KAOM Spring CME April 14, 2023

K-TRACS, Prescribing & You



Learning Objectives

- Discuss recommendations and best practices for using K-TRACS
- Analyze the patient report to understand how to use patient information in clinical decision-making
- Identify patient safety and care coordination recommendations
- Explain K-TRACS Advisory Committee's role and case review criteria



Program Goals

Prioritize Patient Safety

Promote Community Health

Prevent Prescription Drug Misuse, Abuse & Diversion

Preserve Legitimate Access to Controlled Substances



About K-TRACS



- Mandatory Reporting
 - K.S.A. 65-1683 requires pharmacies to report outpatient dispensations to K-TRACS

 Prescribers do NOT report unless they are directly dispensing



What's Reported?

- Controlled Substances, Schedules II-IV
- Drugs of concern:
 - Butalbital, acetaminophen, caffeine
 - Promethazine with codeine
 - Gabapentin
 - Ephedrine/pseudoephedrine not reported to NPLEX



What's Not Reported?

- Administrations of drugs (inpatient, methadone, etc.)
- Schedule V, non-controlleds except for gabapentin
- Naloxone
- Interim supply of 48 hours or less from hospital/ED



Who's Using K-TRACS?

- Voluntary Use of K-TRACS
 - State law has no requirements for any healthcare provider to use K-TRACS

Medicaid Mandate

Medicaid providers must check K-TRACS before prescribing controlled substances to Medicaid enrollees (as of 10/1/21)



Best Practices for Using K-TRACS

- Before prescribing a controlled substance to a new patient or as a new therapy to an existing patient
 - CDC: Ideally, PDMP should be reviewed before every opioid prescription for acute, subacute or chronic pain
 - During long-term opioid therapy, PDMP data should be reviewed before an initial opioid prescription and then every 3 months or more frequently



Best Practices for Using K-TRACS

 CDC: Clinicians should review PDMP data specifically for prescription opioids and other controlled medications patients have received from additional prescribers to determine whether a patient is receiving high total opioid dosages or combinations that put the patient at high risk for overdose



Best Practices for Using K-TRACS

 CDC: Clinicians should use specific PDMP information about medications prescribed to their patient in the context of other clinical information, including their patient's history, physical findings and other relevant testing, in order to help them communicate and protect their patient



Factors to Consider

- Concurrent medical conditions:
 - Sleep Apnea
 - Renal or hepatic insufficiency
 - Mental Health conditions
 - Substance use disorders
 - Benzodiazepines
 - Other sedating medications: gabapentin, muscle relaxers, antidepressants



Case Study

Risk Indicators

NARXCARE SCORES

Narcotic Sedative Stimulant 601 350 000

OVERDOSE RISK SCORE

710 (Range 000-999)

STATE CLINICAL ALERTS (2)

>= 7 Prescribers & >= 6 Dispensers in 90 Days

Below Opioid & Benzodiazepine Threshold

Summary

Summary		Narcotics* (excluding bu	prenorphine)	Sedatives		Buprenorphine	
Total Prescriptions:	30	Current Qty:	54	Current Qty:	0	Current Qty:	0
Total Prescribers:	11	Current MME/day:	68.18	Current mg/day:	0.00	Current mg/day:	0.00
Total Pharmacies:	8	30 Day Avg MME/day:	68.18	30 Day Avg mg/day:	0.00	30 Day Avg mg/day:	0.00

