

IDENTIFYING OVERPRESCRIBERS

Through polypharmacy and potency

What causes an overdose death?

	B	C	D	E	F	G	H
4	FEMALE	4/19/2013	4/9/1935	MARION	MARION	INTESTINAL NECROSIS	SMALL BOWEL OBSTRUCTION
5	MALE	1/30/2012	11/18/1968	WASHINGTON	WASHINGTON	COMBINED OPIATE TOXICITY	
6	FEMALE	12/31/2012	5/10/1946	VANDERBURGH	PIKE	METASTATIC NON SMALL CELL LUNG CANCER	
7	MALE	12/29/2009	5/5/1949	DUBOIS	DUBOIS	LIVER FAILURE	
8	FEMALE	5/22/2013	9/20/1938	BARTHOLOMEW	BARTHOLOMEW	ACUTE CATASTROPHIC CARDIAC EVENT	PYODERMAGANGRENOSUM
9	FEMALE	10/10/2011	4/25/1966	DAVISS	DAVISS	POLYPHARMACY TOXICITY	ACUTE MIXED DRUG INTOXICATION
0	FEMALE	3/16/2012	8/23/1972	DUBOIS	DUBOIS	RESPIRATORY ARREST	CHRONIC KIDNEY DISEASE
1	MALE	6/12/2012	12/22/1953	DAVISS	DAVISS	CONGESTIVE HEART FAILURE WITH UNKNOWN CARDIOMYOPATHY	ACUTE MYOCARDIAL INFARCT
2	MALE	4/12/2012	7/2/1968	WARRICK	WARRICK	CARDIAC ARRHYTHMIA	
3	MALE	5/21/2012	1/19/1963	PERRY	PERRY	MULTI-DRUG INTOXICATION	
4	FEMALE	3/27/2010	5/16/1964	SWITZERLAND	SWITZERLAND	MULTIPLE DRUG INTOXICATION	
5	FEMALE	5/6/2013	5/10/1956	VIGO	VIGO	END STAGE RENAL DISEASE	ISCHEMIC HEART DISEASE
6	FEMALE	7/25/2011	4/18/1961	KNOX	KNOX	CONGESTIVE HEART FAILURE	ISCHEMIC HEART DISEASE
7	FEMALE	7/25/2011	4/18/1961	KNOX	KNOX	CONGESTIVE HEART FAILURE	CONARY INSUFFICIENCY
8	MALE	1/22/2010	6/14/1935	ORANGE	ORANGE	TERMINAL DYSRHYTHMIA	MYOCARDIAL INFARCTION
9	MALE	4/3/2010	11/28/1951	MARION	MARION	CONGESTIVE HEART FAILURE	
0	MALE	1/4/2011	4/10/1969	SCOTT	SCOTT	ACUTE INTOXICATION DUE TO THE COMBINED EFFECTS OF METHADONE, HYDROCODONE, AND ALPRAZOLAM	
1	FEMALE	3/23/2012	6/29/1954	FLOYD	CRAWFORD	PNEUMONIA	GASTROINTESTINAL BLEEDING
2	MALE	2/4/2009	10/23/1949	CLARK	GIBSON	POLYPHARMACY INTOXICATION	
3	MALE	6/18/2012	10/4/1949	CLARK	CLARK	GI BLEED	ANIOIC BRAIN INJURY
4	FEMALE	4/30/2012	7/3/1958	DAVISS	DAVISS	NECROTIZING ENTEROCOLITIS	
5	MALE	2/26/2012	10/19/1934	MARION	MARION	ASPIRATION PNEUMONIA	CHRONIC OBSTRUCTIVE PULMONARY DISEASE
6	MALE	4/16/2011	9/5/1917	ORANGE	ORANGE	ACUTE LEUKEMIA	
7	MALE	11/18/2011	7/21/1947	MARTIN	MARTIN	NON-CONTACT SHOTGUN WOUND WITH LACERATION TO AORTA	
8	FEMALE	3/28/2012	9/4/1959	BARTHOLOMEW	JENNINGS	METASTATIC BREAST CANCER	
9	MALE	9/7/2012	2/14/1945	JENNINGS	JENNINGS	CARDIAC ARREST	MYOCARDIAL INFARCTION
0	MALE	6/19/2013	11/28/1961	PIKE	PIKE	ACUTE MYOCARDIAL INFARCTION	
1	MALE	6/19/2013	11/28/1961	PIKE	PIKE	ACUTE MYOCARDIAL INFARCTION	
2	MALE	5/5/2013	3/6/1949	DAVISS	DAVISS	FATAL ARRHYTHMIA SECONDARY TO ATHEROSCLEROTIC HEART DISEASE	
3	MALE	4/4/2013	7/13/1954	FLOYD	CLARK	POSSIBLE PE	DEHYDRATION
4	FEMALE	12/6/2009	6/4/1952	CLARK	CLARK	CONGESTIVE HEART FAILURE	
5	MALE	9/28/2012	7/14/1957	WARRICK	VANDERBURGH	METABOLIC ENCEPHALOPATHY	SEPSIS
6	FEMALE	3/23/2011	6/24/1942	CLARK	CLARK	COPD	
7	MALE	12/24/2012	7/4/1990	JEFFERSON	CLARK	GUNSHOT WOUND OF HEAD	
8	FEMALE	6/28/2013	5/28/1983	SCOTT	SCOTT	PENDING INVESTIGATION	
9	MALE	10/12/2009	1/19/1961	KNOX	KNOX	CARDIOMYOPATHY	HEART DISEASE
0	FEMALE	9/14/2011	3/8/1941	JOHNSON	JOHNSON	ENCEPHALOPATHY	
1	MALE	1/8/2012	7/25/1956	KNOX	KNOX	UNDETERMINED	
2	MALE	7/24/2010	7/7/1944	FLOYD	SCOTT	PNEUMONIA	ISCHEMIC CARDIOMYOPATHY
3	MALE	9/22/2012	7/27/1941	CRAWFORD	CRAWFORD	ACUTE MI	RIGHT SIDED CHF
4	MALE	2/9/2010	10/9/1966	CLAY	CLAY	ACUTE MYOCARDIAL INFARCTION	
5	MALE	11/17/2010	8/12/1969	DAVISS	DAVISS	PNEUMONIA	CHRONIC PANCREATITIS
6	FEMALE	11/14/2009	11/18/1948	PIKE	PIKE	METASTATIC CARCINOMA BREAST	
7	FEMALE	6/9/2011	9/20/1959	FLOYD	FLOYD	ACUTE CEREBRAL HEMORRHAGE	
8	MALE	2/24/2011	6/17/1950	FLOYD	FLOYD	ACUTE RESPIRATORY FAILURE	END STAGE RENAL DISEASE
9	MALE	3/31/2013	8/22/1928	VIGO	SULLIVAN	PNEUMOCOCCAL ENCEPHALITIS	PNEUMOCOCCAL SEPSIS
0	FEMALE	5/26/2013	4/5/1947	ORANGE	ORANGE	RENAL FAILURE	STAGE 4 LUNG ADENOCARCINOMA TO SPINE
1	MALE	5/12/2013	6/28/1963	FLOYD	FLOYD	LUNG CANCER	METHADONE TOXICITY
2	FEMALE	5/7/2010	1/13/1943	CLARK	CLARK	SUICIDE DEATH	CORONARY ARTERY DISEASE
3	MALE	12/20/2011	7/1/1966	JEFFERSON	JEFFERSON	ACUTE LOBAR PNEUMONIA	MIXED DRUG OVERDOSE
4	FEMALE	7/25/2010	11/8/1944	CLARK	CLARK	HYPOVIA	CARDIAC ENCEPHALITIS

