

KAMMCO
March 28, 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
- Explore prescribing trends, including increases in stimulant prescribing and polysubstance use



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 is Reported?

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



Who's Using K-TRACS?

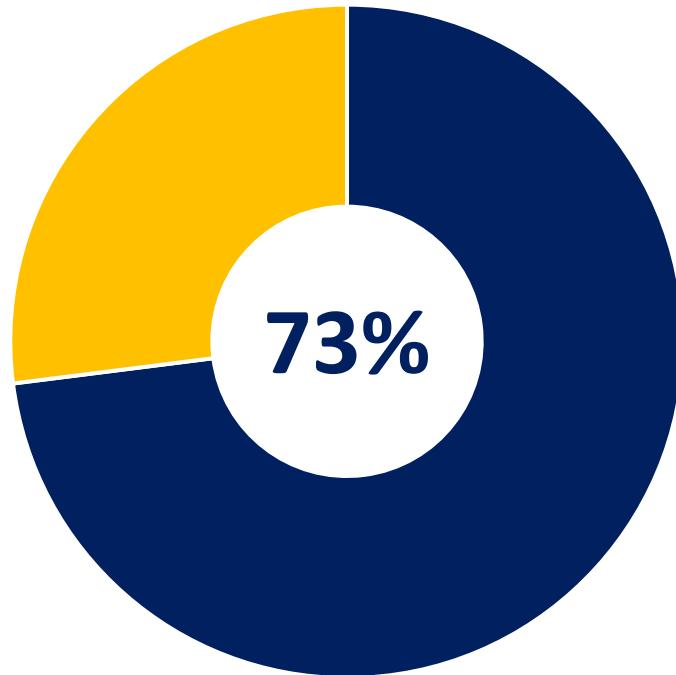
- Voluntary Use of K-TRACS
 - State law has no requirements for any healthcare provider to use K-TRACS

Medicaid Mandate

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



Who's Using K-TRACS?

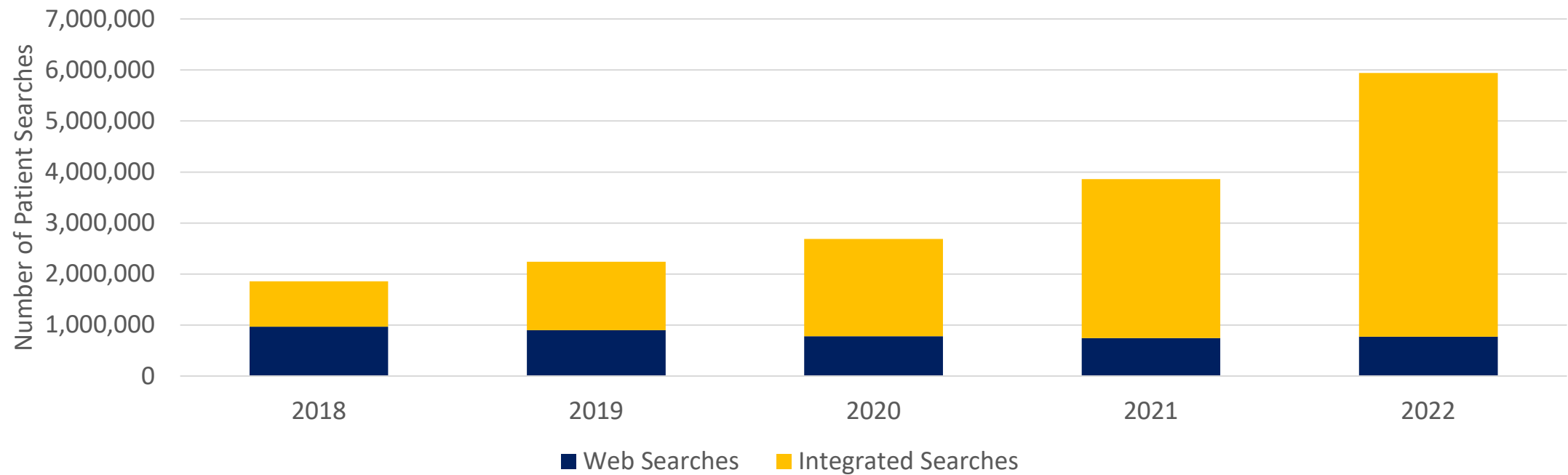


73% of Kansas prescribers who prescribed at least 50 controlled substances in 2022 had an active K-TRACS account