Prescriptions

Fill Date	ID	Written	Sold	Drug	Qty	Days	Prescriber	Rx#	Pharmacy	Refill	Daily Dose *	Pymt Type	PMP
02/25/2021	2	02/25/2021	02/25/2021	Hydrocodone-Acetamin 7.5-325	200.00	22	Cr	213	ABC	0	68.18 MME	Comm Ins	KS
02/03/2021	2	02/03/2021	02/03/2021	Hydrocodone-Acetamin 7.5-325	200.00	22	Cr	29	ABC	0	68.18 MME	Comm Ins	KS
01/28/2021	6	01/28/2021	01/28/2021	Oxycodone Hcl 5 Mg Tablet	40.00	7	Mx	073	KAN	0	42.86 MME	Private Pay	KS
01/26/2021	3	01/26/2021	01/26/2021	Hydromorphone 2 Mg Tablet	24.00	2	Ay	462	ICT	0	96.00 MME	Comm Ins	KS
01/16/2021	3	01/16/2021	01/16/2021	Oxycodone Hcl 5 Mg Tablet	90.00	4	Jt	980	MCI	0	168.75 MME	Comm Ins	KS
01/16/2021	3	01/16/2021	01/16/2021	Tramadol Hcl 50 Mg Tablet	90.00	15	Jt	989	MCI	0	30.00 MME	Comm Ins	KS
01/06/2021	3	01/06/2021	01/06/2021	Oxycodone Hcl 5 Mg Tablet	174.00	12	Ut	960	MCI	0	108.75 MME	Comm Ins	KS
12/29/2020	3	12/29/2020	12/29/2020	Oxycodone-Acetaminophen 10-325	40.00	7	Ce	103	SAL	0	85.71 MME	Comm Ins	KS
12/17/2020	2	12/16/2020	12/17/2020	Hydrocodone-Acetamin 7.5-325	200.00	23	Cr	213	ABC	0	65.22 MME	Comm Ins	KS
12/14/2020	5	12/13/2020	12/14/2020	Oxycodon-Acetaminophen 7.5-325	12.00	3	DI	201	SAL	0	45.00 MME	Private Pay	KS
11/23/2020	2	11/23/2020	11/23/2020	Hydrocodone-Acetamin 7.5-325	200.00	22	Cr	217	ABC	0	68.18 MME	Comm Ins	KS
11/11/2020	5	11/11/2020	11/11/2020	Tramadol Hcl 50 Mg Tablet	60.00	15	Cr	455	SAL	0	20.00 MME	Private Pay	KS
10/29/2020	1	10/29/2020	10/29/2020	Hydrocodone-Acetamin 7.5-325	200.00	23	Cr	214	ABC	0	65.22 MME	Comm Ins	KS
10/01/2020	1	10/01/2020	10/01/2020	Hydrocodone-Acetamin 7.5-325	200.00	22	Cr	215	ABC	0	68.18 MME	Comm Ins	KS
09/26/2020	5	09/25/2020	09/26/2020	Morphine Sulfate Ir 15 Mg Tab	6.00	2	Eu	227	SAL	0	45.00 MME	Private Pay	KS
09/11/2020	1	09/11/2020	09/11/2020	Hydrocodone-Acetamin 7.5-325	120.00	20	Cr	213	ABC	0	45.00 MME	Comm Ins	KS



When to Check K-TRACS

- On admission to a facility (hospital, LTC, treatment facility)
 - Verify current controlled medications how recent is the medication list?
 - Formulation of medication
- On discharge from facility
 - Has medication changed from admission?
 - Does the patient have a supply at home or LTC facility?
 - Potential drug interactions



When to Check K-TRACS

- Emergency department or urgent care
 - Patients presenting with overdose symptoms
- Primary care
 - Verify adherence to controlled substance contracts
 - Compare results of UDS



Appropriate Use of K-TRACS

Discuss K-TRACS reports with patients

Only use for medical or pharmaceutical care of a patient

Use K-TRACS as one of many tools to make clinical decisions

Don't search
yourself, potential
employees, family members
not under your care

Don't exclude or terminate a patient solely based on a K-TRACS report



Appropriate Use of K-TRACS

• Program data shall not be stored outside of the program database









 K-TRACS information is privileged and confidential and is not subject to discovery in civil proceedings



Identify Early Refills

Filled v	Written \$	Sold \$	ID \$	Drug \$	QTY \$	Days \$
09/20/2022	07/11/2022	09/20/2022	1	Tramadol Hcl 50 Mg Tablet	240.00	30
08/16/2022	07/11/2022	08/16/2022	1	Tramadol Hcl 50 Mg Tablet	240.00	30
08/15/2022	08/12/2022	08/15/2022	1	Vyvanse 50 Mg Capsule	30.00	30
07/16/2022	07/11/2022	07/16/2022	1	Tramadol Hcl 50 Mg Tablet	240.00	30
07/15/2022	07/13/2022	07/15/2022	1	Vyvanse 50 Mg Capsule	30.00	30

