

Why It Makes **Sense** to **Exempt Veterinarians** from the Prescription Drug Monitoring Program (PDMP)



AKVMA requests a
YES vote
on **HB 91**

Alaska State Veterinary Medical Association

Contact for Information:

Dr. McKayla Dick

E | mdickval@gmail.com

Dr. Jim Delker

E | jddelker@aol.com

AKVMA Office

T | 907.205.4272

E | info@akvma.org





Alaska State Veterinary Medical Association

Who We Are

The Alaska State Veterinary is a non-profit organization dedicated exclusively to the profession of veterinary medicine and the interests of veterinarians, their clients, and patients.

AKVMA is comprised of 150 member veterinarians that represent the broad spectrum of veterinary medicine, including, but not limited to small animal, agriculture animals, exotic, wildlife, aquatic, equine practice, and those veterinarians working in research, academia, military, and other government capacities.

The AKVMA is committed to helping protect the health, safety, and welfare of Alaskans, advocating for veterinarians to provide safe, competent professional veterinary services to consumers, and supporting scientifically based regulations that support these goals.

Visit Us At

akvma.org

Position of AKVMA Regarding the PDMP

Many unique aspects of the practice of veterinary medicine must be considered in the development of laws and regulations that govern the use of opioids and controlled substances in animal patients.

The current law in place requiring the participation of veterinarians in the prescription drug monitoring program is:

- ✓ **not a practical and effective solution** for the intended purposes of the PDMP in Alaska.
- ✓ **not useable** for veterinarians and animals.
- ✓ **creating additional unnecessary** and disproportionate business burdens for veterinarians.
- ✓ **adding to unnecessary administrative costs** which are passed onto the taxpayer.

It is for these reasons that AKVMA believes it **MAKES SENSE TO EXEMPT VETERINARIANS FROM THE PDMP IN ALASKA.**

AKVMA urges **SUPPORT of HB 91** that exempts veterinarians from participation in the PDMP.

The following information presents an overview of the issues surrounding the participation of veterinarians in the PDMP.

Why the PDMP is unusable for veterinarians and animals.....	p. 3
Explaining the ineffectiveness of the PDMP for veterinarians....	p. 4
Drugs involved in the opioid crisis are not the drugs commonly used in veterinary medicine.....	p. 5
Additional reasons for exempting veterinarians from the the PDMP.....	p. 6-7
How an exemption of veterinarians from the PDMP benefits Alaskans.....	p. 8
What AKVMA supports for effective solutions to the national opioid issues.....	p. 8



THE ISSUE

THE PDMP IS **UNUSABLE** FOR VETERINARIANS AND ANIMALS

A primary intended purpose of the PDMP is for prescribers to review prescription history information and look for potential interactions to protect patient safety. **Veterinarians cannot use the PDMP to protect patient safety. Here is why:**

Veterinarians don't treat humans and animals are not listed in the PDMP independently which renders the PDMP database unusable.

- Animals are coded under a human's database information and are not identifiable by a common identifier such as a social security number. Not all animals are microchipped and if they are, many are not registered and can still change owners.
- Animals can have a change of ownership or a name change making it impossible to track prescriptions accurately. This renders the database unusable for identifying possible misuse, drug interactions or other potential concerns.

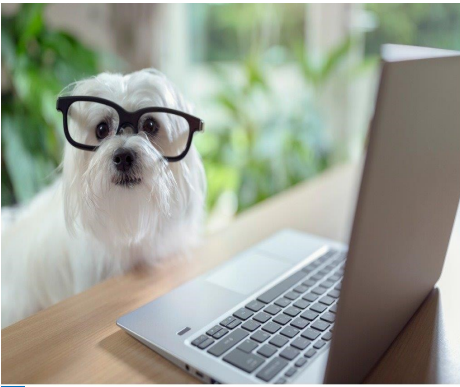
An animal cannot be queried. It is not always clear on which human should be queried in the PDMP.

- An animal may belong to a family with several family members. Which human record should be queried when a family member brings an animal to the veterinarian?
- An animal can be brought to a veterinary clinic by one family member and to another veterinary clinic by another family member or even by a different owner. Prescriptions for the animal are not always trackable from one clinic to the other since the animal doesn't have a common identifier. This is further complicated if the owner of the animal changes.

Conducting a query on an owner may produce prescription data for a human, but the information is not helpful in protecting the safety of the animal being treated.

