NH PRESCRIPTION DRUG MONITORING PROGRAM
NH PDMP

New Hampshire Controlled Drug Prescription Health and Safety Program RSA 318-B:31-38

ANNUAL REPORT
July 1, 2019 – June 30, 2020

DATA NOTES

Data shown use the following designed criteria:

State fiscal years are July 1 through June 30 of the following year. For example, the fourth quarter of state fiscal year 2020 is April 1, 2020 through June 30, 2020.

- The information in the PDMP comes from pharmacies. By law, all pharmacies in New Hampshire, including veterinarians, are required to report the controlled substances they dispense.
- Unless otherwise specified, opioid drugs used for medication-assisted treatment of substance use disorder are excluded.
- The data include only patients with NH addresses.
- The data include only pharmacies with NH addresses.
- Unless otherwise specified, data is for prescribers with NH addresses. There is one slide for out of state prescribers.
- The type of prescriptions counted are those dispensed in units of "Each". Those include tablets, capsules, etc., but does not include liquids or powders. Liquids and powders have been shown to be reported inaccurately. For example, one bottle is reported as dispensed when only a few grams or milliliters was actually dispensed; this can skew data for MME.
- There is no slide for data by gender. Gender has not been a required data element to be submitted. Fifteen percent of prescriptions do not have a gender specified.
- The data for the fourth quarter of state fiscal year 2020, April 1, 2020 through June 30, 2020, may show a larger variation than might be expected. We attribute this to COVID-19 situations where provider offices may have been closed (dental for example) or may have had reduced staff and/or reduced patients.
- This symbol  appears where data may have been impacted by COVID-19 socio-economic conditions.

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PDMP Advisory Council on 6/30/2020

Affiliation	Name
Medical Society	David Strang , MD (Chair)
Board of Dental Examiners	VACANT
Board of Medicine	Dan Potenza, MD
Board of Nursing	Gene Harkless, APRN
Board of Pharmacy	Nicole Harrington, RPH
Board of Veterinary Medicine	Steve Crawford, DVM
APRN Society	Donna Roe, APRN
Dental Society	VACANT
NH Hospital Association	David DePiero, RPH
Pharmacy Society	Michael Viggiano, RPH
Police Chief Association	Chief Bradley Osgood
NH Veterinary Medical Association	Claire Timbas, DVM
Attorney General	Thomas Worboys, Esq.
Department of Health and Human Services	Joseph Harding, MSW
Governor's Commission on Alcohol and Drug (public)	Anika Stanley-Smith
Governor's Commission on Alcohol and Drug (public)	Kate Frey
NH Senate	Bob Giuda, Senator
NH House of Representatives	Richard Osbourne, Rep.
NH House of Representatives	Joseph Guthrie, Rep.

Abbreviations

Abbreviation	Definition
CNS	Central Nervous System
CS	Controlled Substance
DEA	Drug Enforcement Administration
DO	Doctor of Osteopathy
DPM	Doctor of Podiatric Medicine
HID	Health Information Designs, Inc.
MAT	Medication Assisted Therapy
MD	Medical Doctor
MME	Morphine Milligram Equivalent
ND	Naturopathic Doctor
NH	New Hampshire
NP	Nurse Practitioner
PA	Physician Assistant
PDMP	Prescription Drug Monitoring Program
QTY	Quantity: for unit quantity of tablets, pills, etc. in a prescription. Not included are liquids, syrups, powders, etc..
Res	Medical Resident
RPh	Pharmacist
RX	Prescription
SAMSHA	Substance Abuse and Mental Health Services Association
SCH	Schedule: as in DEA Scheduled Drug
SFY	State Fiscal Year (July 1 thru the following June 30)

Executive Summary

This annual report to the Senate President, the Speaker of the House, the Health and Human Services Oversight Committee, the PDMP Advisory Council, and the participating licensing boards presents information and performance metrics relevant to the operation of the Prescription Drug Monitoring Program (PDMP).

The Controlled Drug Prescription Health and Safety Program, known colloquially as the PDMP, was authorized by statute in 2012. The PDMP's mission is to promote the quality of patient care and appropriate use of controlled substances for legitimate medical purposes. The PDMP provides New Hampshire licensed practitioners with a web-based, clinical tool to use when prescribing or dispensing Schedule II-IV controlled substances to patients. The purpose of this tool is to provide the practitioner with a complete picture of a patient's controlled substance use; such data is vital in determining whether a prescription for a controlled substance is clinically warranted.

In FY20, the PDMP continued its effort to meet the following strategic goals outlined in its May 2019 Strategic Plan:

- Provide an easy and accurate tool that improves prescribing and dispensing decisions.
- Develop advanced analytics to improve patient outcomes.
- Support initiatives through a multi-disciplinary leadership collaborative.

Among other things, the Office of Professional Licensure and Certification (OPLC) amended its memorandum of understanding with the Department of Health and Human Services to receive additional grant funding: (1) to purchase and maintain software to promote optimal opioid prescribing practices by prescribers; (2) to develop and expand the PDMP and increase its utilization as a public health surveillance and clinical-decision making tool; (3) to upgrade existing software to generate reports to audit and monitor the data, purchase prescriber report enhancement, and purchase advanced enhancements for increased analytical capacity; (4) to upgrade the current PDMP software system to allow PDMP to produce critical utilization reports; (5) to hire two, full-time staff members to conduct audits of data; and, (6) to hire one, full-time staff member to manage and coordinate the integration of the PDMP into New Hampshire healthcare facilities' electronic healthcare record systems.

These efforts will continue in FY21.

Executive Summary

PDMP Funding:

With the inception of the NH PDMP in 2014, there was an initial operating budget of approximately $200,000, annually through the receipt of 100% federal funding. Beginning in SFY20, the NH PDMP will be in receipt of the following collective award funding:

Source of Funds	TOTAL Funding Amount
Agency Fees	$263,185
Bureau of Justice Administration (BJA) (awarded grant)	$722,137
Center of Disease Control (CDC) (awarded grant)*	$2,295,933
Health Resources & Services Administration (HRSA) (awarded grant)	$60,000

Figure 1

*With Memoranda of Understanding in place with NH DHHS and the NH Department of Justice, the PDMP is able to accept funds from the CDC grant and the Bureau of Justice grant. In SFY 2020 the combined funding covered two of the existing staff positions (e.g. program manager and administrative assistant), and permitted PDMP to hire two of the three proposed positions (e.g. Health Systems Coordinator and PDMP Data Auditor). OPLC funded the PDMP analyst position. In FY21, PDMP anticipates such funds will continue to support improvements and additional developments of the PDMP database to increase utilization and data collection and analysis.

PDMP Registration:

The NH PDMP worked with it's vendor, APPRISS, to implement a semi-automated registration process, with the ultimate goal of achieving a fully automated registration system with auditing functions. Until the fully automated registration is finalized, PDMP staff will continue to conduct a manual audit and inform the regulatory boards regarding the status of their licensees' registration with the NH PDMP.

By the end of SFY 2020 the following had occurred:

- 10,044 of New Hampshire-licensed controlled substance prescribers had a PDMP account.
- 4,667 delegates had a PDMP account.
- The total number of accounts increased 6% from SFY 2019 to SFY 2020. (only increased 3% from SFY 2018 to SFY 2019)
- Patient Information Requests increased 14%.
- Overall, 40% of all registered users were actively utilizing the PDMP, compared to only a third in SFY 2019.
- 40% of registered users were delegates who made 74% of the queries on behalf of their sponsored practitioners.

Executive Summary

PDMP Utilization:

PDMP registered users and queries increased in 2020. For most user roles, the number of active users increased. This data includes prescribers, pharmacists, and delegates.

- The PDMP received 1,033,397, unique patient queries in SFY 2020, a **14% increase** over SFY 2019.
- Except for prescriber delegates, the quantity of searches and persons performing the searches decreased for all roles. Veterinarians are not required to make queries.
- **The number of overall active users increased by 3%.**
- Any decrease in the number of active users by discipline is due to the removal of inactive or incomplete registrations.
- In SFY 2020, delegates made the most queries—over 520,000, representing 51% of all queries.
- Increasing access and system use will remain a high priority for the program in SFY 2021.
- The PDMP will continue to work with partners to leverage prescription data to improve the health of New Hampshire residents.