Early Refill = Sold Date + Days' Supply



Identify Overlapping Prescriptions

Filled *	Written \$	Sold #	ID \$	Drug \$	QTY \$	Days \$
09/20/2022	07/11/2022	09/20/2022	1	Tramadol Hcl 50 Mg Tablet	240.00	30
08/16/2022	07/11/2022	08/16/2022	1	Tramadol Hcl 50 Mg Tablet	240.00	30
08/15/2022	08/12/2022	08/15/2022	1	Vyvanse 50 Mg Capsule	30.00	30
07/16/2022	07/11/2022	07/16/2022	1	Tramador Hcl 50 Mg Tablet	240.00	30
07/15/2022	07/13/2022	07/15/2022	1	Vyvanse 50 Mg Capsule	30.00	30

Same or Different Drug Types with Overlapping Sold Dates & Days Supply

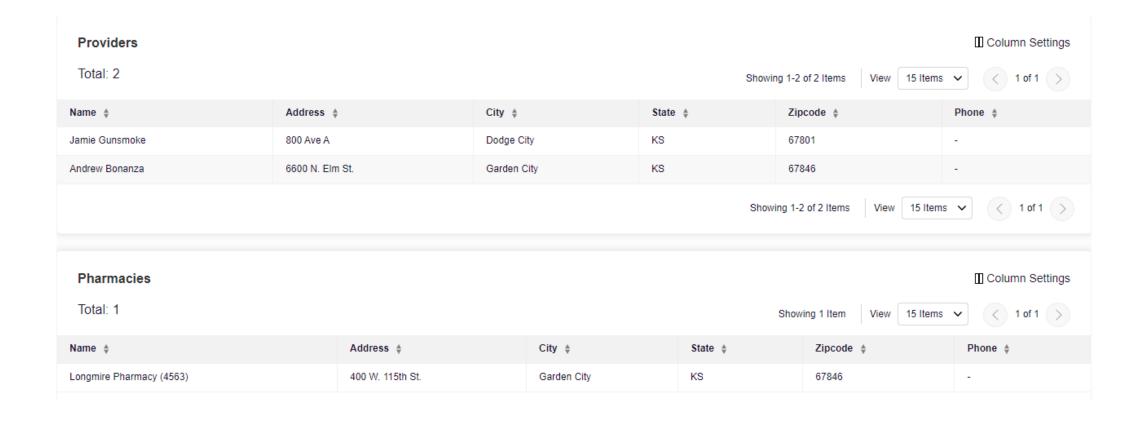


Identify High Doses & Providers

Prescriber \$	RX # \$	Dispenser \$	Refill \$	Daily Dose* \$	Pymt Type \$	PMP ≑
An Borr	142589	Lon (4563)	0	180:00 WIVIE	Medicare	KS
An Bon	142589	Lon (4563)	0	120.00 MME	Medicare	KS
An Bon	142589	Lon (4563)	2	2.01 LME	Medicare	KS
An Bon	142589	Lon (4563)	3	0.80 LME	Other	KS
Ja Gun	142589	Lon (4563)	0	6.00 LME	Medicare	KS



Care Coordination



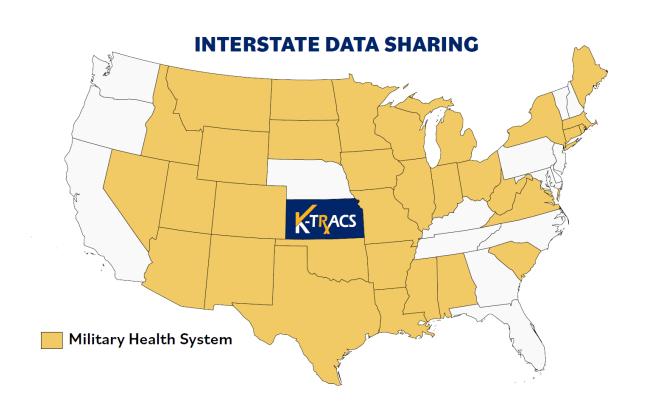


Interstate Data Sharing

Prescriber \$	RX # \$	Dispenser #	Refill \$	Daily Dose* \$	Pymt Type \$	PMP \$
An Bon	142589	Lon (4563)	0	180.00 MME	Medicare	KS
An Bon	142589	Lon (4563)	0	120.00 MME	Medicare	KS
An Bon	142589	Lon (4563)	2	2.01 LME	Medicare	KS
An Bon	142589	Lon (4563)	3	0.80 LME	Other	KS
Ja Gun	142589	Lon (4563)	0	6.00 LME	Medicare	KS