- Veterinarians are trained to treat animals and do not know about their patients' owners medical history. If your doctor was asked to examine your dog's drug use records when you went in for a visit, wouldn't you have questions and expect the appropriate care for yourself? Should you be denied appropriate drug treatment based on your dog's prescription history? Likewise should your animal be denied treatment based on the owner's prescription drug history?
- Veterinarians are not trained in human medication dosages much like physicians are not trained in dose ranges for dogs, cats, birds, farm animals etc. Access to human drug prescription information will not change the treatment for an animal. Animal and human drug doses and timing are inherently different.





THE PDMP **HAS NOT PROVEN TO BE EFFECTIVE FOR VETERINARIANS IN THE PROTECTION OF THE PUBLIC, INCREASING THE QUALITY OF CARE OR EFFICIENCY OF MEDICAL CARE, OR DECREASING TAX PAYER COSTS.**

Veterinarians cannot use the PDMP to increase quality of care, confidence when prescribing and dispensing or improve efficiency of medical care.

- The PDMP in Alaska **has not** identified any diversion of veterinary drugs.
- Veterinarians are **not** trained or able to assess risk of harm with opioid prescriptions on a human that are provided for an animal.
- The Board of Pharmacy reported that veterinarians in Alaska from 2015—2018 prescribed .3% to 1% of total Morphine Milligram Equivalents (MMEs). According to the Alaska Board of Veterinary Examiners that received MME data from the Board of Pharmacy: **Calculating dosing for animals in MMEs has not historically been, nor is currently recognized, as the proper method of prescribing in veterinary medicine. Due to the variety of species veterinarians treat on a daily basis, MMEs cannot be used to standardize dosing in veterinary medicine. The Board of Veterinary Examiners has no basis in science or technology to standardize opioid prescription based on MMEs like is used in human medicine.**

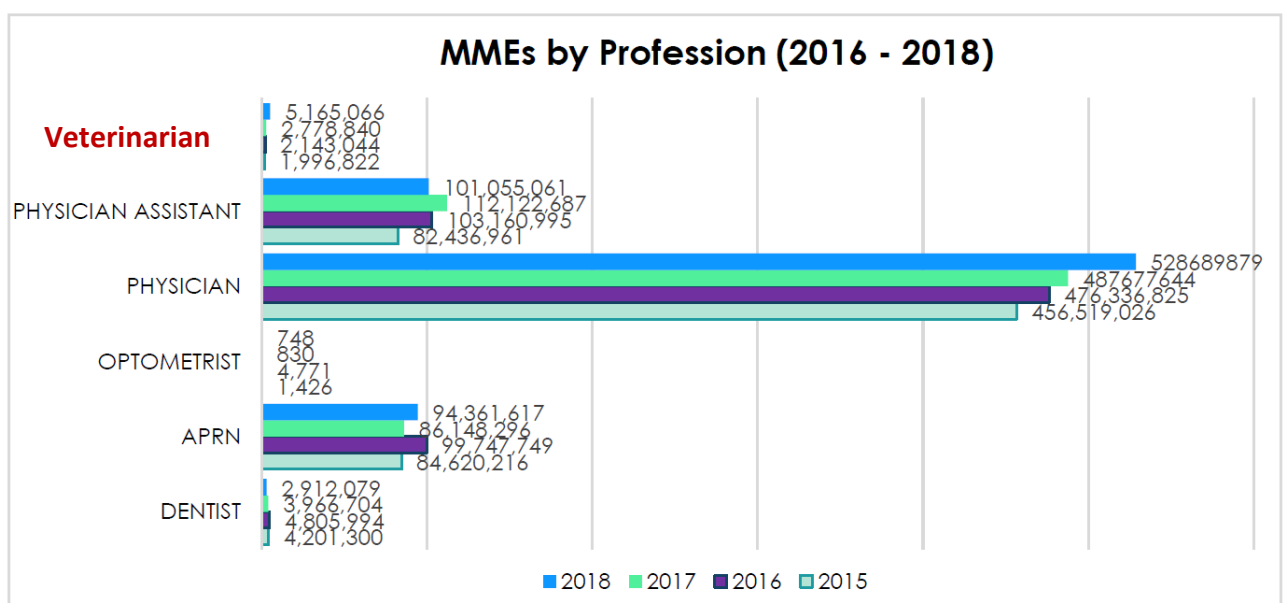


Figure 4. MMEs prescribed by veterinarians in 2016 and 2017 ranged from .3% to 1% of total MMEs by profession. The number of MMEs prescribed was highest in 2018 compared to previous years.