	B	C	D	G
1	SEX	DOD	DOB	CAUSE A
2	FEMALE	2/15/2009	9/4/1938	LUNG CANCER
3	MALE	3/22/2012	10/31/1954	EYSANQUINATION
4	MALE	12/29/2012	4/30/1971	POLYPHARMACEUTICAL INTOXICATION
5	FEMALE	2/2/2011	1/28/1964	POLYPHARMACEUTICAL INTOXICATION
6	FEMALE	4/15/2013	3/20/1960	ACUTE RESPIRATORY FAILURE SECONDARY TO INGESTION OF OPIATES AND AMPHETAMINES
7	FEMALE	4/13/2009	11/16/1952	MULTI SUBSTANCE INTOXICATION
8	FEMALE	1/16/2013	8/15/1955	OVERDOSE RESULTING IN RESPIRATORY FAILURE
9	MALE	12/10/2010	10/21/1971	ACUTE INTOXICATION DUE TO THE COMBINED EFFECTS OF ALPRAZOLAM AND METHADONE
10	MALE	3/24/2012	10/30/1968	POLYPHARMACY INTOXICATION
11	MALE	9/4/2010	11/5/1975	PROBABLE DRUG OVERDOSE
12	MALE	8/28/2009	5/8/1962	POLYPHARMACY INTOXICATION
13	MALE	10/2/2012	10/2/1956	ACUTE INTOXICATION DUE TO COCAINE, OPIATES AND DIAZEPAM
14	FEMALE	3/14/2009	6/9/1973	MULTIPLE SUBSTANCE INTOXICATION
15	FEMALE	2/10/2012	7/15/1971	MULTIPLE DRUG INTOXICATION (OXYMORPHONE, ALPRAZOLAM, AMITRIPTYLINE)
16	MALE	3/15/2012	7/15/1962	ACUTE POLYSUBSTANCE INTOXICATION
17	FEMALE	11/14/2012	7/12/1963	POLYPHARMACEUTICAL
18	FEMALE	9/21/2011	12/8/1978	COMBINED DRUG INTOXICATION (OXYMORPHONE, HYDROCODONE, ALPRAZOLAM, DIAZEPAM, AND CLONAZEPAM)
19	FEMALE	7/11/2012	4/20/1966	CHRONIC ALCOHOLISM
20	FEMALE	3/2/2011	10/24/1974	ACUTE DRUG INTOXICATION (MORPHINE, HYDROMORPHONE, OXYCODONE)
21	MALE	7/30/2011	6/25/1976	MIXED DRUG INTOXICATION DUE TO THE COMBINED EFFECTS OF BENZODIAZEPINES, METHADONE AND OPIATES
22	FEMALE	3/9/2013	1/31/1988	MIXED DRUG INTOXICATIONS MONOACTYMPHORPHINE, CODEINE, HYDROCODONE, CARDIONVASEULAR AGENTS, OXPBRENOL
23	MALE	4/1/2011	12/21/1935	CHRONIC OBSTRUCTIVE PULMONARY DISEASE
24	MALE	4/21/2010	12/5/1926	CEREBROVASCULAR ACCIDENT
25	MALE	5/7/2013	3/3/1948	ADENOCARCINOMA OF LUNG
26	MALE	4/7/2012	12/22/1967	MULTIPLE DRUG INTOXICATION (ALPRAZOLAM, OXYCODONE, AND OXYMORPHONE)