Interstate Data Sharing

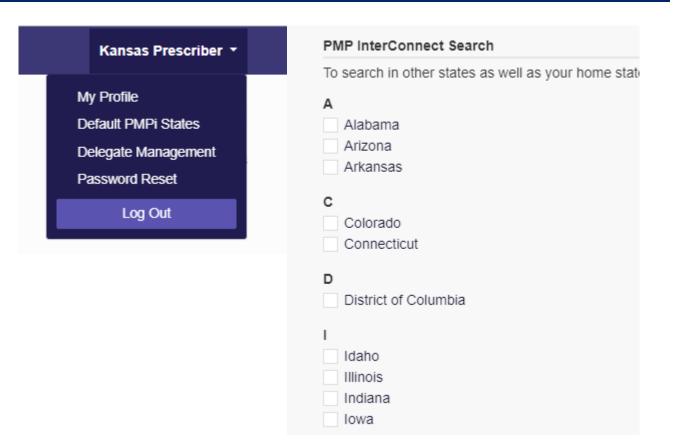


Missouri Statewide PDMP is coming soon but the state's ability to share data with other PDMPs is in question



Interstate Data Sharing

- Use caution when including other states in your searches to avoid "false positives"
- Consider likelihood of your patient receiving Rx from other states





How to Improve Patient Safety

- Discuss K-TRACS report with the patient
- Confirm the patient is aware of any additional prescriptions listed on their PDMP report
- Discuss safety concerns such as risk for respiratory depression and overdose
 with patients receiving overlapping opioids from multiple prescribers or patients
 with increased risk due to high-risk combinations
 - Is Naloxone appropriate?



How to Improve Patient Safety

- Use caution when prescribing opioids and benzodiazepines concurrently
- Consider total MME/day for concurrent opioid prescriptions to help assess patient's overdose risk
- Care Coordination: Discuss safety concerns with other prescribers involved in the patient's care



Educate Patients

http://ktracs.ks.gov/ using-k-tracs/provider-toolkit



DISPENSING NALOXONE

Consider talking to your patient about naloxone if the following conditions are present:

√ HIGH-DOSE OPIOIDS When filling an opioid prescription, individually, or in aggregate with, other medications, greater than or equal to 50 MMEs/day.

✓ HISTORY OF OUD OR OVERDOSE

When dispensing any dose of an opioid to a patient with a prior history of opioid use disorder (OUD) or overdose.

✓ PRESENCE OF BENZOS When dispensing any dose of opioid when a benzodiazepine has been prescribed in the past 30 days or will be dispensed at the same time.

✓ UNDERLYING CONDITIONS When underlying health conditions can complicate the efficacy of opioids.



WE USE K-TRACS TO KEEP OUR PATIENTS SAFE.

Together, we can prevent the inappropriate use of prescription drugs and keep our community healthy.



Learn more at ktracs.ks.gov/consu

Posting this sign meets requirements of KAR 68-2

SAFETY WITH OPIOIDS

IS IT AN OPIOID?

Even when prescribed by your doctor, oploids (prescription pain relievers) can pose a risk to your health, including addiction and overdose.

These include aspirin, ibuprofen, naproxen and safe for most patients.

PRESCRIPTION OPIOID PAIN RELIEVERS

- Percocet (oxycodone/acetaminophen)
- Vicodin and Lortab (hydrocodone/acetaminophen)
- OxyContin (Oxycodone)
- Demerol (meperidine) Tramadol

PRESCRIPTION DRUG SAFETY

STIMULANTS:

Prescription stimulants are used to treat ADHD

and can improve symptoms such as inattention

impulsivity and hyperactivity. They speed up

mental and physical processes that create increased focus, alertness and energy

WHAT THEY DO

- Xanax (alprazolam)
- Klonopin (clonazepam)
- Valium (diazepam)
- Librium (chlordiazepox

DANGEROUS DRUG

TIP: Always disclose all modications you are taking with each of your healthcare providers to ensure your safety.