* *Quantity of prescriptions, searches, and prescribers decreased in SFY 2020 Q4 compared to SFY 2020 Q3. These decreases are most likely associated to the COVID-19 socio-economic conditions.*

History of PDMP Legislation

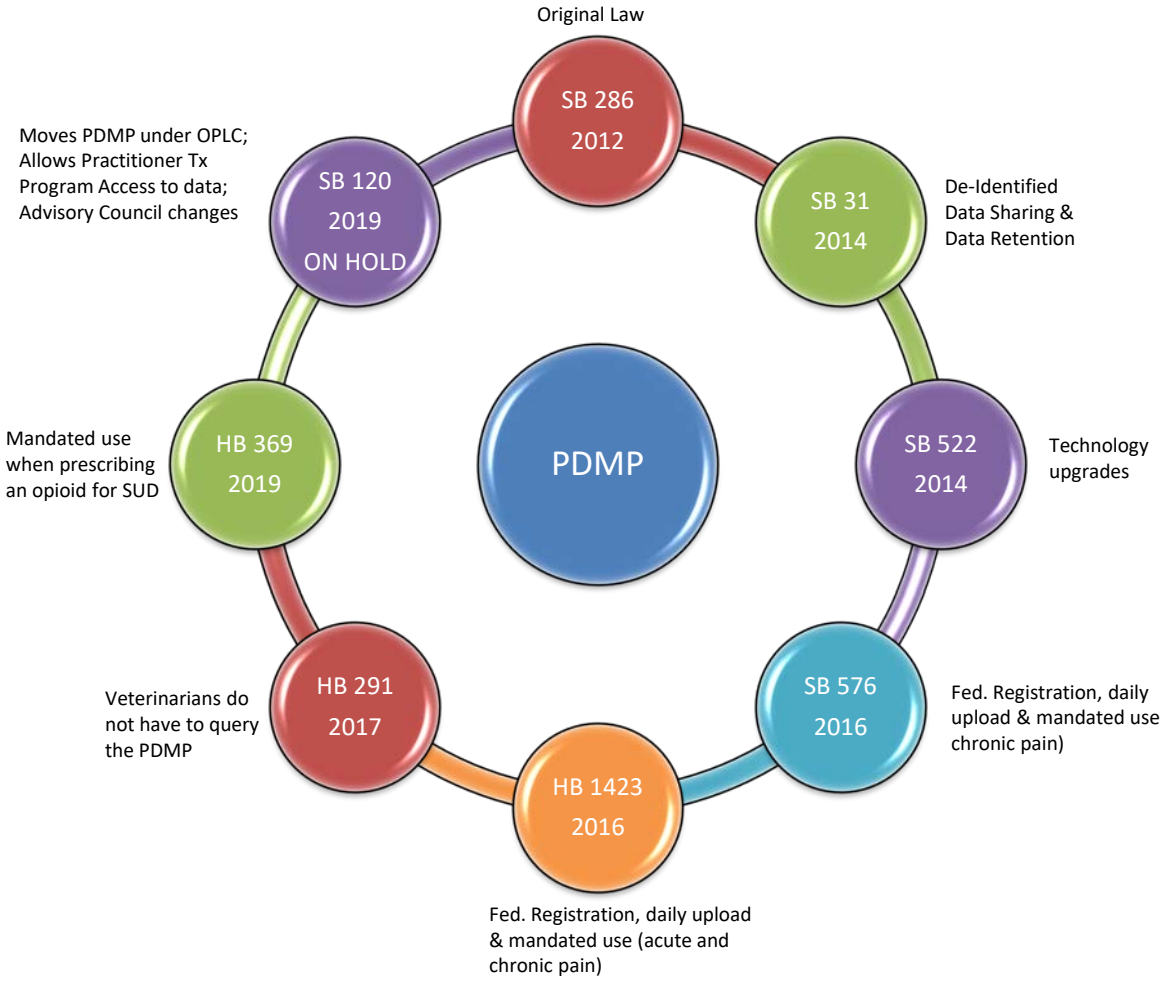


Figure 4

PDMP REGISTRATION

Registered Users by Role

PDMP registration is available to healthcare practitioners (prescribers and pharmacists) licensed in New Hampshire, the NH state medical examiner, and the federal veteran administrative facilities in New Hampshire, Maine, Vermont and Massachusetts. Users may delegate PDMP access authority to other healthcare, pharmacy or medical examiner staff. Delegates may be unlicensed staff.

User Role	SFY 2019 Registered Users	SFY 2020 Registered Users	SFY 2019 to 2020 Pct change
Physician (MD, PA, DO, Res, COVID)	6,043	5,926	-1.9%
Delegates **	3,921	4,754	21.2%
Pharmacists	3,054	3,280	7.4%
Nurse Practitioner / Clinical Nurse Specialist	2,268	2,478	9.3%
Dentist	987	933	-5.5%
Naturopathic Phys/Optometrist/Podiatrist	347	363	4.6%
Veterinarian	326	344	5.5%
Totals	**16,946**	**18,078**	**6.7%**

Figure 5

At the close of SFY 2020, there were 18,078 PDMP accounts. The program continued with registration audits during SFY 2020. The registration audit to date has been completed for the Board of Dental Examiners, the Board of Pharmacy (pharmacists and pharmacies), the Board of Medicine (physician assistants). The registration audit for the Board of Nursing is ongoing. The PDMP initiated a new automated registration process with its vendor, APPRISS. While the automated system is being finalized, the PDMP will continue manual registration audits to determine registration completeness with all the other participating Boards. Accounts with no activity, and account holders whose licensure indicates they no longer practice in NH, continue to be de-activated.

**Delegates are allowed to register under a prescriber or pharmacist supervision. Delegates are permitted to query patients on behalf of prescribers and pharmacists, with the expectation that they pass the information along.

Note: SB 286, passed in 2012, mandated registration for all prescribers licensed to practice in New Hampshire who possess a DEA number associated with a facility in New Hampshire, as well as all pharmacists licensed in NH. An on-going challenge is the inability for the NH regulatory boards to collect their licensees' DEA numbers with their renewal applications. Because of this challenge, the PDMP cannot report to the regulatory boards the number/percentage of licensees that are/are not registered with NH PDMP.

PDMP REGISTRATION

Registered Users by Discipline

This chart shows that delegates now comprise the highest percentage of registered users (last year it was physicians). They also represent the highest percentage of utilizers, as shown on the next slide.

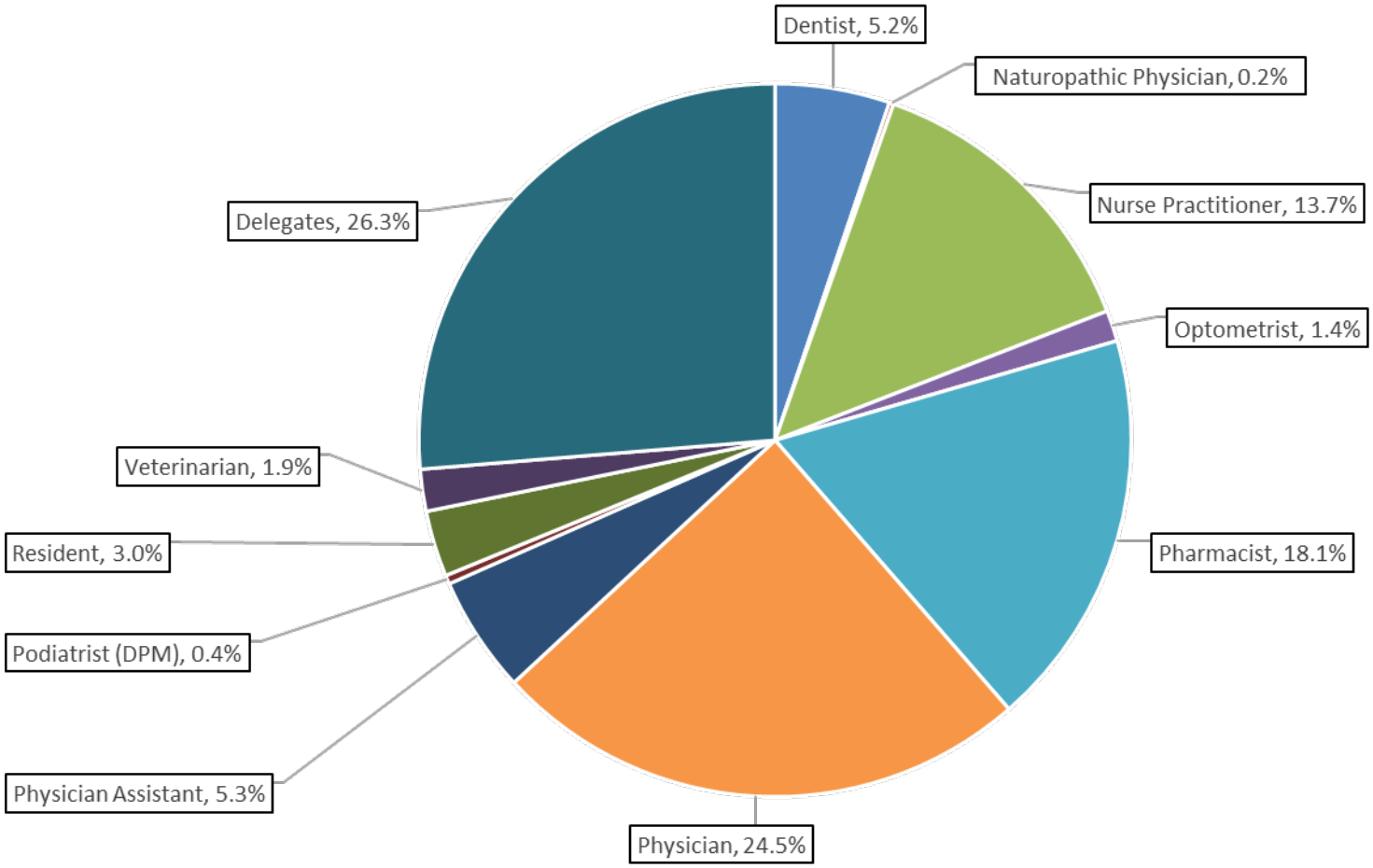


Figure 6

PDMP UTLIZATION

Patient Queries by User Roles

PDMP patient queries increased by 14% between SFY 2019 and SFY 2020. There were decreases for physicians, dentists, and veterinarians. The physician and dentist decreases are likely attributable to the delegates performing the queries. Veterinarians are not required to make queries. Administration staff make queries based on requests for reports.

