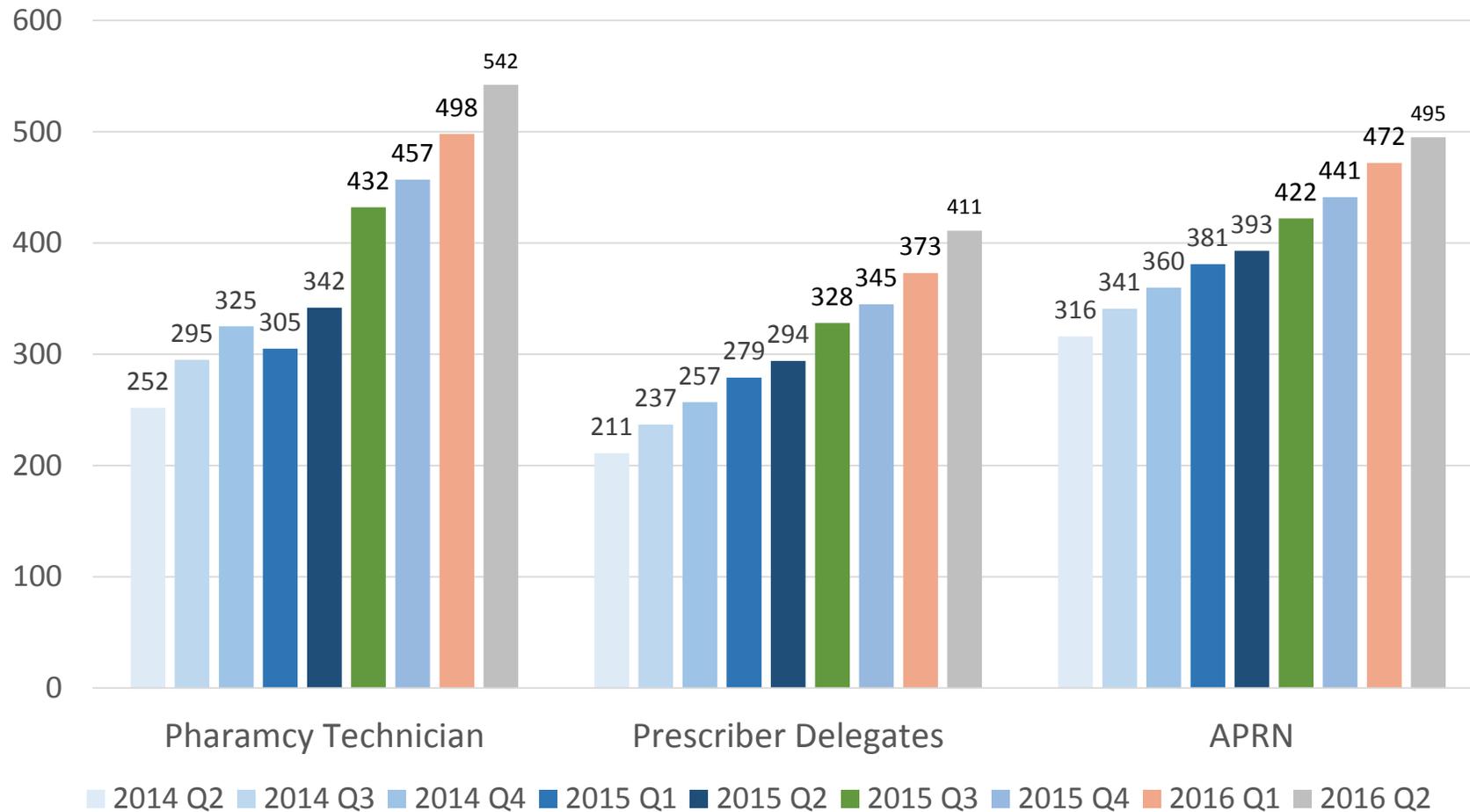
Number of Prescriptions Dispensed Per Year to ND patients and in the state of ND