	C	D	F	G	H
1	DOD	DOB	CAUSE A		CAUSE B
2	8/6/2013	3/19/1962	ACUTE CARDIORESPIRATORY FAILURE		FULMINANT HEPATIC FAILURE
3	6/8/2012	6/22/1963	FATAL CARDIAC ARRHYTHMIA		POSSIBLE ACCIDENTAL OVERDOSE OF PRESCRIPTION MEDICATION
4	1/17/2012	4/13/1931	CARDIAC ARRHYTHMIA		
5	10/8/2012	8/1/1968	CIRRHOSIS OF LIVER		
6	8/4/2013	7/10/1966	FATAL CARDIAC ARRHYTHMIA		SUDDEN CARDIAC DEATH
7	1/11/2011	4/27/1960	MIXED DRUG INTOXICATION (BENZODIAZEPINES, HYDROCODONE)		
8	7/25/2011	8/11/1928	METASTATIC BLADDER CARCINOMA		
9	7/18/2012	4/24/1965	ACUTE MULTI-DRUG INTOXICATION		
10	10/16/2012	3/9/1917	CARDIAC ARRHYTHMIA		CARDIOMYOPATHY
11	11/19/2011	2/4/1961	FATAL CARDIAC ARRHYTHMIA		POLY DRUG USE (METHUONE, ALCOHOL) ON AN ALREADY COMPROMISED
12	3/12/2011	10/11/1916	FATAL CARDIAC ARREST		
13	1/8/2013	6/15/1961	POLY DRUG INTOXICATION		CARDIAC ARRHYTHMIA
14	7/3/2013	11/25/1967	FATAL CARDIAC ARRHYTHMIA		ENLARGED HEART
15	1/31/2013	8/7/1924	CONGESTIVE HEART FAILURE		CARDIOMYOPATHY
16	1/16/2012	10/14/1936	METASTATIC LUNG CANCER		
17	6/17/2009	3/22/1924	CARDIAC ARRHYTHMIA		CORONARY ARTERY DISEASE
18	9/22/2011	8/30/1970	FATAL CARDIAC ARRHYTHMIA		MI
19	3/9/2010	11/12/1949	METASTATIC BRAIN CARCINOMA		
20	12/9/2010	5/11/1972	FATAL CARDIAC ARRHYTHMIA		
21	1/3/2011	12/16/1924	INTRA CEREBRAL BLEEDING		
22	8/10/2009	11/12/1965	MULTI DRUG OVERDOSE		
23	11/30/2009	1/3/1926	CARDIAC ARRHYTHMIA		
24	9/18/2009	1/17/1945	SUDDEN CARDIAC DEATH		POSS. MI
25	1/10/2010	2/14/1954	ACUTE FENTANYL TOXICITY		
26	1/21/2010	2/2/1933	CONGESTIVE HEART FAILURE		
27	9/18/2010	4/26/1949	CARDIAC ARRHYTHMIA		ACUTE MYOCARDIAL INFARCTION
28	9/3/2009	12/2/1941	CARDIAC ARRHYTHMIA		
29	11/10/2009	6/5/1968	GUNSHOT WOUND TO CHEST		
30	5/8/2011	3/1/1947	FATAL CARDIAC ARREST		CONGESTIVE HEART FAILURE

