



Written Statement for the Record

Submitted to the House Committee on Energy & Commerce, Health Subcommittee

The Honorable Joe Pitts, Chairman

“Examining Public Health Legislation to Help Patients and Local Communities”

January 27, 2015

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Statement

Mr. Chairman and Members of the Committee, thank you for the opportunity to submit a written statement for the record in conjunction with the Health Subcommittee hearing entitled “Examining Public Health Legislation to Help Patients and Local Communities” held on January 27, 2015. We are especially appreciative that the Subcommittee is examining reauthorization of the NASPER program. We appreciate your attention to this critical issue and are pleased to present our thoughts on how to improve the program by allowing states to share information with each other in order to identify at the point of dispensing patients who may be abusing prescription drugs. To assist the Committee, we have included the attached white paper, “*NCPDP Recommendations for Improving Prescription Drug Monitoring Programs.*”

The National Council for Prescription Drug Programs (NCPDP) is the multi-stakeholder problem solving forum for healthcare and American National Standards Institute (ANSI) accredited standards development organization for the pharmacy services sector. NCPDP provides the proven forum and process for diverse healthcare stakeholders to work together for the common good. Industry solutions include standards and guidance for real-time claims adjudication, eligibility verification, payment reconciliation, HIPAA, medication history and patient safety, uniform ID cards, electronic prescribing, electronic prior authorization, REMS and more.

Prescription Drug Abuse

Prescription drug abuse is one of the fastest-growing drug problems in the United States as evidenced by the research of multiple independent and government agencies including the Centers for Disease Control (CDC) and the Office of National Drug Control Policy (ONDCP). The CDC has declared the problem an epidemic with instances of 100 unintentional overdose deaths per day. ONDCP finds that deaths involving opioid prescription drug abuse and overdose occurred four times as much in 2010 as they did a decade earlier. Drug-induced overdose deaths now surpass homicides and car crash deaths in America at a cost of more than \$193 billion annually.

Prescription Drug Monitoring Programs (PDMPs)

PDMPs are an important tool in the fight against prescription drug abuse. The Hal Rogers Program and NASPER have allocated critical funds to states in order to develop, maintain and update state databases in order to track the dispensing of these controlled medications. However, in the years since PDMPs were first developed, the prevalence of prescription drug abuse has changed dramatically – it is now a national problem, yet the technology used in state programs has not adapted to effectively combat these new challenges.

While NCPDP strongly supports a renewed emphasis on addressing this issue, simply funding existing programs at higher levels will likely not lead to the desired outcome of decreasing prescription drug abuse. Specifically:

- Traditionally prescription drug programs have focused on combatting incorrect dispensing instead of stopping the abuse before the prescription is filled;
- The current prescription monitoring communication process is systemically burdensome and does not effectively provide information at the point-of-care and in a timely manner across all state lines.; and
- State by state approaches to combatting prescription drug abuse have led to uneven success: the most recent SAMHSA National Survey on Drug Abuse showed that drug-traffickers have moved westward to states with looser restrictions.

NCPDP Supports Systemic PDMP Improvements

Through the use of existing, interoperable industry standards, providers will be able to share real-time information to enable prescribers and pharmacists to make clinical decisions prior to writing and dispensing medications for proactive intervention and to stop abuse before it starts. The burden on providers is reduced by incorporating drug abuse information within their workflows. Prescribers and pharmacists are already using NCPDP standards in their everyday operations to send, receive, and bill for prescriptions, making it easier for them to assess patient risk and ensure access for patients with a valid medical need.

NCPDP's PDMP model is a proactive, sustainable, national solution. The benefits to this approach are numerous:

- Shares real-time information at the point of care anywhere in the country through the use of existing, interoperable industry standards.
- Reduces burdens on providers by incorporating drug abuse information within pharmacy and prescriber workflows, with bidirectional communication.
- Enables prescribers and pharmacists to make clinical decisions prior to writing and dispensing medications for proactive intervention and to stop abuse before it starts.
- Ensures access for patients with valid medical needs.
- Enables individual states to maintain control over its own program.

NCPDP's model effectively addresses deficiencies in current industry PDMPs and provides an onramp for existing PDMPs to optimize value of the programs at both the state and national levels.

We encourage the Committee and its Members to address the national prescription drug abuse problem by adopting advanced and readily available technical solutions as described in the attached white paper.

Thank you, again, for your attention and work on the prescription drug abuse issue. We look forward to working with the Committee and its Members going forward in the implementation of policy and changes to reduce the instance of prescription drug abuse in the United States.