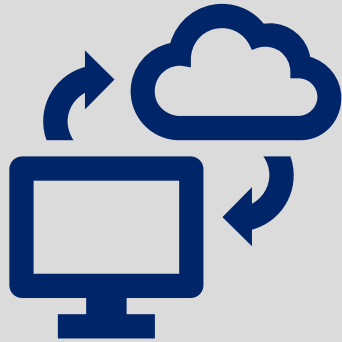
How Are You Using K-TRACS?

Number of Patient Searches by Type

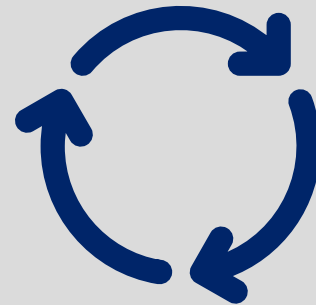




What is K-TRACS Integration?



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



Streamlines clinical workflows & reduces workflow interruptions



Saves an average of 4 minutes per patient search¹



Why Don't Prescribers Use K-TRACS?

- 32% of users surveyed said they experience barriers to K-TRACS use:
 - Interrupts clinical workflow (45%)
 - Not enough time (33%)
 - System is not easy to use (31%)
 - Remembering/resetting login credentials (21%)



How Should You Use K-TRACS?



CENTERS FOR DISEASE
CONTROL AND PREVENTION

SAMHSA

Substance Abuse and Mental Health
Services Administration





CDC Recommendation #9

- 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



CDC Recommendation #9

- 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



CDC Recommendation #9

- 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 buprenorphine)		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

8 Prescribers + 5 Pharmacies



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





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**



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
- 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/consumers

Posting this sign meets requirements of KAR 68-2

PRESCRIPTION DRUG SAFETY



STIMULANTS: WHAT THEY DO

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 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

SAFETY WITH OPIOIDS

IS IT AN OPIOID?

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

Over-the-counter pain relievers are NOT opioids. These include aspirin, ibuprofen, naproxen and acetaminophen. These medications are generally safe for most patients.

PRESCRIPTION OPIOID PAIN RELIEVERS

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

DAANGEROUS DRUG COMBINATIONS

Combining prescription opioids with benzodiazepines increases your risk for unintentional overdose.

Benzodiazepines are most commonly used to treat anxiety, insomnia and muscle spasms. Both drug types work as depressants — impairing your cognitive function, causing sedation and suppressing your ability to breathe. These effects can cause overdose and death.

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

BENZODIAZEPINES

- Xanax (alprazolam)
- Ativan (lorazepam)
- Klonopin (clonazepam)
- Vallium (diazepam)
- Librium (chlordiazepoxide)
- Clorazepate

CONSIDER NALOXONE

Naloxone is an opioid overdose reversal medication. You should consider asking your healthcare provider or pharmacist about carrying it with you and training a loved one how to use it if you are on long-term opioid therapy.

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



Learn more at ktracs.ks.gov/consumers

KNOW THE RISKS





Identify Early Refills

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	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	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

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



Identify High Doses & Providers

Prescriber	RX #	Dispenser	Refill	Daily Dose*	Pynt 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



Care Coordination

Providers

Column Settings

Total: 2

Showing 1-2 of 2 Items

View

15 Items

1 of 1

Name	Address	City	State	Zipcode	Phone
Jamie Gunsmoke	800 Ave A	Dodge City	KS	67801	-
Andrew Bonanza	6600 N. Elm St.	Garden City	KS	67846	-

Showing 1-2 of 2 Items

View

15 Items

1 of 1

Pharmacies

Column Settings

Total: 1

Showing 1 Item

View

15 Items

1 of 1

Name	Address	City	State	Zipcode	Phone
Longmire Pharmacy (4563)	400 W. 115th St.	Garden City	KS	67846	-