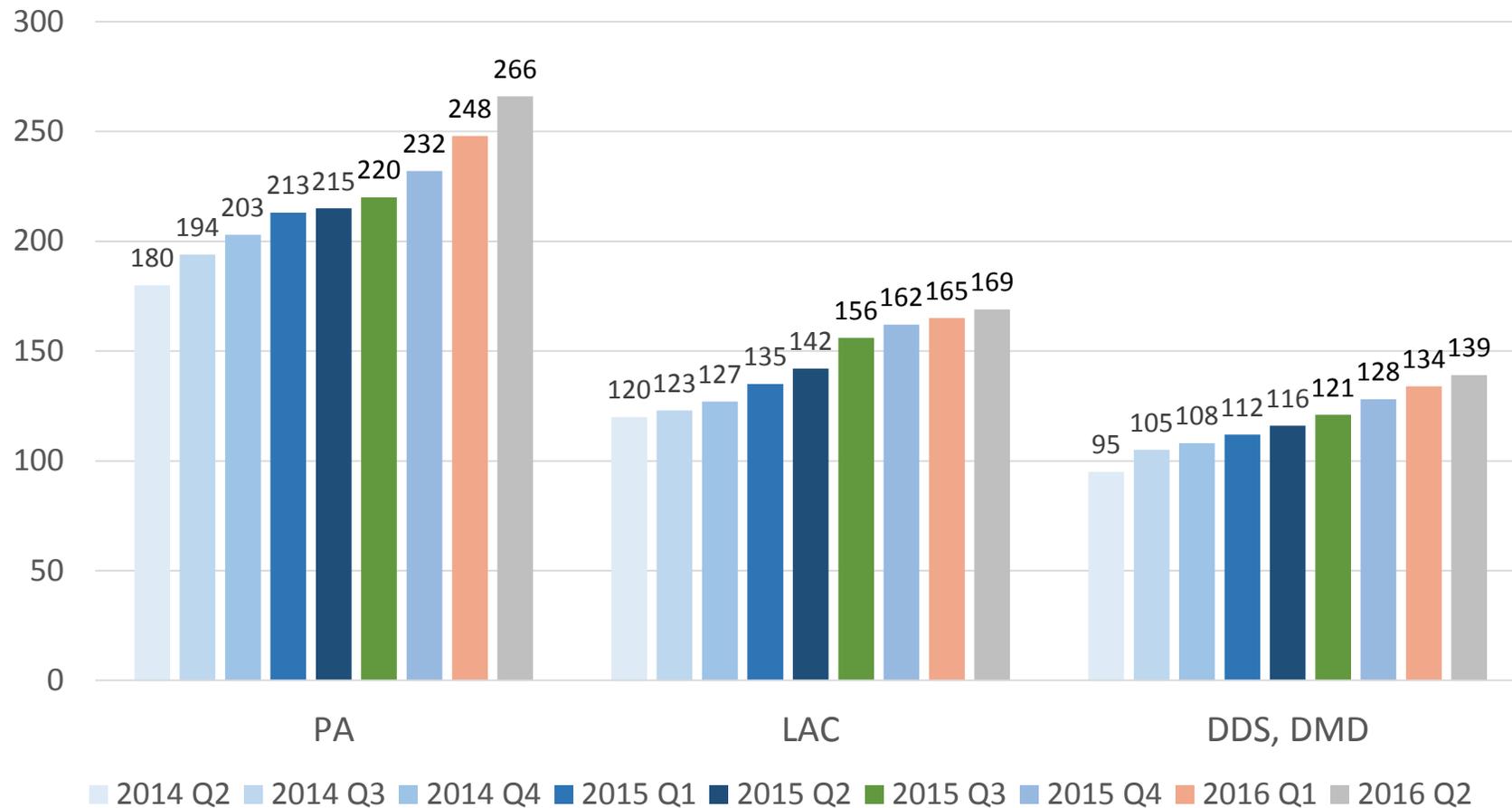
Number of Active Accounts – Pharmacists and Medical Doctors



Active Accounts – Pharmacy Technicians, Delegates, and APRNs



Active Accounts – Physician Assistants, Licensed Addiction Counselors, and Dentists



Future PDMP Initiatives

- PDMP enhancements
 - In 2014, upgraded to a new vendor Appriss (PMP AWARxE) with a new platform
 - Through software adding enhanced services (password reset, Morphine equivalent, my RX, patient search enhancement)
 - Currently working on streamlining account setup to forego a notary form based on verification from professional license board in North Dakota
- Integration efforts
 - Connection to ND Health Information Network
 - Electronic Health Record integration projects
- Legislative efforts
 - Addition of other drugs of concern as reportable drugs
 - Opportunity to use collection methods for other medication potentially for better medication reconciliation processes

Partial Fill for Schedule II Controlled Substances

- The Act specifically amends 21 United States Code §829 by adding subsection (f), which allows for the partial filling of a Schedule II prescriptions if the following conditions are met:
 - It is not prohibited by state law;
 - The prescription is written and filled in accordance with federal and state law;
 - The partial fill is requested by the patient or the practitioner who wrote the prescription and;
 - The total quantity dispensed in all partial fillings does not exceed the total quantity prescribed.
- The Act also provides that the remaining portion of a partially filled Schedule II prescription may be filled not later than 30 days after the date on which the prescription was written. However, if the partial filling of a Schedule II is the result of an emergency situation oral prescription, the pre-existing partial fill time frame of 72 hours after the prescription was issued remains. There is no prohibition on partial fill of Schedule II prescriptions in North Dakota Laws and Rules.

Question?

Thank you!

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