CONSIDER NALOXONE

Naloxone is an opioid overdose reversal medication. You should consider Naioxone is an opioid overdose reversal medication. Tou should consic asking your health-care provider or pharmacist about carrying it with asking your nearthcare provider or pnarmacist about carrying it with you and training a loved one how to use it if you are on long-term opioid.

Naloxone can reverse the effects of an opioid overdose and increase the chances of survival.





WHAT THEY DON'T DO

- Using prescription stimulants DOES NOT: ► Make you smarter
- ► Improve your grades or GPA
- ▶ Make you popular because "everyone is doing it" (HINT: They're not!)

Learn more at ktracs.ks.gov/consumers



What Can Go Wrong When Searching Patients

Multiple patients found

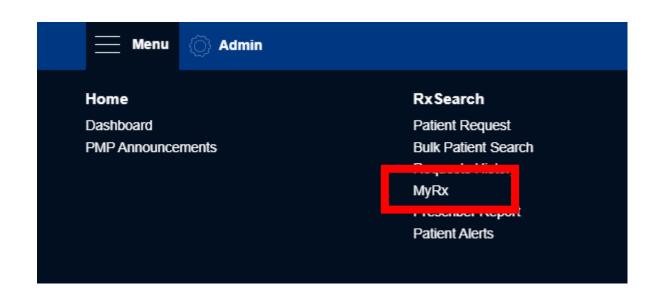
Twins

No results found

Missing scripts



K-TRACS Features: MyRx



My Rx			
Prescriptions Written			
From*	To*		
MM/DD/YYYY	₩M/DD/YYYY	m	
DEA Numbers			
✓ AB1111119			
Generic Drug Name (O	ptional)		
Drug Name			



K-TRACS Delegates

- RN, LPN, RRT, EMT, etc. must have oversight by Kansas regulatory board
- Facilitate the patient search
- Verify controlled substance contracts or medication reconciliation
- No clinical decision-making authority is transferred



K-TRACS Features: Patient Roster

RECENT REQUESTS View Requests Histor							
Patient Name	DOB	Status	Request Date	Delegate			
kendall montgomery	02/02/1964	Complete	10/13/2022 2:53 PM				
chris wallace	01/18/1970	Complete	10/13/2022 2:47 PM				
riley crawford	01/10/1959	Complete	10/13/2022 2:37 PM				
katie nicholas	04/13/1987	Complete	10/07/2022 8:49 AM	Prescriber Delegate			
carla jones	05/05/1949	Complete	10/07/2022 8:48 AM	Prescriber Delegate			



What is K-TRACS Integration?