KILLER COMBOS - POLYPHARMACY

Benzodiazepine



Opioid



On the street there is a drug combination known as a "speedball"



PHARMACEUTICAL "SPEEDBALL"



Opioid



Amphetamine

Feds: Pill mill doctor in Ohio prescribed dangerous 'triple threat heaven' drug combo

By Melissa Neeley, Digital Content Producer | CONNECT



CINCINNATI, OH (FOX19) - Four people are facing charges related to pill mill crackdowns in Hamilton, federal officials announced Thursday.

A federal grand jury charged the suspects in three separate cases for their role in the deaths of three patients and more than \$2.4 million in healthcare fraud.

In the first case, Dr. Saad Sakkal is accused of prescribing patients dangerous drug cocktails and illegally distributing drugs, including opioids, according to a 38-count indictment.

Sakkal is charged with being responsible for the deaths of two patients who died in 2016 due to complications from drug use.

It's alleged that Sakkal prescribed medically-dangerous combinations of controlled substances, including:

- Holy Trinity - an opiate, a benzodiazepine, and a stimulant
- Prescriptive Speedball - an opiate and a stimulant
- Triple Threat Heaven - methadone, a benzodiazepine, and a stimulant

TRIPLE THREAT HEAVEN



Amphetamine

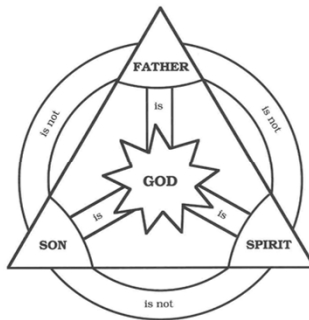


Benzodiazepine

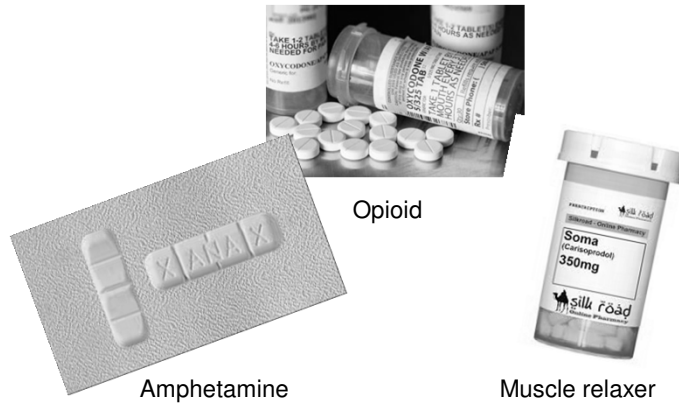


Opioid

In Christianity...



The holy trinity of drugs

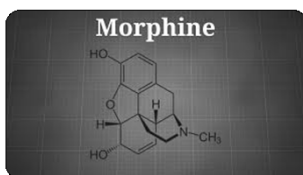


Amphetamine

Muscle relaxer

MORPHINE EQUIVALENCY – POTENCY

Morphine Equivalent Doses (MED, MME, MEQ)



Opioid Dose Calculator

[← Back to AMDG Home](#)

Instructions: Fill in the mg per day* for whichever opioids your patient is taking. The web page will automatically calculate the total morphine equivalents per day.