User Role	SFY 2019 Patient queries	SFY 2020 Patient queries	% Change SFY 2019-2020
Admin	19	8	-58%
COVID19 Prescriber Out of State	N/A	35	N/A
Dentist	20,406	14,956	-27%
Medical Examiner - Delegate	581	778	34%
Medical Examiner/Coroner	59	80	36%
Medical Resident with Prescriptive Authority	5,018	5,515	10%
Naturopathic Physician	49	18	-63%
Nurse Practitioner / Clinical Nurse Specialist	66,908	66,545	-1%
Optometrist	1	2	100%
Pharmacist	268,641	316,836	18%
Pharmacist's Delegate - Licensed	5,469	4,885	-11%
Pharmacist's Delegate - Unlicensed	867	1,051	21%
Physician (MD, DO)	79,103	76,462	-3%
Physician Assistant	25,332	22,319	-12%
Podiatrist (DPM)	1,429	1,207	-16%
Prescriber Delegate - Licensed	140,262	137,031	-2%
Prescriber Delegate - Unlicensed	290,804	385,588	33%
VA Dispenser	53	0	-100%
VA Prescriber	25	72	188%
Veterinarian	81	9	-89%
Totals	**905,107**	**1,033,397**	**14%**

Figure 7

Note: In January 2017, the mandate to query the PDMP when treating and managing a patient's pain with opioids, went into effect.

PDMP UTLIZATION

Number of Users Performing Patient Queries

Overall, the number of active PDMP users increased by 3% from SFY 2019 to SFY 2020. The largest increase, by count, was for delegates, followed by nurse practitioners/clinical nurse specialists.

User Role	Count of users making patient queries SFY 2019	Count of users making patient queries SFY 2020	Percent Change SFY 2019 to SFY 2020
Admin	2	2	0
COVID19 Prescriber Out of State	N/A	4	N/A
Dentist	325	265	-23%
Medical Examiner - Delegate	1	1	0%
Medical Examiner/Coroner	2	2	0%
Medical Resident with Prescriptive Authority	189	215	12%
Naturopathic Physician	4	6	33%
Nurse Practitioner / Clinical Nurse Specialist	862	921	6%
Optometrist	1	1	0%
Pharmacist	1,029	1,071	4%
Pharmacist's Delegate - Licensed	17	29	41%
Pharmacist's Delegate - Unlicensed	10	10	0%
Physician (MD, DO)	1,563	1,511	-3%
Physician Assistant	548	582	6%
Podiatrist (DPM)	26	30	13%
Prescriber Delegate - Licensed	865	897	4%
Prescriber Delegate - Unlicensed	1,331	1,424	7%
VA Dispenser	1	1	0%
VA Prescriber	4	4	0%
Veterinarian	8	4	-100%
Totals	**6,786**	**6,980**	**3%**

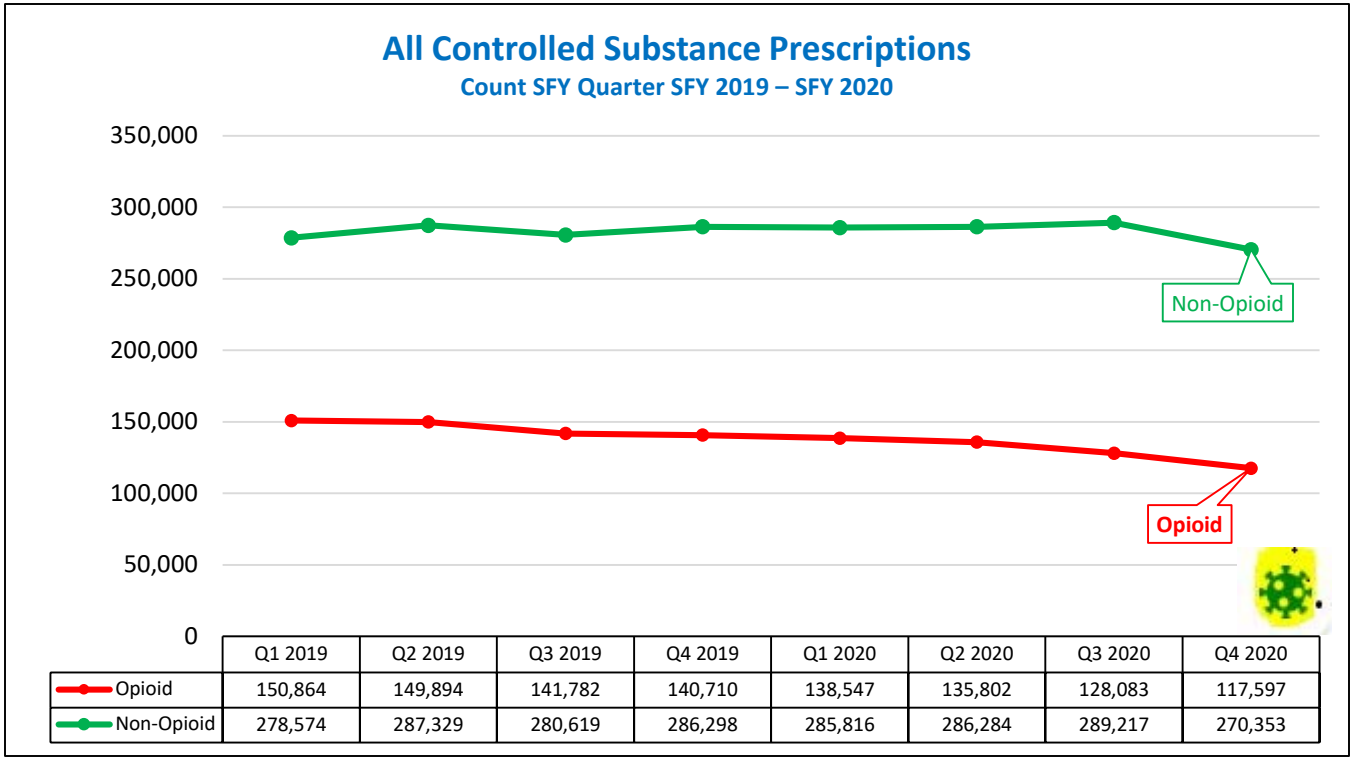
Figure 8

Controlled Prescription Drug Use in New Hampshire

Background: How PDMP tracks prescriptions

This chart shows a decline for opioids. Non-opioids have also declined.

The total opioid prescription counts for SFY 2020 are **11% less** than the total opioid prescription counts for SFY 2019.



	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
Opioid	150,864	149,894	141,782	140,710	138,547	135,802	128,083	117,597
Non-Opioid	278,574	287,329	280,619	286,298	285,816	286,284	289,217	270,353

Figure 9

Controlled Prescription Drug Use in New Hampshire

Comparison of Prescription Counts of Opioids to Non-Opioids

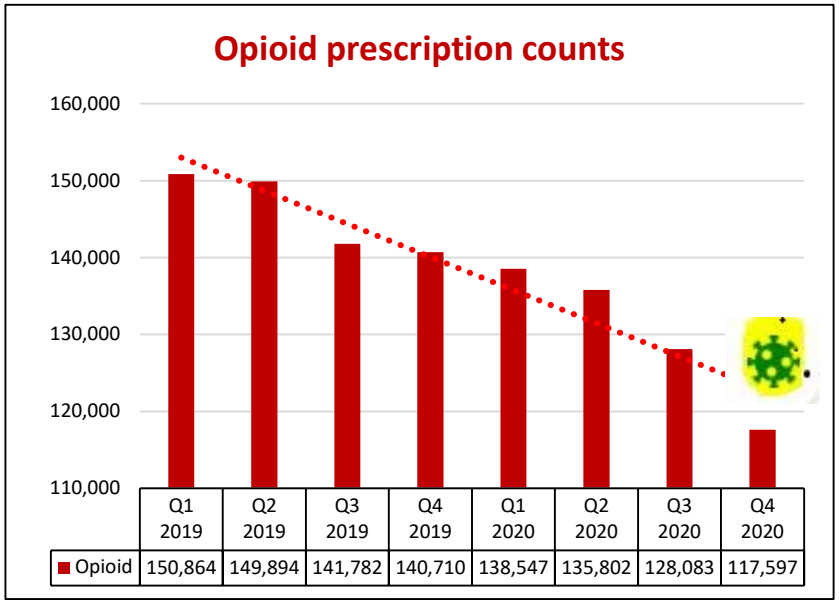


Figure 12

Opioid RX quarterly counts show a decline over the two state fiscal years. Therefore, the decrease in total RX (shown previously) is driven almost entirely by a decrease in opioid RX.

Except for SFY 2020 Q4 (see previous COVID-19 note) non-opioid RX counts show a variation of less than 9,000 quarter to quarter. The trend line over two years is essentially flat.