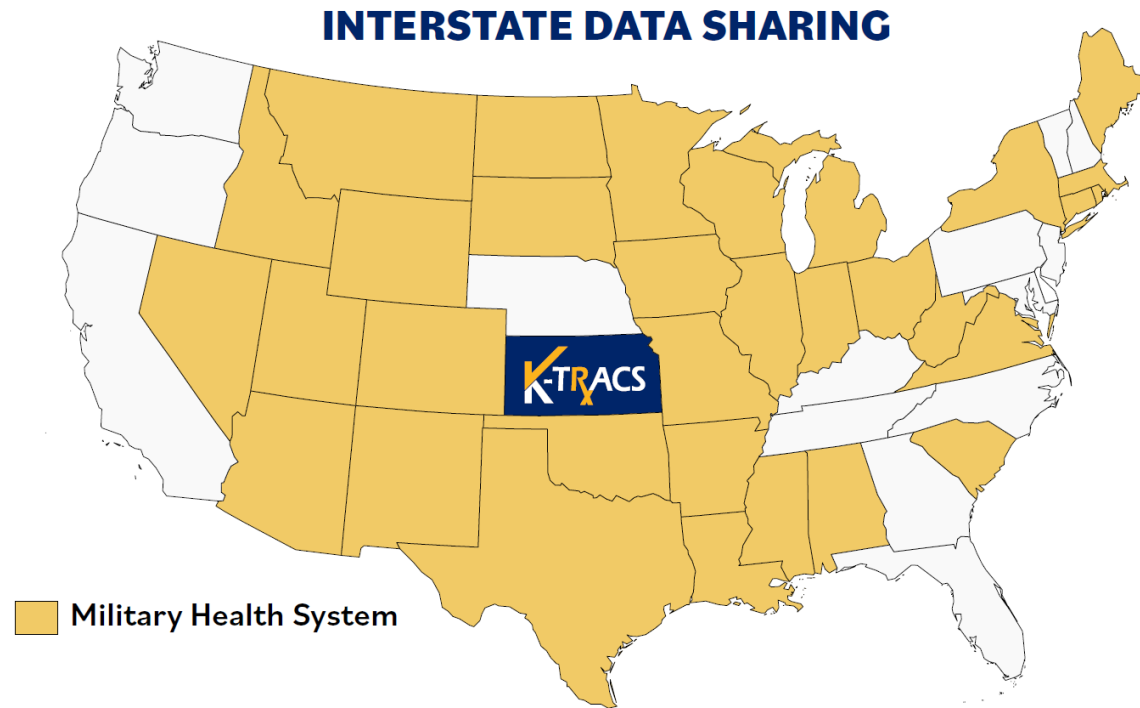


Interstate Data Sharing

Prescriber	RX #	Dispenser	Refill	Daily Dose*	Pynt 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

The screenshot displays the user interface for a Kansas Prescriber. A dropdown menu is open, showing options: My Profile, Default PMPi States, Delegate Management, Password Reset, and a highlighted Log Out button. To the right, the 'PMP InterConnect Search' section is visible, with the instruction 'To search in other states as well as your home state'. Below this, there are checkboxes for states under the following categories:

- A**
 - Alabama
 - Arizona
 - Arkansas
- C**
 - Colorado
 - Connecticut
- D**
 - District of Columbia
- I**
 - Idaho
 - Illinois
 - Indiana
 - Iowa



What Can Go Wrong When Searching Patients

Multiple patients found

Twins

No results found

Missing scripts



K-TRACS Features: MyRx

Menu Admin

- Home
 - Dashboard
 - PMP Announcements
- RxSearch
 - Patient Request
 - Bulk Patient Search
 - Request Mail
 - MyRx**
 - Prescriber Report
 - Patient Alerts

MyRx Request MyRx History

My Rx

Prescriptions Written

From* To*

MM/DD/YYYY MM/DD/YYYY

DEA Numbers

AB1111119

Generic Drug Name (Optional)