THE DRUGS CONTRIBUTING TO THE OPIOID CRISIS ARE **NOT** THE DRUGS USED MOST OFTEN IN VETERINARY MEDICINE.

National Data

The opioid epidemic initially was driven by increased consumption and availability of pharmaceutical opioids. **An increasing number of opioid overdoses are now related to HEROIN AND ILLICITLY MANUFACTURED FENTANYL (IMF) AND FENTANYL ANALOGS (1).**

Center for Disease Control

The most common drugs involved in prescription opioid over- dose deaths include: Methadone, Oxycodone (such as OxyContin) and Hydrocodone (such as Vicodin).

Prescription opioid overdose often involve benzodiazepines i.e. alprazolam (Xanax), diazepam (Valium), and lorazepam (Ativan). (2)

American Veterinary Medical Association

Some of the most commonly purchased opioids by veterinary clinics (2014-2018 data) are Buprenorphine, Butorphanol, Phenobarbital, Hydromorphone and Tramadol.

- Evidence based research now supports that tramadol which has been commonly used in the treatment of osteoarthritis in dogs does not provide any clinical benefit for dogs with osteoarthritis of the elbow or stifle joint thus decreasing its use in veterinary medicine.

Opioid prescriptions issued by veterinarians (728,223) were only 0.34% of the total opioid prescriptions (214 million) that were dispensed by U.S. retail pharmacies in 2017 (3).

Alaska Data

In 2019, 133 drug overdose deaths occurred in Alaska. Of those:

88 (66%) involved narcotics

26 (20%) involved sedatives (69% involved benzodiazepines)

74 (56%) involved psychotropics (80% involved Methamphetamines) as a contributing cause of death.

Note: These percentages do not add up to 100% since drug overdoses often involve more than one type of drug; therefore, deaths may be included in multiple categories.

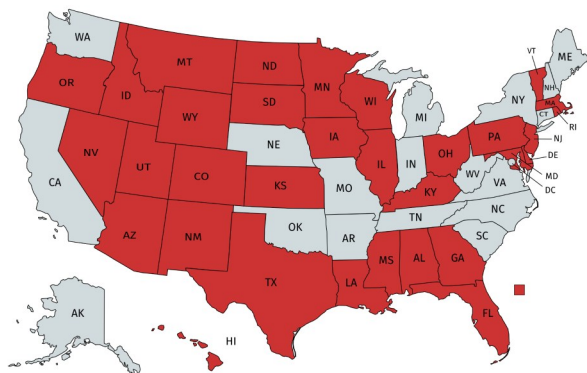
1. Lyden J, Binswanger I A.Semin Perinatol. 2019 Apr;43(3):123-131. doi: 10.1053/j.semperi.2019.01.001. Epub 2019 Jan 14.PMID: 30711195 National Institutes of Health; National Library of Medicine
2. Centers of Disease Control and Prevention Lyden J, Binswanger I A.Semin Perinatol. 2019 Apr;43(3):123-131. doi: 10.1053/j.semperi.2019.01.001. Epub 2019 Jan 14.PMID: 30711195 National Institutes of Health; National Library of Medicine
3. American Veterinary Medical Association - Opioids in Animal Health, Mar. 2019
4. Health Analytics and Vital Records; Division of Public Health, Dept. of Health and Social Services 2019 Drug Overdose Mortality Report



ADDITIONAL REASONS FOR **EXEMPTING** **VETERINARIANS** FROM THE PDMP

Many Other States Exempt Veterinarians from the PDMP— Acknowledging the Differences in Care Between Animals and Humans.

■ **32 states exempt veterinarians from participating in the PDMP**



- **9 states formerly mandated veterinary reporting but repealed legislation** due to problems experienced including Alabama, Arizona, Idaho, Illinois, Kansas, Kentucky, Louisiana, New Mexico and Wyoming.
- Kentucky law enforcement indicated that controlled substances dispensed by veterinarians **were not** a significant source of abused or diverted drugs.