Opioid (oral or transdermal):	mg per day:*	
Codeine	<input type="text"/>	0
Fentanyl transdermal (in mcg hr)	<input type="text"/>	96
Hydrocodone	<input type="text" value="10"/>	10
Hydromorphone	<input type="text"/>	0
Methadone†	<input type="text" value="10"/>	40
Morphine	<input type="text"/>	0
Oxycodone	<input type="text" value="10"/>	15
Oxymorphone	<input type="text"/>	0
Tapentadol	<input type="text"/>	0
Tramadol	<input type="text"/>	0
Total		161

This value is greater than 120mg MED. Please follow Part II of the AMDG Interagency Guideline on Opioid Dosing for Chronic Non-cancer Pain. See [AMDG 2015 Guideline](#)

Opioid Dose Calculator

[← Back to AMDG Home](#)

Instructions: Fill in the mg per day* for whichever opioids your patient is taking. The web page will automatically calculate the total morphine equivalents per day.

Opioid (oral or transdermal):	mg per day:*	
Codeine	<input type="text"/>	0
Fentanyl transdermal (in mcg/hr)	<input type="text"/>	96
Hydrocodone	<input type="text" value="40"/>	40
Hydromorphone	<input type="text"/>	0
Methadone†	<input type="text" value="40"/>	320
Morphine	<input type="text"/>	0
Oxycodone	<input type="text" value="120"/>	180
Oxymorphone	<input type="text"/>	0
Tapentadol	<input type="text"/>	0
Tramadol	<input type="text"/>	0
Total		636

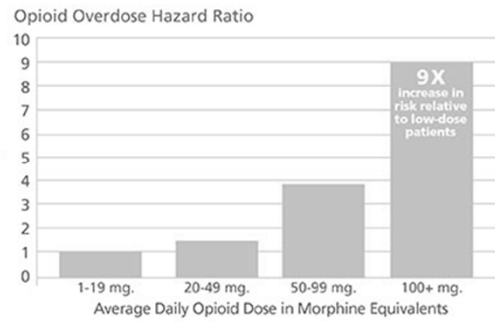
This value is greater than 120mg MME. Please follow Part II of the AMDG Interagency Guideline on Opioid Dosing for Chronic Non-cancer Pain. See: [AMDG 2015 Guideline](#)

The CDC has provided guidance for how to calculate MME for commonly prescribed opioids (see table). Calculate the patient's total daily dose of their current opioid (including "as needed" doses), and multiply by the conversion factor shown in the table. This would be the patient's MME dose per day.

Opioid	Conversion factor
Codeine	0.15
Fentanyl transdermal (mcg/h)	2.4
Hydrocodone	1
Hydromorphone	4
Methadone	
1 mg/d–20 mg/d	4
21 mg/d–40 mg/d	8
41 mg/d–60 mg/d	10
≥61 mg/d–80 mg/d	12
Morphine	1
Oxycodone	1.5
Oxymorphone	3
Tapentadol	0.4