Drug Name

Search



K-TRACS Features: Patient Roster

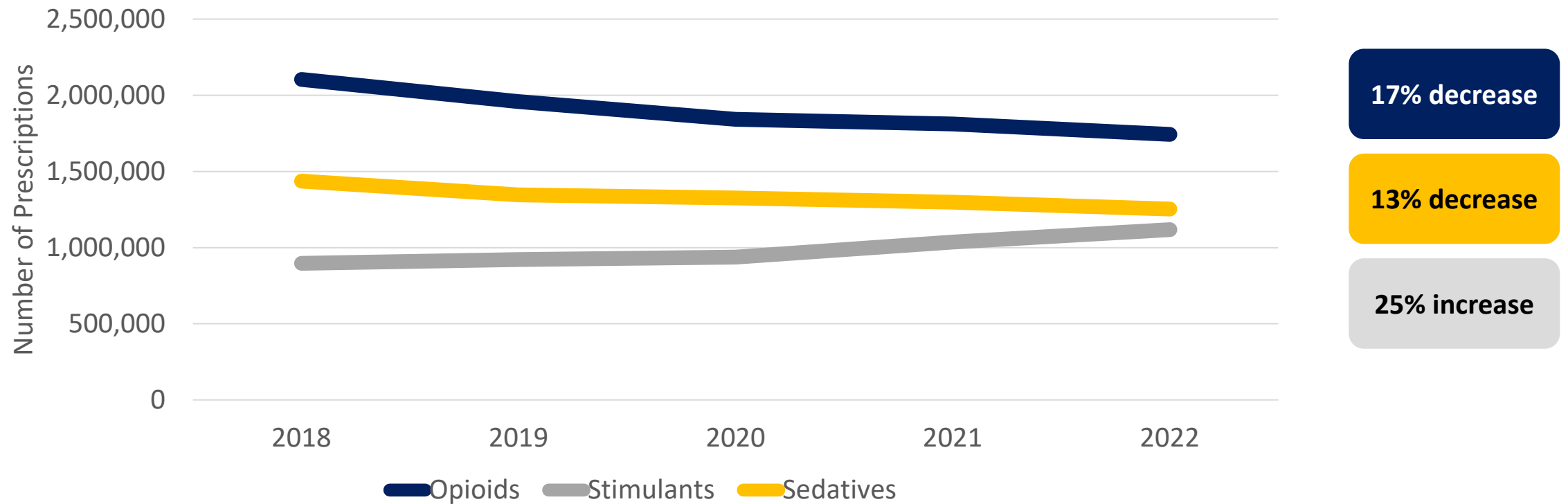
Recent Requests

RECENT REQUESTS [View Requests History](#)

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



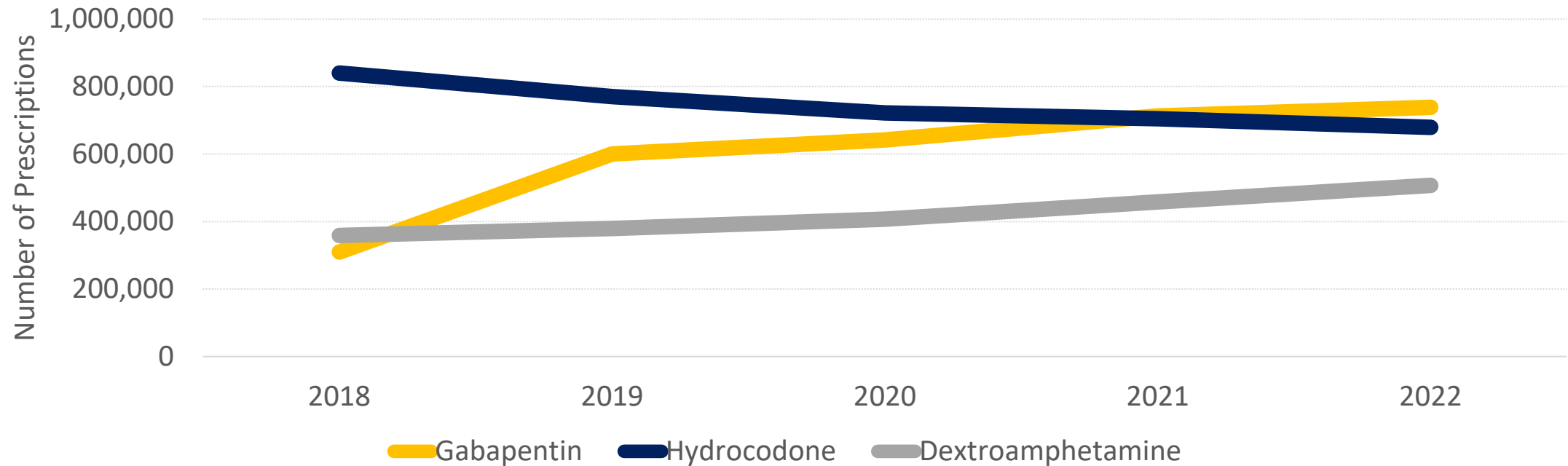
Controlled Substance Prescribing Trends





Drug Type Prescribing Trends

Most Commonly Prescribed Drugs in Kansas (Reported to K-TRACS)