Veterinarians Already Adhere to Controlled Substance Regulations

- Veterinarians who prescribe or dispense controlled substances are licensed through Drug Enforcement Agency (DEA). There is already a significant level of accountability, record keeping, and medication storage requirements that veterinarians adhere to.
- Distributors of controlled substances monitor utilization patterns of veterinarians. “Know Your Customer” forms are implemented and data is gathered by distribution companies who are required by the DEA to monitor and report unusual purchase patterns a veterinarian may have. Distributors are required to flag purchases that fall outside of norms for either previous purchase history or the norms for practices of similar size/type. DEA oversight is to control/prevent diversion from licensed professionals to drug dealers and users.

Viewing of Animal Owner’s Private Medical & Confidential Records

- Searching the PDMP database for the animal owner’s drug prescription information could expose personal medical information about the owner. Veterinarians are not trained in the privacy practices surrounding human medical information.

PDMP Adds Unnecessary Business Costs

- PDMP review and reporting constitutes a disproportionate impact on veterinarians as small business owners. Veterinary clinics lack the standardized software used in human health care facilities, so reporting is more labor-intensive which will add to the cost of providing veterinary care.



ADDITIONAL REASONS FOR **EXEMPTING** **VETERINARIANS** FROM THE PDMP

Costly and Onerous Requirements for Monitoring Veterinarians Has Been Placed on the Board of Veterinary Medical Examiners (BOVE).

- The purpose of the PDMP has morphed into a cumbersome monitoring mechanism and the Board of Pharmacy is requiring licensing boards to monitor their licensees for compliance, review drug utilization patterns and to potentially take disciplinary action against a licensee for noncompliance in correctly utilizing the PDMP.
- BOVE has reported that the PDMP is an unusable database and the cost to investigate veterinarians who fail to use it correctly is a waste of limited resources.

<https://www.commerce.alaska.gov/web/portals/5/pub/HB184LettertotheGovernor.pdf>

The PDMP System is Designed for Human Use, Not For Animals.

- Veterinarians have found the PDMP system to be impractical, there has not been training in using the PDMP, and the current PDMP system was designed for reporting drugs sought through human medical channels. BOVE conducted a survey in 2020 amongst licensed veterinarians in Alaska to gain perspective of their use of the PDMP. https://www.commerce.alaska.gov/web/portals/5/pub/PDMP_HB184_ExemptionSurvey.pdf

85% of veterinarians have experienced difficulty utilizing the PDMP.

73% of veterinarians feel their clients have suffered as a result of the PDMP.

57% of veterinarians agree that the PDMP has placed significant financial burden onto their practice.

95% of veterinarians are in support of an exemption from the PDMP.

The State's Costs for Conducting PDMP Investigations Will Lead to Substantial Increases in the Cost of Veterinary Licenses in Alaska.

- The Board of Veterinary Examiners' budget is supported solely from licensing fees; and those fees are already some of the highest in the nation. BOVE did not receive any appropriations from the legislature to investigate veterinarians regarding potential PDMP violations. The costs incurred by BOVE for the oversight of veterinarians and the PDMP will be passed onto licensees.
- Charging veterinarians for the cost of enforcement of an unusable PDMP system, and regulations with which they are unable to comply, is not responsible stewardship of resources.



AKVMA URGES A **YES vote on HB 91**

An Exemption of Veterinarians from participating in the PDMP:

- ✓ **Will allow** veterinarians to provide the appropriate, timely, medical management appropriate for each patient.
- ✓ **Will not diminish** the judicious use of controlled substances that is already practiced by veterinarians.
- ✓ **Will increase the efficiency** of the PDMP system for its intended purpose, by allowing for accurate interpretation of data and trends in human medicine.
- ✓ **Will eliminate** unnecessary and disproportionate business burdens for veterinarians.

AKVMA SUPPORTS the following objectives and efforts to address the national opioid epidemic:

- **Continuing education (CE)** on judicious use, compliance, security, and prescribing of opioids and other controlled substances, with an emphasis on identifying and preventing human misuse and diversion.
- **Options for reporting** of suspected opioid and controlled substance drug shoppers and/or diversion, with immunity from prosecution for the reporter.
- **Exemption of veterinarians** from mandatory electronic prescribing for controlled substances due to the lack of veterinary electronic medical record compatibility with electronic prescription programs. Remediation of this problem would require funding, resulting in an increased financial burden to taxpayers and clients.
- **Research** to determine the prevalence of veterinary drug shoppers and to clarify the degree to which veterinary prescriptions impact the human opioid epidemic.