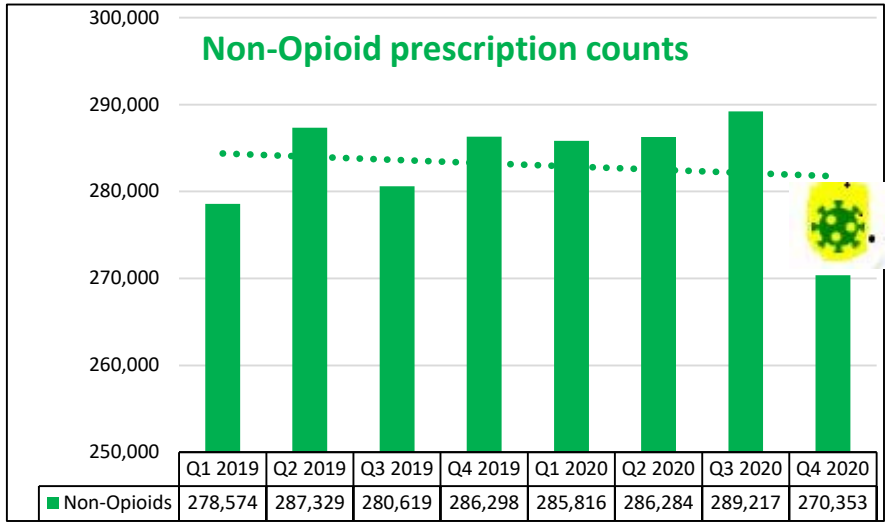


Figure 13

Controlled Prescription Drug Use in New Hampshire

Payment Type: Opioids only

The variations from one year to the next are not substantial. The percentage of insurance payments **(green)** shows the largest increase from SFY 2019 to SFY 2020. The percentage of private pay (cash) decreased from SFY 2019 to SFY 2020.

The use of cash discount cards is included in insurance percentages.

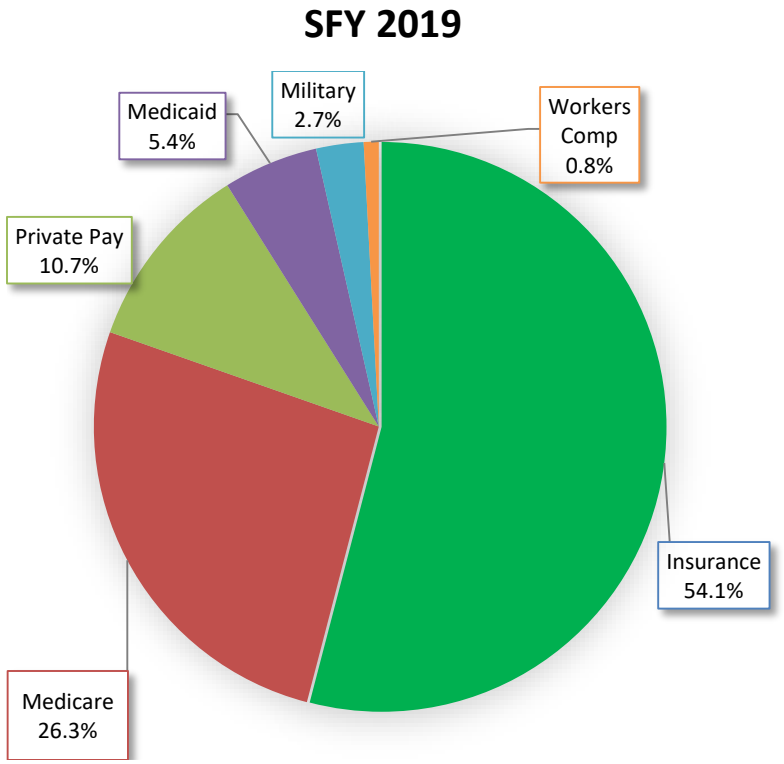


Figure 10

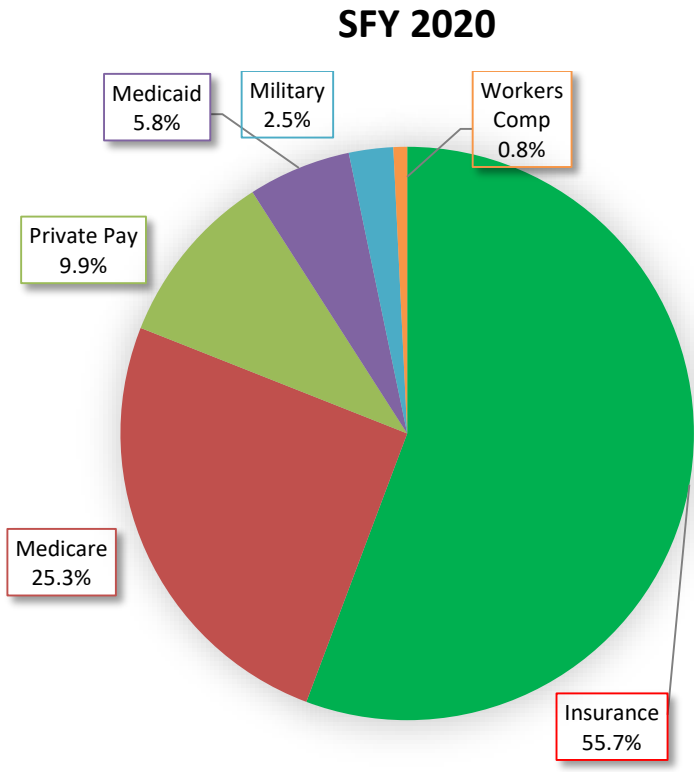
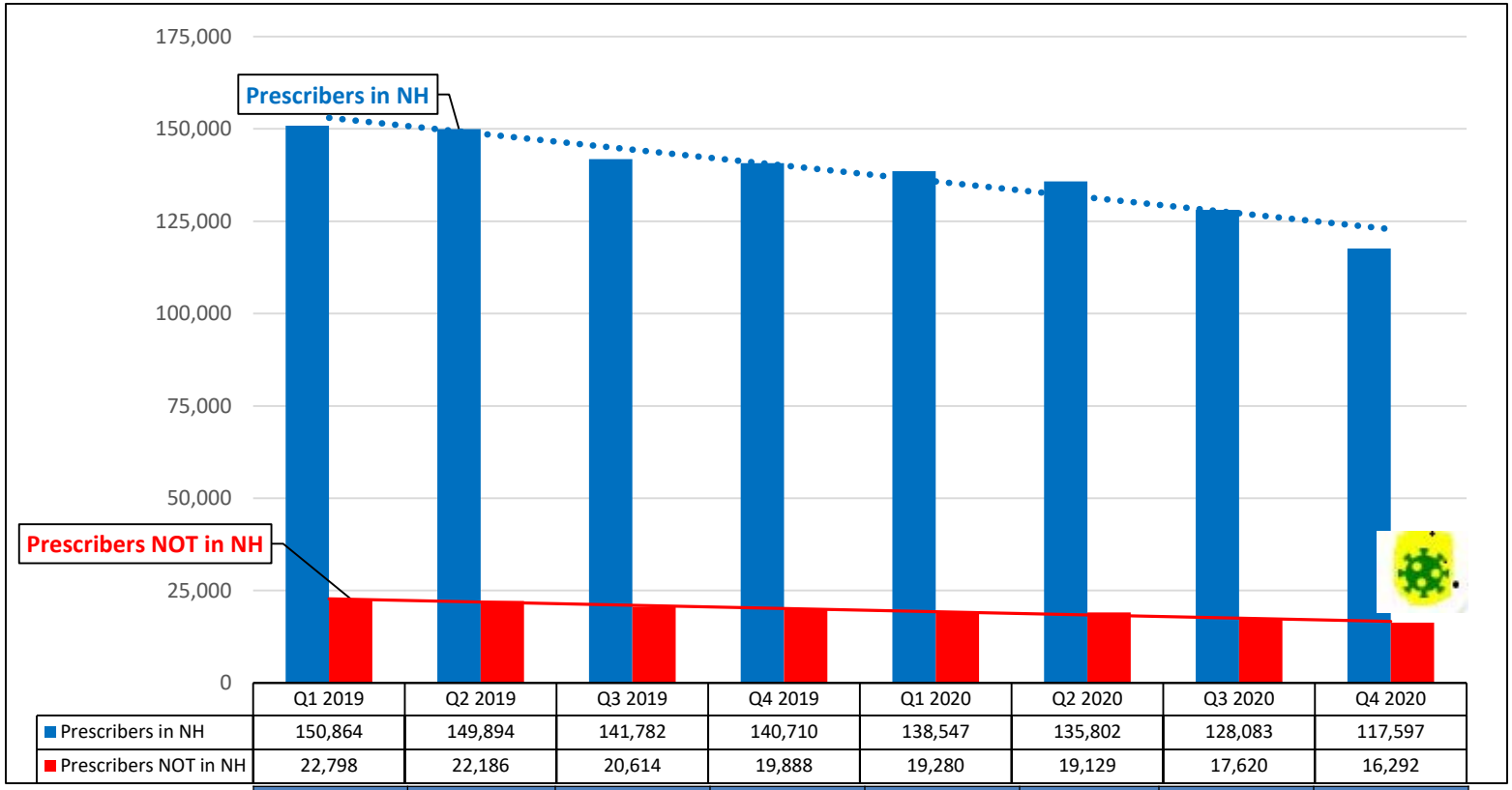


Figure 11

Controlled Prescription Drug Use in New Hampshire

Number of prescriptions for Opioids only – The chart shows how "Out of state prescribers" influence opioid pain treatment for NH residents. The chart compares opioids prescription counts prescribed by NH prescribers to those prescribed by non-NH prescribers. The chart shows that, while the overall number of opioid prescriptions has declined, the percentage of prescriptions from out of state prescribers (table below chart) has declined more slowly. Of the prescribers without NH addresses, 82% of prescribers were in in the border states of ME, MA & VT in SY2019 and 85% were in the same border states in SFY2020.