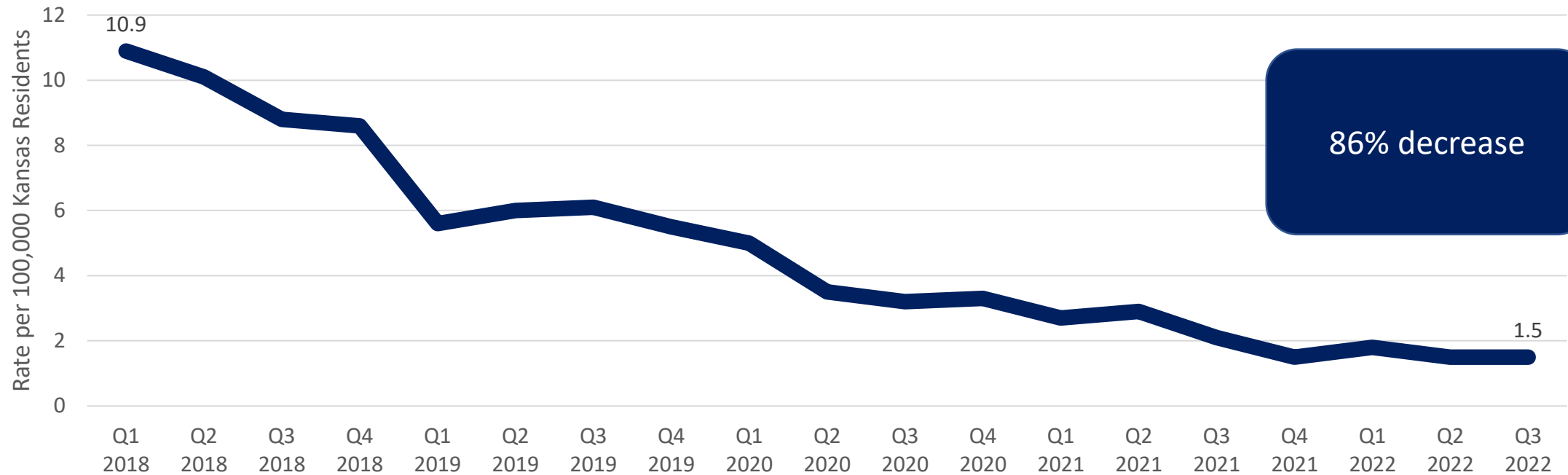
Opioid Prescribing Trends

	Number of Prescriptions	Average Daily MME	Percent of Prescriptions Dispensed at ≥ 90 MME
2018	2,262,807	51	11.2%
2019	2,099,465	44	9.7%
2020	1,960,322	43	9.2%
2021	1,925,375	43	8.9%
2022	1,855,562	41	8.5%
5-year change	18% decrease	20% decrease	24% decrease