Higher opioids dosing is deadly

Dunn et al., Annals Int Med, 2010



PATIENT PRESCRIBING ANALYSIS

19		8/11/1964	5/19/2016	OXYCOD/APAP TAB 10-325MG	Cvs Walgreens Network	Paid	224	28	
20		8/11/1964	5/28/2016	GABAPENTIN CAP 300MG	Cvs Walgreens Network	Paid	84	28	
21		8/11/1964	6/16/2016	LORAZEPAM TAB 1MG	Cvs Walgreens Network	Paid	84	28	
22		8/11/1964	6/16/2016	METHADONE TAB 10MG	Cvs Walgreens Network	Paid	112	28	
23		8/11/1964	6/16/2016	OXYCOD/APAP TAB 10-325MG	Cvs Walgreens Network	Paid	224	28	
24		8/11/1964	7/14/2016	LORAZEPAM TAB 1MG	Cvs Walgreens Network	Paid	84	28	
25		8/11/1964	7/14/2016	METHADONE TAB 10MG	Cvs Walgreens Network	Paid	112	28	
26		8/11/1964	7/14/2016	OXYCOD/APAP TAB 10-325MG	Cvs Walgreens Network	Paid	224	28	
27	LONG TERM CURRNT USE OPIATE ANALGES		7/27/2016	DRUG TEST PRESUMP OPTICAL					
28	SPONDYLS W/O MYELO-/RADICULOP LUMB		7/27/2016	OFFICE/OUTPATIENT VISIT EST					
29		8/11/1964	9/8/2016	LORAZEPAM TAB 1MG	Cvs National C/v Network	Paid	84	28	
30		8/11/1964	9/8/2016	METHADONE TAB 10MG	Cvs National C/v Network	Paid	112	28	
31		8/11/1964	9/8/2016	OXYCOD/APAP TAB 10-325MG	Cvs National C/v Network	Paid	224	28	
32		8/11/1964	10/6/2016	LORAZEPAM TAB 1MG	Cvs National C/v Network	Paid	84	28	
33		8/11/1964	10/6/2016	METHADONE TAB 10MG	Cvs National C/v Network	Paid	112	28	
34		8/11/1964	10/6/2016	OXYCOD/APAP TAB 10-325MG	Cvs National C/v Network	Paid	224	28	
35		8/11/1964	11/3/2016	LORAZEPAM TAB 1MG	Cvs National C/v Network	Paid	84	28	
36		8/11/1964	11/3/2016	METHADONE TAB 10MG	Cvs National C/v Network	Paid	112	28	
37		8/11/1964	11/3/2016	OXYCOD/APAP TAB 10-325MG	Cvs National C/v Network	Paid	224	28	
38	FIBROMYALGIA		11/9/2016	OFFICE/OUTPATIENT VISIT EST					
39	LONG TERM CURRNT USE OPIATE ANALGES		11/9/2016	DRUG TEST PRESUMP OPTICAL					
40		8/11/1964	12/1/2016	LORAZEPAM TAB 1MG	Cvs National C/v Network	Paid	84	28	
41		8/11/1964	12/1/2016	METHADONE TAB 10MG	Cvs National C/v Network	Paid	112	28	
42		8/11/1964	12/1/2016	OXYCOD/APAP TAB 10-325MG	Cvs National C/v Network	Paid	224	28	
43		8/11/1964	12/29/2016	LORAZEPAM TAB 1MG	Cvs National C/v Network	Paid	84	28	
44		8/11/1964	12/29/2016	METHADONE TAB 10MG	Cvs National C/v Network	Paid	112	28	
45		8/11/1964	12/29/2016	OXYCOD/APAP TAB 10-325MG	Cvs National C/v Network	Paid	180	30	
46	FIBROMYALGIA		2/8/2017	OFFICE/OUTPATIENT VISIT EST					
47		8/11/1964	Lafayette	GABAPENTIN CAP 300MG	Walgreens Managed Medicaid	Rejected	84	28	
48		8/11/1964	Lafayette	OXYCOD/APAP TAB 10-325MG	Cvs National C/v Network	Rejected	448	65	
49		8/11/1964	Lafayette	OXYCOD/APAP TAB 10-325MG	Walgreens Managed Medicaid	Rejected	448	56	
50			MEMBER DATE OF BIRTH	MEMBER CITY	DRUG DESCRIPTION	PHARM NW NAME	PRESCRIPTION	Sum of METRIC QTY	Sum of DAYS SUPPLY
51									
52									
53	MEQ = 240			Benzodiazepine also being Rxed.					