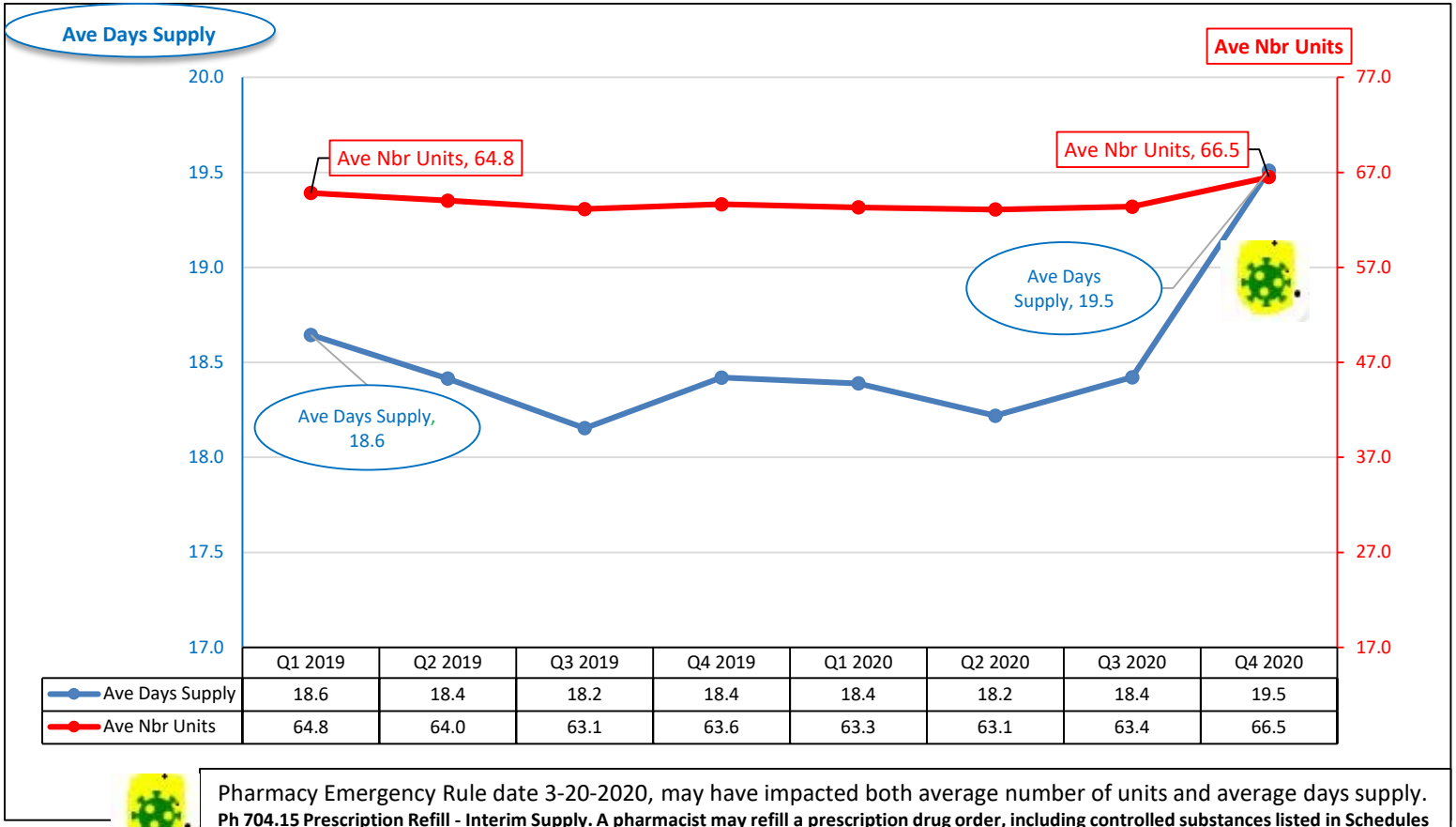
	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
Prescribers in NH	150,864	149,894	141,782	140,710	138,547	135,802	128,083	117,597
Prescribers NOT in NH	22,798	22,186	20,614	19,888	19,280	19,129	17,620	16,292

Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
13.1%	12.9%	12.7%	12.4%	12.2%	12.3%	12.1%	12.1%

Figure 14

Controlled Prescription Drug Use in New Hampshire

Opioids only - Average Days Supply and Average Number of Units per Prescription



	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
Ave Days Supply	18.6	18.4	18.2	18.4	18.4	18.2	18.4	19.5
Ave Nbr Units	64.8	64.0	63.1	63.6	63.3	63.1	63.4	66.5

Pharmacy Emergency Rule date 3-20-2020, may have impacted both average number of units and average days supply.
Ph 704.15 Prescription Refill - Interim Supply. A pharmacist may refill a prescription drug order, including controlled substances listed in Schedules III, IV and V, without the authorization of the prescribing practitioner, provided that:
(c) **Unless federal law states otherwise,** The quantity of prescription drug dispensed does not exceed a **90~~30~~** day supply for maintenance medications;

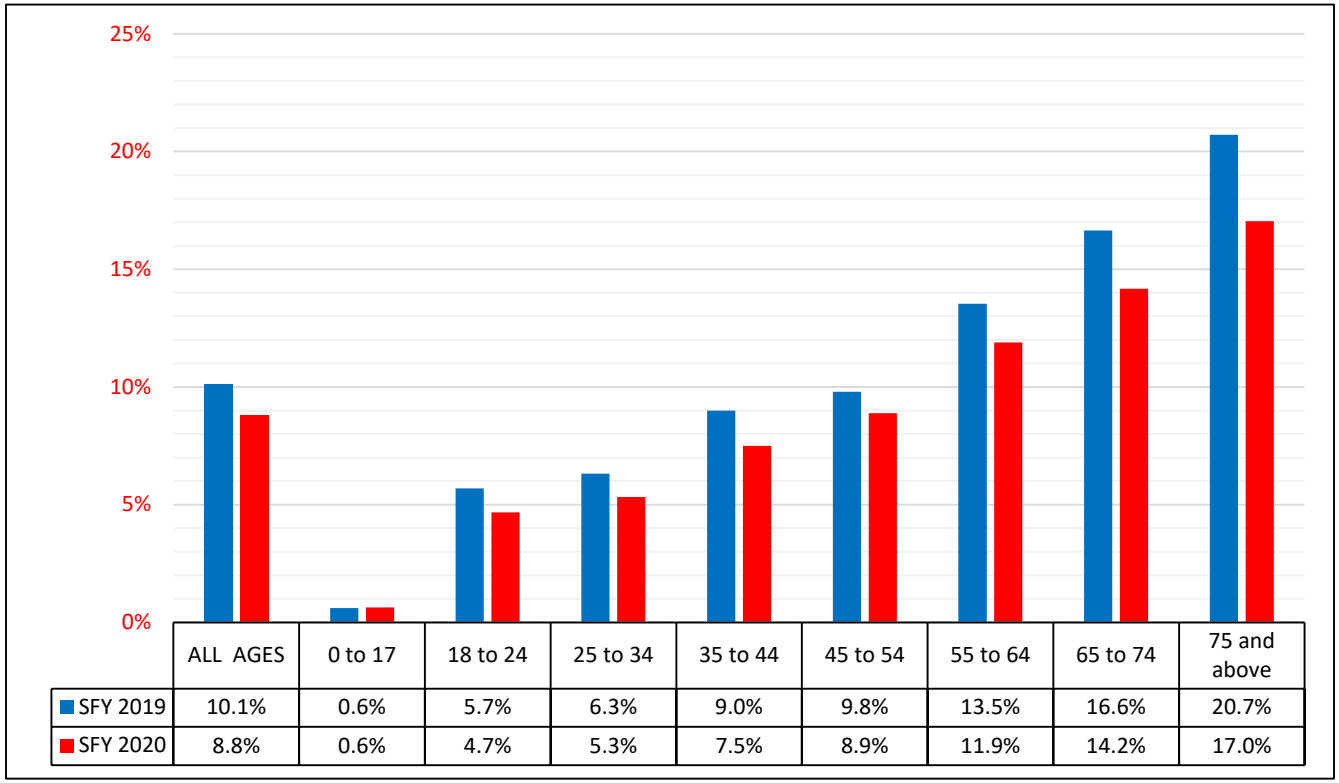
Figure 15

Controlled Prescription Drug Use in New Hampshire by Age

The percentage of the population filling prescription opioids by age range.

Calculated as the number of persons filling opioid prescriptions divided by the population in that age group.

(Population data from (http://mcdc.missouri.edu/applications/population/by-age/report.php?s=33&y=2019&d=&a=5b accessed 8/2020).



