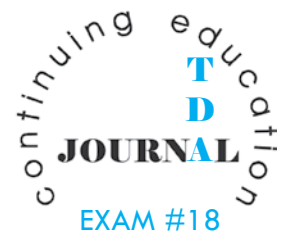


Controlled Substance Monitoring Database (CSMD)

By Kevin Eidson, PharmD



BACKGROUND AND SUMMARY OF THE LAW:

The Controlled Substance Monitoring Act of 2002 was enacted on or about July 3, 2002 in the 2002 Public Acts, Chapter 840, codified in Tenn. Code Ann. §53-10-301, et seq. for the creation of the controlled substance database (“database”) which is administratively attached to the Board of Pharmacy (“Board”). Tenn. Code Ann. §53-10-304(c) explicitly provides that the purpose of the database is “... to assist in research, statistical analysis and the education of health care practitioners concerning patients who, by virtue of their conduct in acquiring controlled substances, may require counseling or intervention for substance abuse...” Toward that end, dispensers (prescribers and pharmacists) are required to submit data about the controlled substances dispensed (including strength and quantity) along with the patient’s name, to Optimum Technologies, who has contracted with the Board of Pharmacy to compile the data for the database. The law also provides that the Board along with the Controlled Substance Database Advisory Committee (“Committee”) shall establish, administer, maintain and direct the functioning of the database [Tenn. Code Ann. §53-10-304(b)].

The 2009 data indicates the continued trend from inception in 2007 that the database is being accessed by a significantly greater number of dispensers (prescribers and pharmacists) in 2009 than in 2008 (an increase from 7,600 to 10,241). There is also a corresponding increase (from 639,072 in 2008 to 903,553 in 2009) in the number of patient history reports being pulled. Another significant piece of data is the continued decrease in controlled substance prescriptions being dispensed in 2009 (from approximately 17 million in 2007 to approximately 15.4 million in 2008 and now 15.2 million

in 2009). While it may be difficult to directly attribute all of the prescription decrease to the database, such a marked discrepancy between the 2007 and 2008 prescription numbers indicates that the database has most likely contributed to this decreased number. All of the data taken as a whole indicates that health care providers are using the database for its intended purpose - tailoring patient treatment plans relative to cumulative controlled substance usage. It also indicates that dispensers are increasingly relying on the database

abuse of controlled substances, the Board continuously receives anecdotal evidence from health care providers indicating that database information has allowed them to determine if a patient is seeing various doctors at the same time and obtaining the same or therapeutically equivalent controlled substances; providers may use the database information to either refuse to prescribe or dispense a duplication in therapy or may alter the patient’s treatment plan. Physicians and pharmacists have also stated that the database information has allowed them to communicate with other health care providers who may be treating or have treated the same patient in an effort to exchange information about the patient’s condition and the appropriate future treatment regimens for the patient. This anecdotal evidence suggests that through greater usage of the database from health care providers, the database is affecting the distribution and abuse of controlled substances such that those health care providers who are accessing the database are attempting to more appropriately prescribe and dispense controlled substances to patients.

GENERAL INFORMATION

Name: Tennessee Controlled Substance Monitoring Database

This program collects prescription data from Dispensers (including non resident mail order pharmacies). The data is housed in a highly secure database.

Website: <https://prescriptionmonitoring.state.tn.us>

Drugs include: All controlled substances, Schedules II-V

Turnaround Time: The website is available 24/7. In most cases, the report is available within seconds.

Lag-Time: It takes approximately 1-30 days from the date on which the prescription is dispensed before it appears in a report.

Uses for the reports: A report provides a patient history of prescriptions over time. It should be used to supplement a patient evaluation, to confirm a patient’s drug history or document compliance with a therapeutic regimen.

This is an on-line service. A prescriber or pharmacist must apply for an account and be approved prior to receiving patient information. This usually takes 1-4 days.

If you have any questions, please contact:

Phone Number: (615) 532-3273

Fax Number: (615) 253-8782

Email Address: CSMD.admin@tn.gov

as a tool used to detect the abuse and misuse of controlled substances and also as a tool to better treat the patient in providing competent, quality care.

In addition to the empirical data collected by Board staff about the effect of the database on the distribution and

COMMON QUESTIONS

I can’t remember my user name and password. What do I do?

Please e-mail a request to have your password reset to CSMD.admin@tn.gov. Staff will reset your password and send you an automated notice to the e-mail address provided in your registration.

Why haven’t I received my user name and password?

Please check the junk mail folder of your e-mail provider to see if the automated email with your user name and password has been directed there.



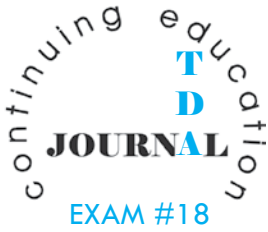
Kevin Eidson, PharmD is Executive Director of the Tennessee Board of Pharmacy, Tennessee Department of Health.

Questions for Continuing Education Article - CE Exam #18

1. What does the acronym CSMD stand for:
 - a. Controlled Substance for Medical Doctors
 - b. Controlled Substance Monitoring Database
 - c. Controlled Schedule of Medicine Database
 - d. none of the above
2. The stated purpose of the database is to:
 - a. assist in research
 - b. statistical analysis
 - c. education of health care practitioners concerning patient prescription behavior
 - d. all the above
3. The database can be highly informative when:
 - a. pharmacists suspect patients are seeing several doctors for the same type medicines
 - b. when doctors have concerns regarding doctor shopping or drug abuse
 - c. prescription prices are needed for reimbursement by insurance companies
 - d. a. and b.
4. The database collects prescription data from:
 - a. prescribers
 - b. dispensers
 - c. mail-order pharmacies
 - d. all the above
5. How does one access the database:
 - a. a pharmacist or prescriber must apply for an account and be approved prior to use
 - b. a dispenser or prescriber must call 511
 - c. any PC or Mac computer
 - d. all the above

Answer Form for TDA CE Credit Exam #18: *Controlled Substance Monitoring Database (CSMD)*

Circle the correct letter answer for each CE Exam question:



1.	a	b	c	d
2.	a	b	c	d
3.	a	b	c	d
4.	a	b	c	d
5.	a	b	c	d

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