1	Diagnosis 01 - Service Description	Procedure 01 - Service Description	Prv	Service End Date										
2	RADICULOPATHY LUMBAR REGION	OFFICE/OUTPATIENT VISIT EST	'-1	3/2/2016	HYDROCO/APAP TAB 7.5-325	Paid	168	28						
3				3/9/1961	3/2/2016	CLONAZEPAM TAB 0.5MG	Paid	84	28					
4				3/9/1961	3/15/2016	OMEPRAZOLE CAP 20MG	Paid	30	30					
5				3/9/1961	3/23/2016	HYDROCO/APAP TAB 7.5-325	Paid	168	28					
6				3/9/1961	3/30/2016	CLONAZEPAM TAB 0.5MG	Paid	84	28					
7				3/9/1961	4/20/2016	HYDROCO/APAP TAB 7.5-325	Paid	168	28					
8				3/9/1961	4/25/2016	CLONAZEPAM TAB 0.5MG	Paid	84	28					
9				3/9/1961	5/18/2016	HYDROCO/APAP TAB 7.5-325	Paid	168	28					
10				3/9/1961	5/21/2016	CLONAZEPAM TAB 0.5MG	Paid	84	28					
11				3/9/1961	6/15/2016	HYDROCO/APAP TAB 7.5-325	Paid	168	28					
12				3/9/1961	6/18/2016	CLONAZEPAM TAB 0.5MG	Paid	84	28					
13	RADICULOPATHY LUMBAR REGION	OFFICE/OUTPATIENT VISIT EST	'-1	7/6/2016										
14				3/9/1961	7/7/2016	OMEPRAZOLE CAP 20MG	Paid	30	30					
15				3/9/1961	7/13/2016	CLONAZEPAM TAB 0.5MG	Paid	90	30					
16				3/9/1961	7/13/2016	HYDROCO/APAP TAB 7.5-325	Paid	168	28					
17				3/9/1961	8/10/2016	CLONAZEPAM TAB 0.5MG	Paid	90	30					
18				3/9/1961	8/10/2016	HYDROCO/APAP TAB 7.5-325	Paid	168	28					
19				3/9/1961	8/18/2016	OMEPRAZOLE CAP 20MG	Paid	30	30					
20	SPONDYLS W/O MYELO-/RADICULOP CERV	OFFICE/OUTPATIENT VISIT EST	'-1	11/17/2016										
21				3/9/1961	11/29/2016	OXYCODONE TAB 10MG	Paid	168	28					
22				3/9/1961	12/16/2016	GABAPENTIN CAP 300MG	Paid	84	28					
23				3/9/1961	12/23/2016	CLONAZEPAM TAB 1MG	Paid	84	28					
24				3/9/1961	12/23/2016	OXYCODONE TAB 10MG	Paid	168	28					
25	SPONDYLS W/O MYELO-/RADICULOP LUMB	OFFICE/OUTPATIENT VISIT EST	'-1	4/14/2017										
26				3/9/1961		CLONAZEPAM TAB 0.5MG	Reject	224	56					
27				3/9/1961		CLONAZEPAM TAB 1MG	Reject	56	28					
28				3/9/1961		GABAPENTIN CAP 300MG	Reject	84	28					
29				3/9/1961		HYDROCO/APAP TAB 7.5-325	Reject	168	28					
30				3/9/1961		OMEPRAZOLE CAP 20MG	Reject	90	90					
31				3/9/1961		OXYCODONE TAB 10MG	Reject	168	28					
32				3/9/1961										
33	MEMBER LAST	MEMBER DATE OF BIRTH	DATE	DATE FILLED	DRUG DESCRIPTION	PRESCRIPTION	Sum of	Sum of	DAYS SUPPLY					
34														
35														
36	MEQ = 180				Benzos and opioids Rxed									

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OPIOID CRISIS: SENIOR LIVING

SENIORS: AN AT RISK POPULATION

- More susceptible to injuries that require pain management
- Deteriorating cognitive functions
- Social and emotional limitations
- Statistics
 - About 40 percent of older adults report pain, compared to 30 percent of the general population
 - One-third of all Medicare Part D beneficiaries received at least one opioid prescription, or 14.4 million people had at least one opioid prescription in 2016, with over 500,000 beneficiaries using very high amounts of the medication.
 - A Stanford University analysis found that seniors covered by Medicare have “among the highest and most rapidly growing prevalence of opioid use disorder.” The report found that more than six out of every 1,000 Medicare patients are diagnosed with an opioid disorder, compared to one of every 1,000 patients covered by commercial insurance plans.

SENIOR LIVING FACILITY LIMITATIONS

- Recognition Barriers
- Limited Clinical Expertise
- Pain Assessments and Training
- High Turnover Industry

OPPORTUNITIES WITH SENIOR LIVING RESIDENTS

- Pain
 - Assessments
 - PRN Medication
 - Alternative Treatment and Therapies
- Communication
 - Involvement in daily lives of residents
 - Understanding treatment goals
 - Disclose risks and benefits

OPPORTUNITIES: COORDINATING WITH OTHER PROVIDERS

- Multiple Resident Providers
- Pharmacy Review
- Review the medications administered to verify they can be taken in conjunction with others.



OPPORTUNITIES

- Implementing facility specific policies and procedures to ensure you are adequately monitoring all medications used and ensure you are providing a safe resident environment.
- Establishing medication handling and control practices
- Implementing procedures to prevent the use of medications by anyone other than the prescribed user.

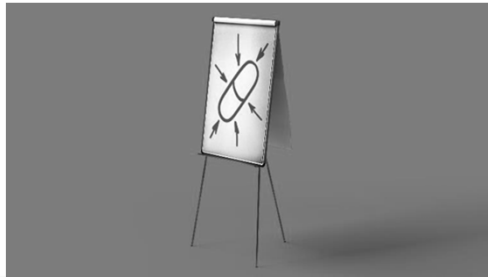
OPPORTUNITIES- STORAGE, CONTROLS, AND DISPOSAL

- Secure Storage
- Access and Use Controls
- Proper Disposal



OPPORTUNITIES- TRAINING

- Educate team members, residents and resident family members.
- Document and Communicate Signs and Symptoms
- Stay Informed



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Overprescribing doctors in your plan – now what?