	ALL AGES	0 to 17	18 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 to 74	75 and above
SFY 2019	10.1%	0.6%	5.7%	6.3%	9.0%	9.8%	13.5%	16.6%	20.7%
SFY 2020	8.8%	0.6%	4.7%	5.3%	7.5%	8.9%	11.9%	14.2%	17.0%

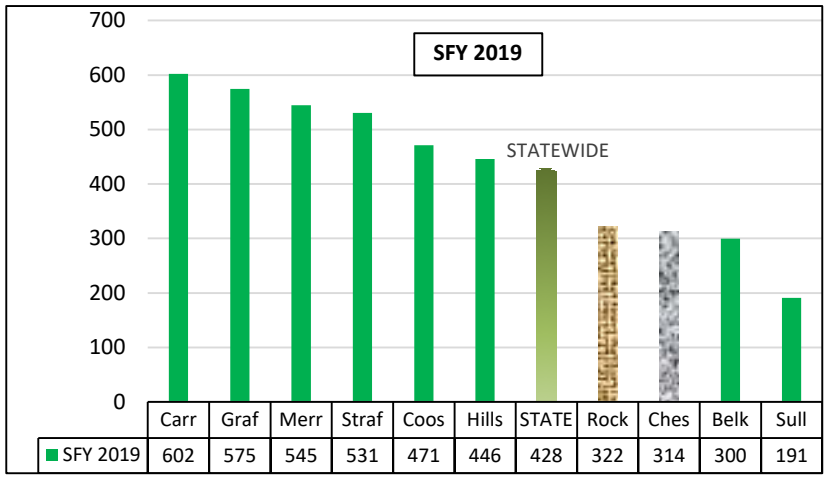
Except for the 0-17 age group remaining the same, the percentage of the population filling an opioid prescription declined from SFY 2019 to SFY 2020. This follows the decline in the count of opioid prescriptions.

Figure 16

Controlled Prescription Drug Use in New Hampshire

Opioid prescriptions only by county

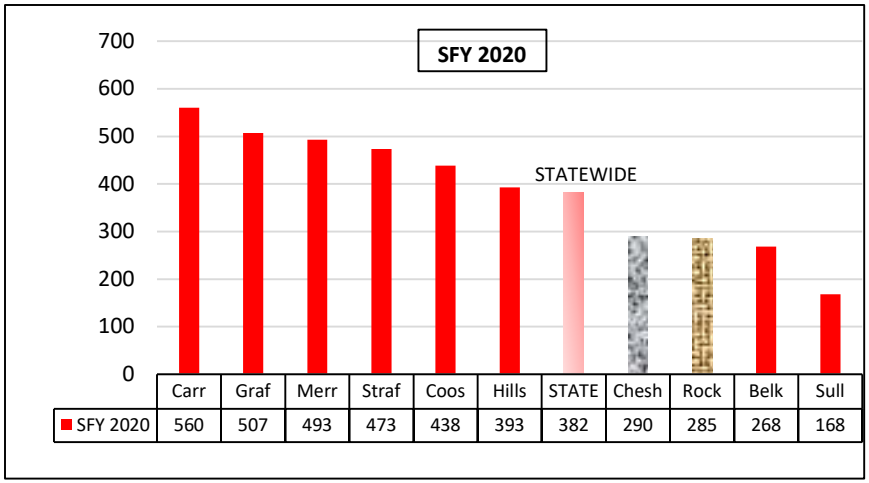
(Population data from (http://mcdc.missouri.edu/applications/population/by-age/report.php?s=33&y=2019&d=&a=5b accessed 8/2020).



	Carr	Graf	Merr	Straf	Coos	Hills	STATE	Rock	Ches	Belk	Sull
SFY 2019	602	575	545	531	471	446	428	322	314	300	191

Cheshire and Rockingham counties have swapped ranks. However, the same 6 counties are above the statewide rate for each SFY.

Per one-thousand residents, opioid prescriptions are declining in each county.



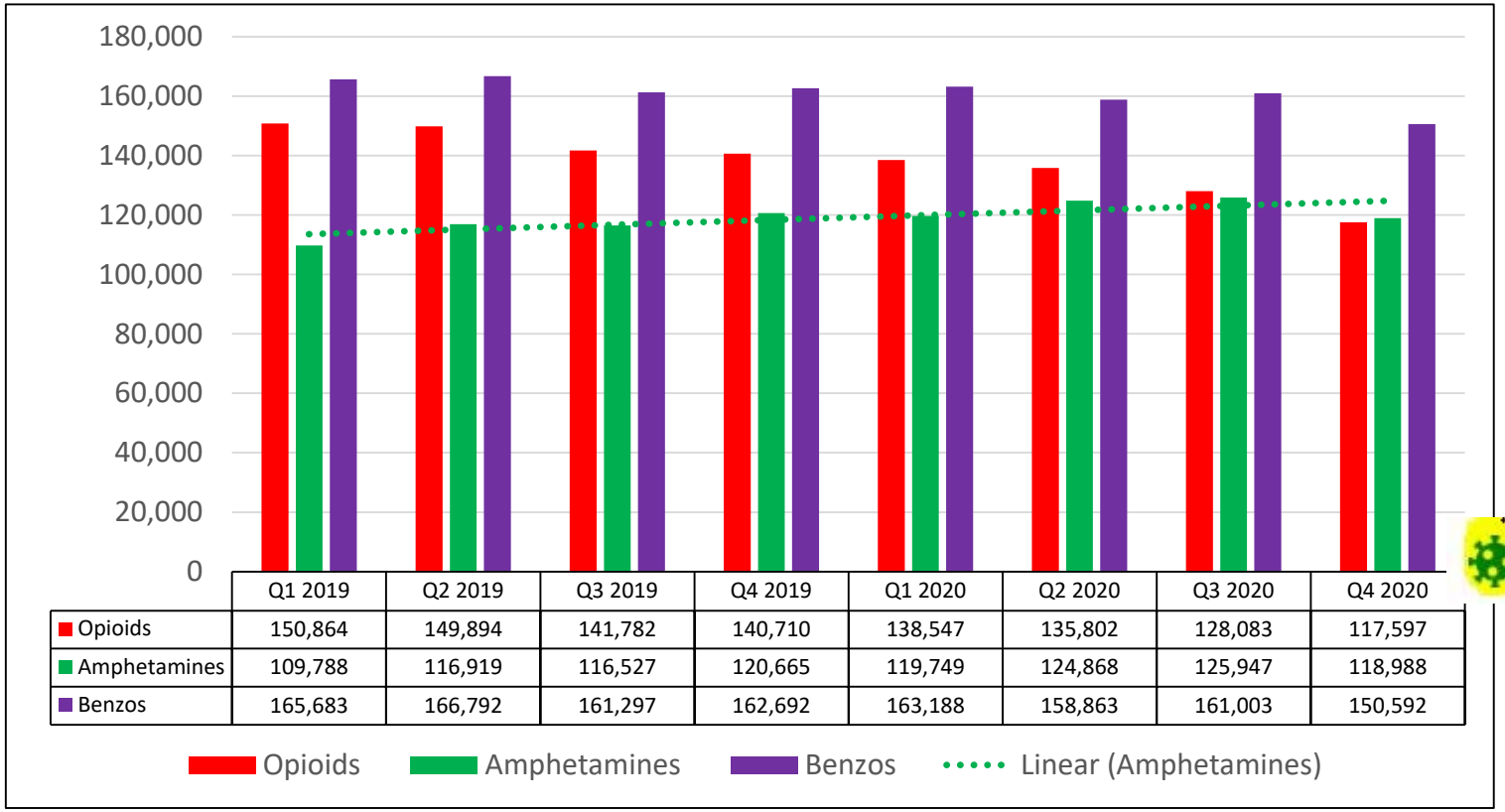
	Carr	Graf	Merr	Straf	Coos	Hills	STATE	Chesh	Rock	Belk	Sull
SFY 2020	560	507	493	473	438	393	382	290	285	268	168

Figure 22

Controlled Prescription Drug Use in New Hampshire

Comparing opioid prescription counts to amphetamine and benzodiazepine prescription counts.

Opioid prescriptions counts are declining, Amphetamines increasing, and Benzodiazepines remain level.



	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
Opioids	150,864	149,894	141,782	140,710	138,547	135,802	128,083	117,597
Amphetamines	109,788	116,919	116,527	120,665	119,749	124,868	125,947	118,988
Benzos	165,683	166,792	161,297	162,692	163,188	158,863	161,003	150,592