Integrates with most electronic medical records (EMR/EHR) systems



Streamlines clinical workflows & reduces workflow interruptions

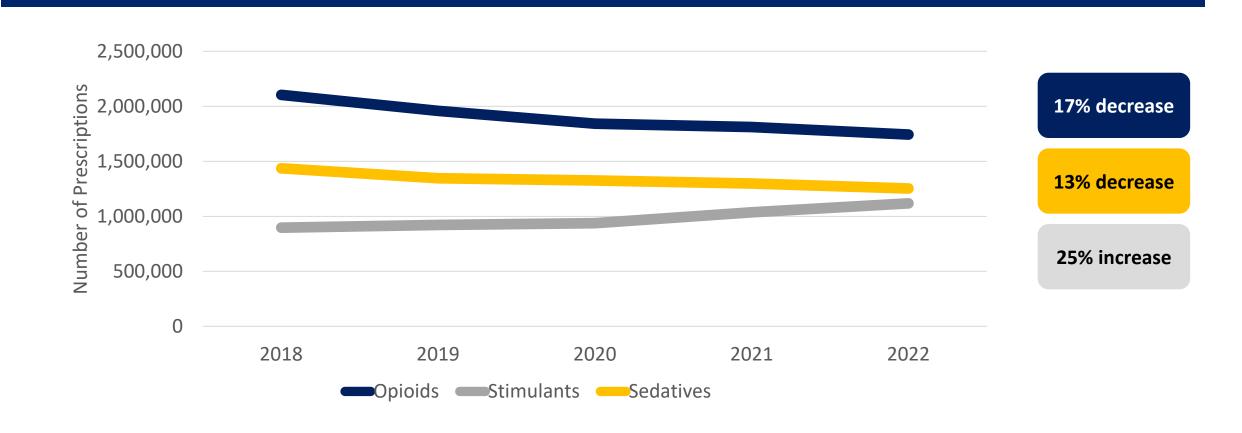


Saves an average of 4 minutes per patient search¹

Poon SJ, Greenwood-Ericksen MB, Gish RE, Neri PM, Takhar SS, Weiner SG, Schuur JD, Landman AB. Usability of the Massachusetts prescription drug monitoring program in the emergency department: a mixed-methods study. Acad Emerg Med 2016;23:406-14.

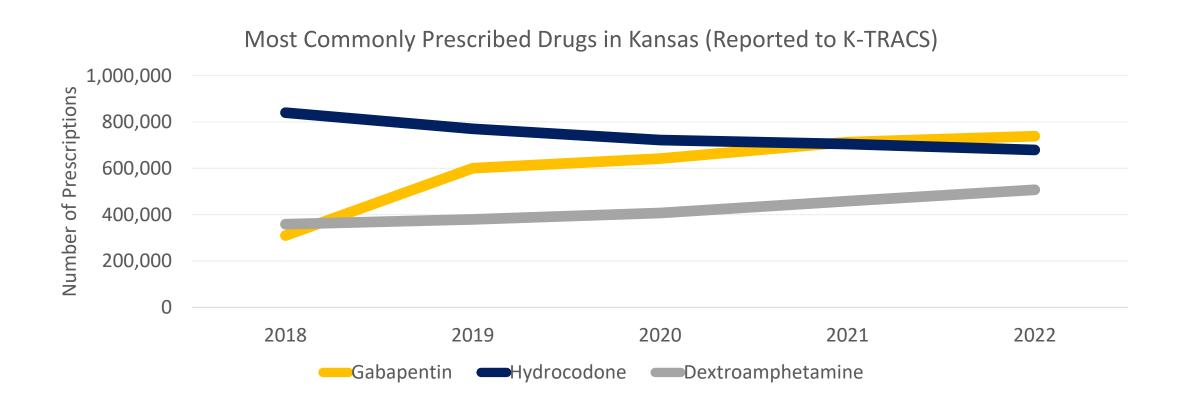


Controlled Substance Prescribing Trends





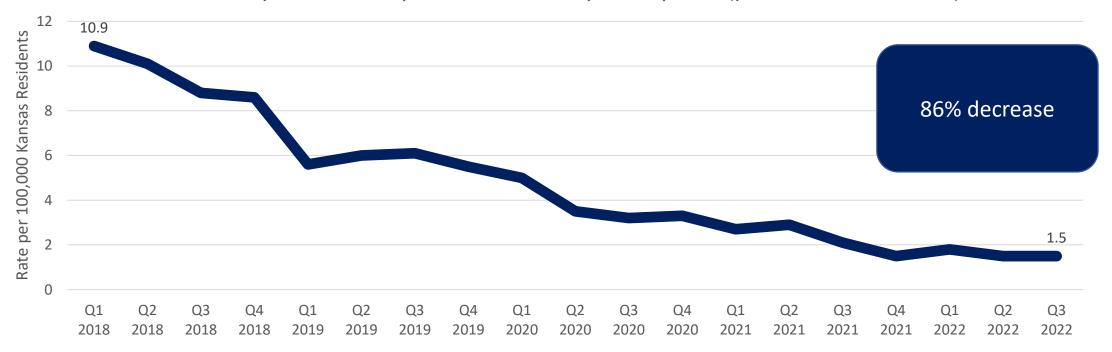
Drug Type Prescribing Trends





"Doctor Shopping" Prevalence

Rate of Multiple Provider Episodes for Prescription Opioids (per 100,000 residents)





K-TRACS Advisory Committee

 K-TRACS Advisory Committee is the <u>only body</u> authorized to review and analyze K-TRACS data for the purposes of identifying patterns and activity of concern