“Doctor Shopping” Prevalence

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



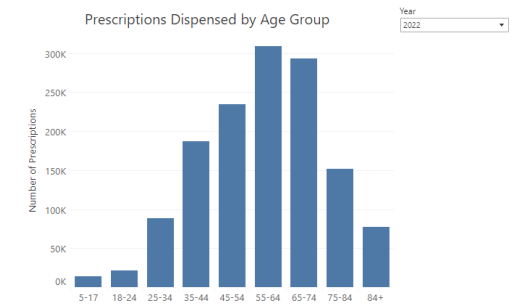
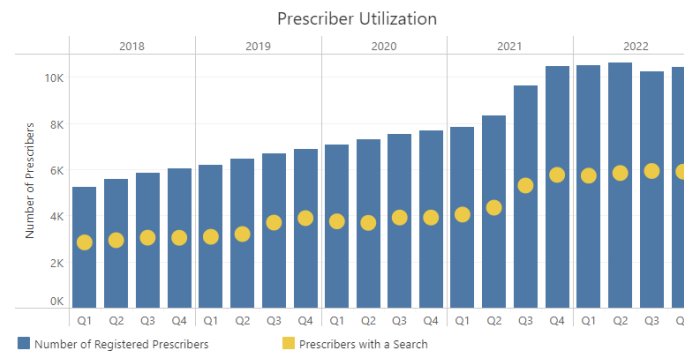
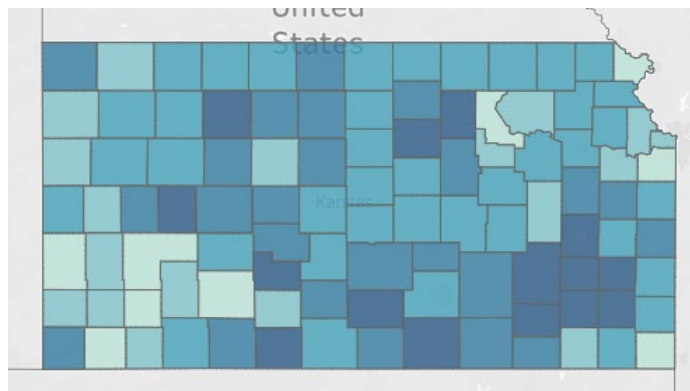


County-Level K-TRACS Data

<http://ktracs.ks.gov/statistics>

Updated annually for counties

Updated quarterly for other metrics





Access to K-TRACS Information

- Aggregate county-level data
- Medical care facility prescribing and utilization data (hospital, clinic, etc.)
 - Opioid stewardship committee, risk management, etc.
- MyRx (Prescriber's own data)



K-TRACS Case Review

- K-TRACS Advisory Committee is 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 Case Review

- 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 Case Review

- 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



Case Study Example

Fill Date	Written Date	Patient	Drug Type	Quantity	Days Supply	Dose
12/31/2021	12/1/2021	Patient 1	Oxycodone HCl (IR) 30mg tab	240	30	360 MME
12/29/2021	12/1/2021	Patient 1	Methylphenidate 20 mg tablet	90	30	
12/2/2021	12/2/2021	Patient 1	Oxycodone HCl (IR) 30 mg tab	240	30	360 MME
12/1/2021	12/1/2021	Patient 1	Methylphenidate 20 mg tablet	90	30	
12/1/2021	12/1/2021	Patient 1	Clonazepam 2mg tablet	90	30	
2/24/2022	12/15/2021	Patient 2	Oxycodone-Acetaminophen 10-325	120	30	60 MME
2/16/2022	12/16/2022	Patient 2	Dextroamp-Amphetamin 20 mg tab	60	30	
2/12/2022	9/8/2021	Patient 2	Morphine Sulf ER 30 mg tablet	60	30	60 MME
2/1/2022	12/15/2021	Patient 2	Diazepam 10mg tablet	90	30	



Case Study Example

Fill Date	Written Date	Patient	Drug Type	Quantity	Days Supply	Dose
10/19/2020	10/12/2020	Patient 3 (H)	Morphine Sulf ER 30mg tablet	90	30	90 MME
10/13/2020	10/12/2020	Patient 3 (H)	Oxycodone HCl 20mg tablet	120	30	120 MME
10/13/2020	10/12/2020	Patient 3 (H)	Oxycodone HCl 30mg tablet	120	30	180 MME
1/30/2022	12/20/2021	Patient 4 (W)	Morphine Sulf ER 30mg tablet	60	30	60 MME
1/13/2022	12/20/2021	Patient 4 (W)	Oxycodone HCl (IR) 30mg tab	120	30	180 MME
1/10/2022	10/27/2021	Patient 4 (W)	Oxycodone HCl (IR) 15mg tab	120	30	90 MME



K-TRACS Case Review

	2021	2022
Total Number of Cases Reviewed	11	8
Number of Prescribers Reviewed	7	10
Number of Patients Reviewed	5	19
Number of Referrals to Prescriber Regulatory Board	4	3
Number of Letters Sent to Providers Regarding Prescribing Patterns	21	7



When to Contact K-TRACS

- Missing Prescriptions
- Mismatched Patients
- Concerning Patient, Prescriber or Pharmacy
- Training and Technical Assistance



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