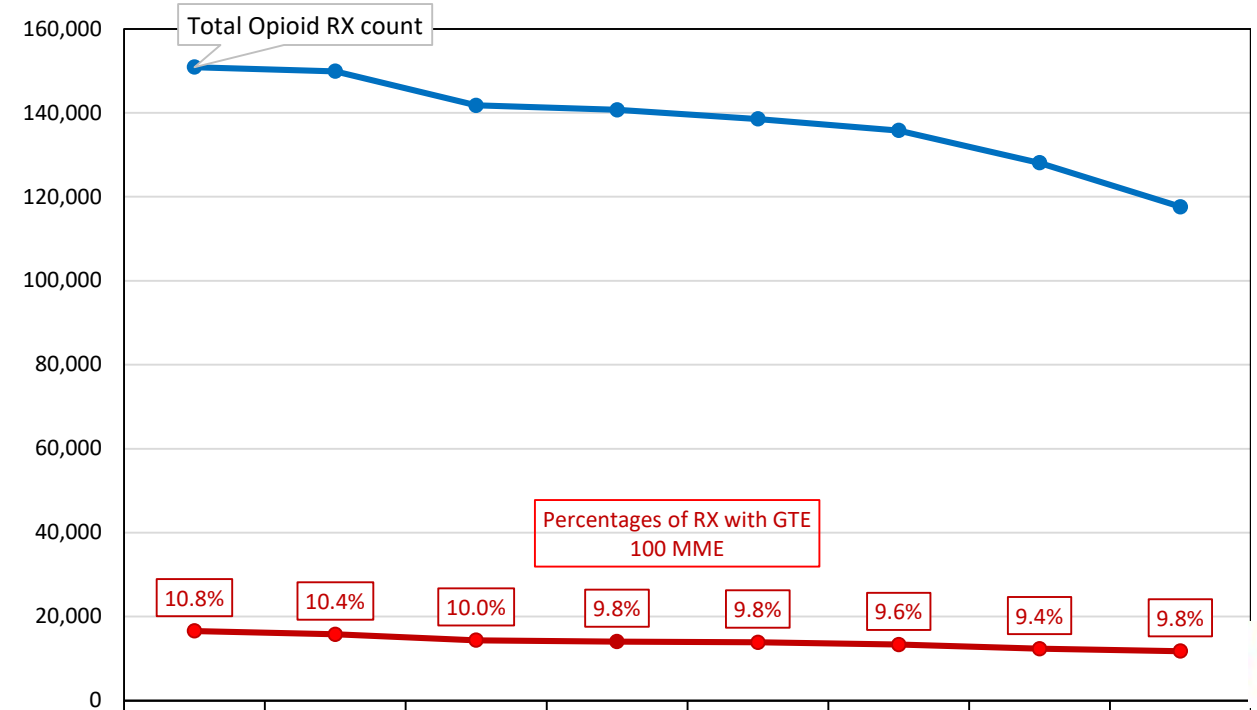
Figure 22

Controlled Prescription Drug Use in New Hampshire

Number and Percentage of Opioid Prescriptions with Greater than 100 MME per day

MME is a method to compare relative strengths of different opioid drugs. There are drug conversion factors, adopted by the CDC, based on one milligram of morphine being the baseline. For example: 1.5 milligrams of oxycodone is equivalent to one milligram of morphine.

Top 5 opioids with GTE 100 MME
OXYCODONE HCL
MORPHINE SULFATE
FENTANYL
METHADONE HCL
HYDROMORPHONE HCL



	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
Count RX GTE 100 MME/day	16,578	15,801	14,385	14,074	13,882	13,331	12,337	11,786
Total Opioid RX counts	150,864	149,894	141,782	140,710	138,547	135,802	128,083	117,597

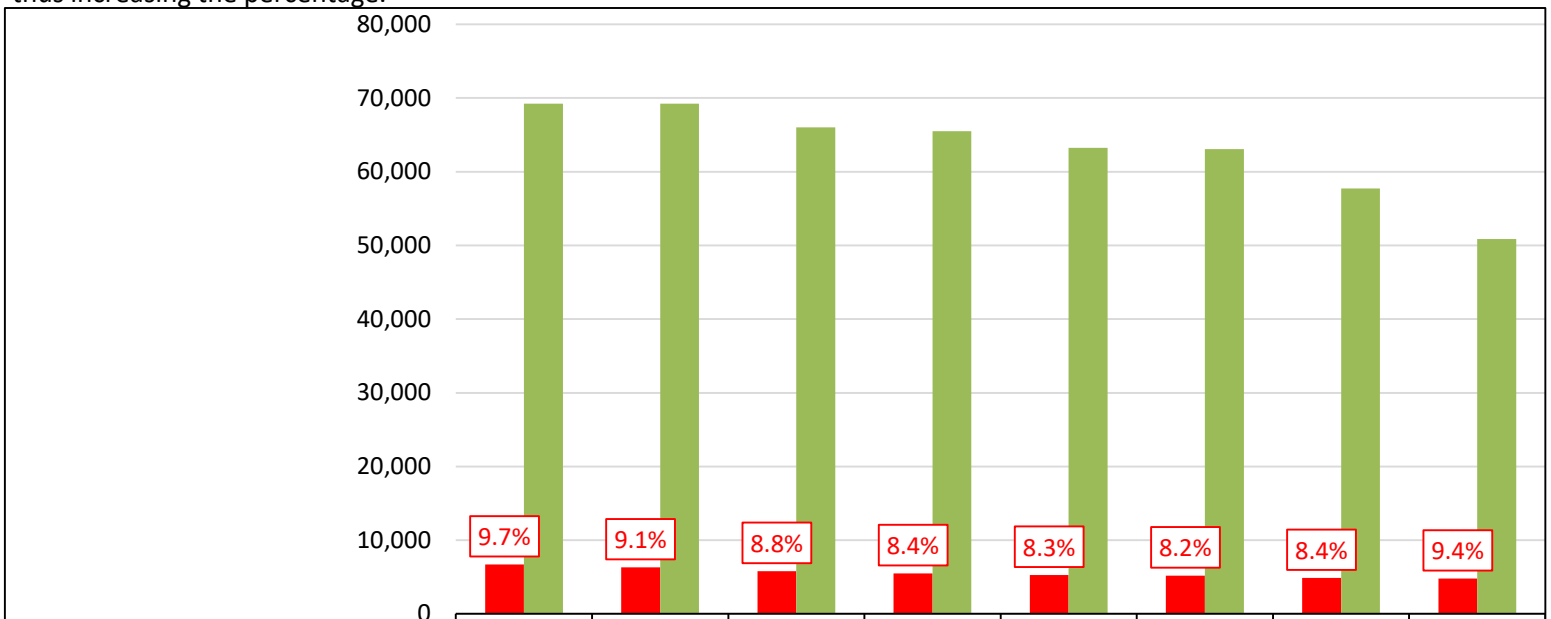
Figure 23

CDC Grant Metric

Controlled Prescription Drug Use in New Hampshire

The number of patients receiving an average daily dose greater than or equal to (GTE) 100 MME, compared to the total number of patients with opioid prescriptions.

Organizations such as the CDC, SAMHSA and Medicare have set thresholds for average daily MME values that carry a risk of opioid abuse. NH has set the threshold value at 100 MME. The chart below indicates that the percent of patients receiving an opioid with greater than or equal to an average daily MME of 100 has decreased except for SFY 2020 Q4. Our assessment is that a similar number of patients continued on 100 MME (4,778), but total patients were fewer due to COVID-19 conditions, thus increasing the percentage.



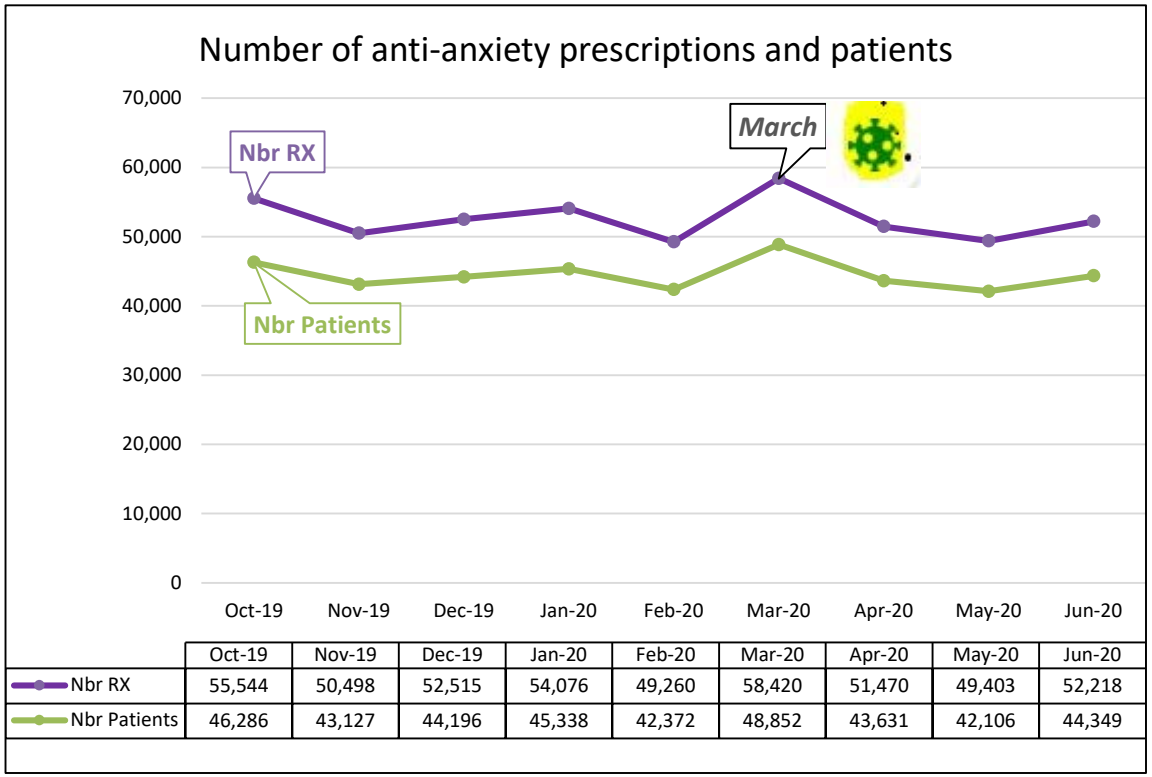
	SFY 2019 Q1	SFY 2019 Q2	SFY 2019 Q3	SFY 2019 Q4	SFY 2020 Q1	SFY 2020 Q2	SFY 2020 Q3	SFY 2020 Q4
Patients w/Ave daily MME GTE 100	6,695	6,302	5,813	5,497	5,270	5,186	4,875	4,778
All Patients receiving opioid RX	69,240	69,207	66,021	65,473	63,238	63,059	57,729	50,871

Figure 23 CDC Grant Metric

Controlled Prescription Drug Use in New Hampshire

Number of anti-anxiety prescriptions and patients

This data was requested by DHHS. DHHS selected the starting date of October 2019, which is the beginning of SFY 2020 quarter 2.
The chart shows the number of patients, prescriptions and days' supply for anti-anxiety, and insomnia medications.
The slide is included as a possible measure of any impact that COVID-19 may have had on controlled drug prescribing. The values have returned to pre-COVID levels. Also, September's values are very similar to the August values.
This data has been provided monthly to DHHS for their review and potential action.