 Comprised of 7 prescribers, 6 pharmacies and 1 law enforcement representative



K-TRACS Advisory Committee

- Person of Concern
 - Can notify prescribers/dispensers of patient activity
 - Can be referred to law enforcement
 - Can be referred for treatment evaluation to KDADS

- Prescriber/Dispenser of Concern
 - Can request additional information related to activity of concern from prescriber/dispenser
 - Can be referred to regulatory board
 - Can be referred to law enforcement



K-TRACS Advisory Committee

- On majority vote of advisory committee, K-TRACS can send a certified letter to prescribers regarding patient or prescriber activity requesting a response within 60 days
 - If prescriber is a mid-level provider, supervising/collaborating physician may also receive letter with same expectation
- If no response, prescriber may be referred to regulatory board



How to Respond to K-TRACS Letter

- Respond to the "Take Action" section of the letter:
 - How you plan to address the prescribing issue identified in the letter
 - Whether there are other mitigating concerns regarding the patient or the prescriber's practice setting
 - Information relevant to the case that should be shared with the Advisory Committee
 - Discuss how you plan to implement the "Committee Recommendations" outlined in the letter



Why We May Ask for Information

Written Date	Fill Date	Drug Type	Quantity	Days Supply	MME
4/19/22	4/20/22	Fentanyl 100 mcg/hr patch	15	30	360
4/19/22	4/20/22	Oxycodone-acetaminophen 10-325	240	30	120
4/19/22	4/20/22	Hydrocodone-acetaminophen 10-325	30	30	10
4/19/22	4/20/22	Fentanyl 25 mcg/hr patch	15	30	90
3/21/22	3/24/22	Oxycodone-acetaminophen 10-325	240	30	120
3/21/22	3/22/22	Hydrocodone-acetaminophen 10-325	30	30	10
3/21/22	3/22/22	Fentanyl 25 mcg/hr patch	15	30	90
3/21/22	3/22/22	Fentanyl 100 mcg/hr patch	15	30	120



Why We Ask For Information

Written Date	Fill Date	Drug Type	Quantity	Days Supply
9/29/21	3/21/22	Alprazolam 1mg tablet	60	30
9/28/21	3/21/22	Clonazepam 1mg ODT	120	30
9/28/21	3/21/22	Zolpidem Tartrate 10mg tablet	30	30
3/9/22	3/9/22	Dextroamphetamine-amphetamine 20mg tablet	90	30
9/29/21	2/15/22	Alprazolam 1mg tablet	60	30
9/28/21	2/15/22	Clonazepam 1mg ODT	120	30
9/28/21	2/15/22	Zolpidem Tartrate 10mg tablet	30	30
9/29/21	1/12/22	Alprazolam 1mg tablet	60	30
9/28/21	1/12/22	Clonazepam 1mg ODT	120	30
9/28/21	1/5/22	Zolpidem Tartrate 10mg tablet	30	30



Why We May Ask for Information

Written Date	Fill Date	Drug Type	Quantity	Days Supply	MME
2/6/22	6/26/22	Alprazolam 1mg tablet	120	30	
4/29/22	6/26/22	Oxycodone HCL (IR) 20mg tablet	270	30	270
4/29/22	6/26/22	Morphine sulfate ER 60mg tablet	90	30	180
7/25/22	7/25/22	Oxycodone HCL (IR) 20mg tab	270	30	270
7/25/22	7/25/22	Morphine sulfate ER 60mg tablet	90	30	180
4/29/22	7/26/22	Alprazolam 1mg tablet	120	30	
4/29/22	8/24/22	Alprazolam 1mg tablet	120	30	
7/25/22	8/24/22	Morphine sulfate ER 60mg tablet	90	30	180
7/25/22	8/25/22	Oxycodone HCL (IR) 20mg tablet	270	30	270