GOT INTENT?



- Overdoses – knowledge
 - ER records - letters
- Over 90mg a day letter
- Audit
- Education
- Prepayment Review
- Licensing problems



- Patient records (lost, early refill, drugs by name, cookie cutter)
- Demographics
- Social media
- Right choices members
- Pharmacy refusals
- Criminal history

Charge Records

Count I , Number 1 : (Original)
 Charge: 35-48-4-7(a) POSSESSION OF A CONTROLLED SUBSTANCE Plea:
 Charge Type: A Misdemeanor Disposition: **DISMISSED**
 Charge Date: 08/12/2015 Disposition Date: 03/07/2016

Count II , Number 2 : (Original)
 Charge: 35-48-4-8-3(b)(1) POSSESSION OF PARAPHERNALIA Plea:
 Charge Type: C Misdemeanor Disposition: **PLEA GUILTY**
 Charge Date: 08/12/2015 Disposition Date: 03/07/2016


TERMINATION

- For cause
 - Patient records and interviews + intent = patient harm
 - “an immediate threat or risk to the health, safety or welfare of our members”
- No fault divorce
 - Contract termination – notice 180 days
 - with or without PPR

Overprescribed Members – Don't forget us

IDENTIFYING THE PROBLEM

- Pharmacy Benefits Manager – INSPECT



Indiana Prescription Monitoring
402 W Washington St, Room W072; Indiana
Phone: (844) 446-4767 Email: INRxReport@appriss.c
Inspect RX Report

Pill Date	Product, Str, Form	Quantity	Days	Pt ID	Prescriber	Written	Rx #
03/23/2017	PROMETHAZINE WITH CODEINE, 10 MG/5ML, 6.25 MG/5ML, SYRUP	150.00	30	1		03/23/2017	
03/23/2017	ALPRAZOLAM, 5 MG, TABLET	90.00	30			03/23/2017	
02/23/2017	ALPRAZOLAM, 5 MG, TABLET	90.00	30			02/23/2017	
02/23/2017	PROMETHAZINE HYDROCHLORIDE AND CODEINE PHOSPHATE, 10 MG/5ML, 6.25 MG/5ML, SYRUP	150.00	30			02/23/2017	
02/18/2017	TRAMADOL HYDROCHLORIDE, 50 MG, TABLET, FILM COATED	28.00	7			01/26/2017	

PATIENT RECORDS

EMERGENCY ROOM REPORT

dictated by [REDACTED]

attending: [REDACTED]

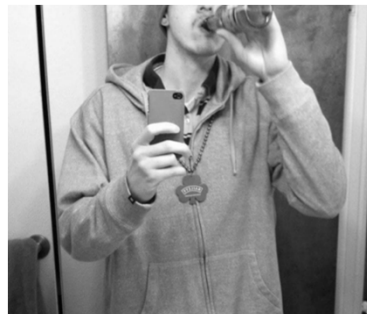
RM:

DOB: [REDACTED]

a 34-year-old female who has a history of opiate problems. She says she does not use it here 3 days ago after an opiate overdose or heroin overdose; she is not sure what she injected it into the vein. Today, she injected it into her muscle and she thought that might not be if it was morphine or heroin, but it was some sort opiate. She was found difficult to give some Zofran by the medics that she vomited. The patient currently denies any symptoms of bit of nausea, no chest pain, shortness of breath. She knows that she has a problem, but she has a history of endometriosis and sometime she uses street medications to try and help with the pain from her medicines. She has a past medical history for degenerative disk disease and orthopedic procedures, left middle finger, left arm surgery. Social history, she uses opiates. Denies alcohol, marijuana or cocaine. History for diabetes, COPD, depression. Allergies are NAPROXEN. This is the nurse's notes.

- Social media, Social Media, Social media, Social media

Drug Addicts
Are Not Bad People Or
Just Some Junkies And
Losers who Deserve to die.
They're Actually
Good People Who Have
Families That Love Them,
But Just End Up Being
A Victim To The Disease
Of Addiction.
And They Can't Help It.
So If You Can't Help Them,
Don't Hurt Them.
And Instead Of Judging Them,
Pray For Them.



- Assign case managers
- Assist with selection of new PCP
- Notify all prescribers
- Provide education for Substance Use Disorder treatments available
- Refer to the Right Choices Program/Restricted Card

QUESTIONS?

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