Why We Ask For Information

Written Date	Fill Date	Drug Type	Quantity	Days Supply
7/29/22	7/29/22	Dextroamphetamine-Amphetamine 20mg tablet	60	30
7/1/22	8/7/22	Gabapentin 400mg capsule	90	30
6/12/22	8/10/22	Modafinil 200mg tablet	30	30
8/23/22	8/23/22	Tramadol HCL 50mg tablet	120	30
7/20/22	8/24/22	Gabapentin 400mg capsule	360	90
7/29/22	8/28/22	Dextroamphetamine-amphetamine 20mg tablet	60	30
8/29/22	8/30/22	Carisoprodol 250mg tablet	30	10
8/29/22	9/15/22	Carisoprodol 250mg tablet	30	10
9/15/22	9/15/22	Modafinil 200mg tablet	30	30
8/23/22	9/22/22	Tramadol HCl 50 mg tablet	120	30
9/27/22	9/28/22	Dextroamphetamine-amphetamine 20mg tablet	60	30
8/29/22	10/9/22	Carisoprodol 250mg tablet	30	10
9/15/22	10/13/22	Modafinil 200mg tablet	30	30
9/27/22	10/28/22	Dextroamphetamine-amphetamine 20mg tablet	60	30



K-TRACS Case Review

Written Date	Fill Date	Drug Type	Quantity	Days Supply	MME
2/21/22	2/21/22	Dexmethylphenidate 10mg tablet	60	30	
2/15/22	2/16/22	Hydromorphone 4mg tablet	150	30	80
2/15/22	2/23/22	Oxycontin ER 80mg tablet	60	30	240
1/31/22	2/1/22	Lorazepam 0.5mg tablet	30	15	
1/17/22	1/18/22	Hydromorphone 4mg tablet	150	30	80
1/17/22	1/26/22	Oxycontin ER 80mg tablet	60	30	240
12/29/21	12/29/21	Dexmethylphenidate 10mg tab	60	30	
12/20/21	12/20/21	Hydromorphone 4mg tablet	150	30	80
12/20/21	12/23/21	Oxycontin ER 80mg tablet	60	30	240



K-TRACS Case Review

Written Date	Fill Date	Drug Type	Quantity	Days Supply	MME
2/4/22	2/15/22	Methadone HCL 10mg tablet	560	31	541.94
2/2/22	2/4/22	Hydromorphone 8mg tablet	240	30	256
1/14/22	1/18/22	Methadone HCL 10mg tablet	560	31	541.94
1/5/22	1/8/22	Hydromorphone 8mg tablet	240	30	256
12/20/21	12/21/21	Methadone HCL 10mg tablet	480	30	480
12/8/21	12/12/21	Hydromorphone 8mg tablet	240	30	256
11/30/21	11/30/21	Methadone HCL 10mg tablet	480	30	480
11/5/21	11/14/21	Hydromorphone 8mg tablet	240	30	256
11/5/21	11/7/21	Methadone HCL 10mg tablet	480	30	480



K-TRACS Case Review

Written Date	Fill Date	Drug Type	Quantity	Days Supply	MME
2/18/22	2/25/22	Lorazepam 2mg tablet	90	30	
2/11/22	2/13/22	Oxycodone HCL (IR) 10mg tablet	150	30	75
1/31/22	2/9/22	Oxycodone HCL (IR) 10mg tablet	26	4	97.5
1/21/22	1/25/22	Oxycodone HCL (IR) 10mg tablet	50	30	25
1/21/22	1/24/22	Lorazepam 2mg tablet	90	30	
1/10/22	2/5/22	Zolpidem Tartrate ER 12.5mg tablet	30	30	
12/29/21	1/10/22	Oxycodone HCL (IR) 10mg tablet	100	16	93.75
12/29/21	12/30/21	Hydrocodone-Acetaminophen 5-325	30	10	15
12/26/21	12/27/21	Lorazepam 2mg tablet	90	30	
12/11/21	1/9/22	Zolpidem Tartrate 10mg tablet	30	30	



When to Contact K-TRACS

- Missing Prescriptions
- Mismatched Patients
- Concerning Patient, Prescriber or Pharmacy
- Training and Technical Assistance
 - Free CME available (designed to meet KSBHA Category III requirements)



Contact K-TRACS

Website: http://ktracs.ks.gov

• Email: pmpadmin@ks.gov

• 785-296-6547

Gayle Donaldson, K-TRACS Assistant Director LaTonyua Rice, PharmD, BCGP, K-TRACS Clinical Pharmacist