	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20
Nbr RX	55,544	50,498	52,515	54,076	49,260	58,420	51,470	49,403	52,218
Nbr Patients	46,286	43,127	44,196	45,338	42,372	48,852	43,631	42,106	44,349

Sample Drug Name-All DEA Sch 4	
Generic Name	**Brand name**
Alprazolam	XANAX
Clonazepam	KLONOPIN
Diazepam	VALIUM
Lorazepam	ATIVAN
Zolpidem Tartrate	AMBIEN

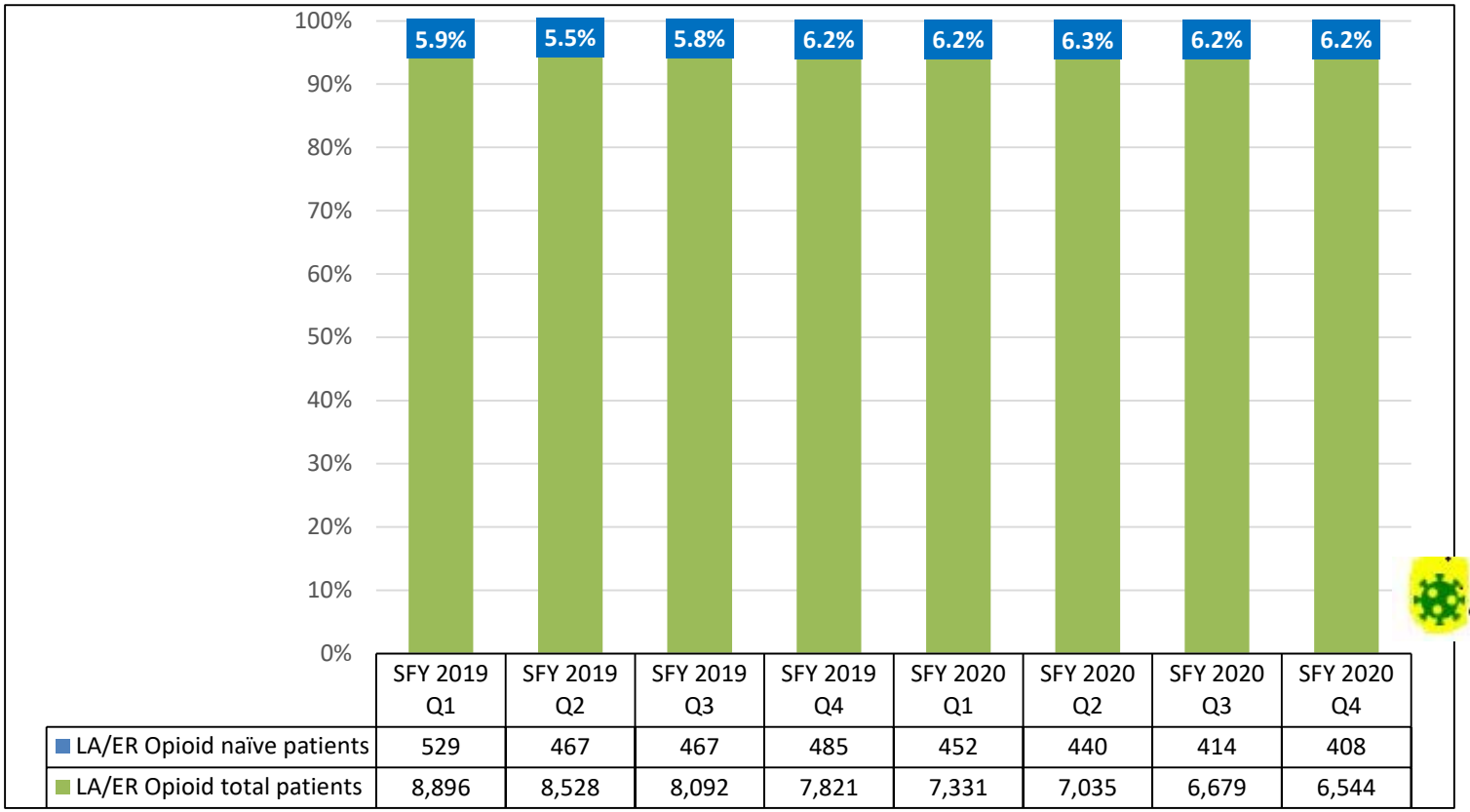
Note: This request came from DHHS. DHHS selected the starting date of October 2019, which is the beginning of SFY 2020 quarter 2.

Figure 23

Controlled Prescription Drug Use in New Hampshire

Number and percentage of opioid naïve patients prescribed long-acting/extended release opioids.

Opioid-naïve is defined as a patient who had not received an opioid prescription in the prior 90 days.



	SFY 2019 Q1	SFY 2019 Q2	SFY 2019 Q3	SFY 2019 Q4	SFY 2020 Q1	SFY 2020 Q2	SFY 2020 Q3	SFY 2020 Q4
LA/ER Opioid naïve patients	529	467	467	485	452	440	414	408
LA/ER Opioid total patients	8,896	8,528	8,092	7,821	7,331	7,035	6,679	6,544

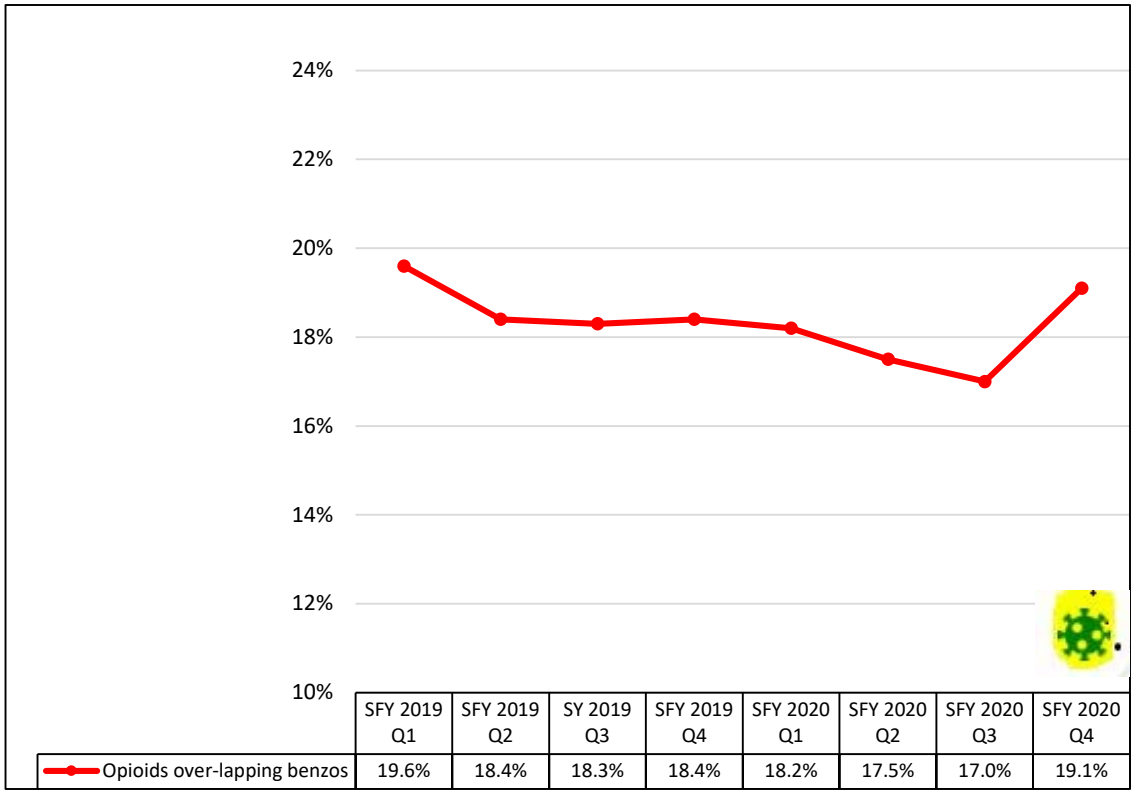
Figure 25

CDC Grant Metric

Controlled Prescription Drug Use in New Hampshire

Percentage of prescription opioid days that overlap with benzodiazepine prescription days.

PDMP monitors this measure because patients with concurrent prescription use of both drugs may be at more risk of harm.



	SFY 2019 Q1	SFY 2019 Q2	SY 2019 Q3	SFY 2019 Q4	SFY 2020 Q1	SFY 2020 Q2	SFY 2020 Q3	SFY 2020 Q4
Opioids over-lapping benzos	19.6%	18.4%	18.3%	18.4%	18.2%	17.5%	17.0%	19.1%

Sample Benzodiazepine Drug Names	
Generic Name	**Brand Name**
Alprazolam	XANAX
Clonazepam	KLONOPIN
Diazepam	VALIUM
Lorazepam	ATIVAN
Temazepam	TEMAZEPAM

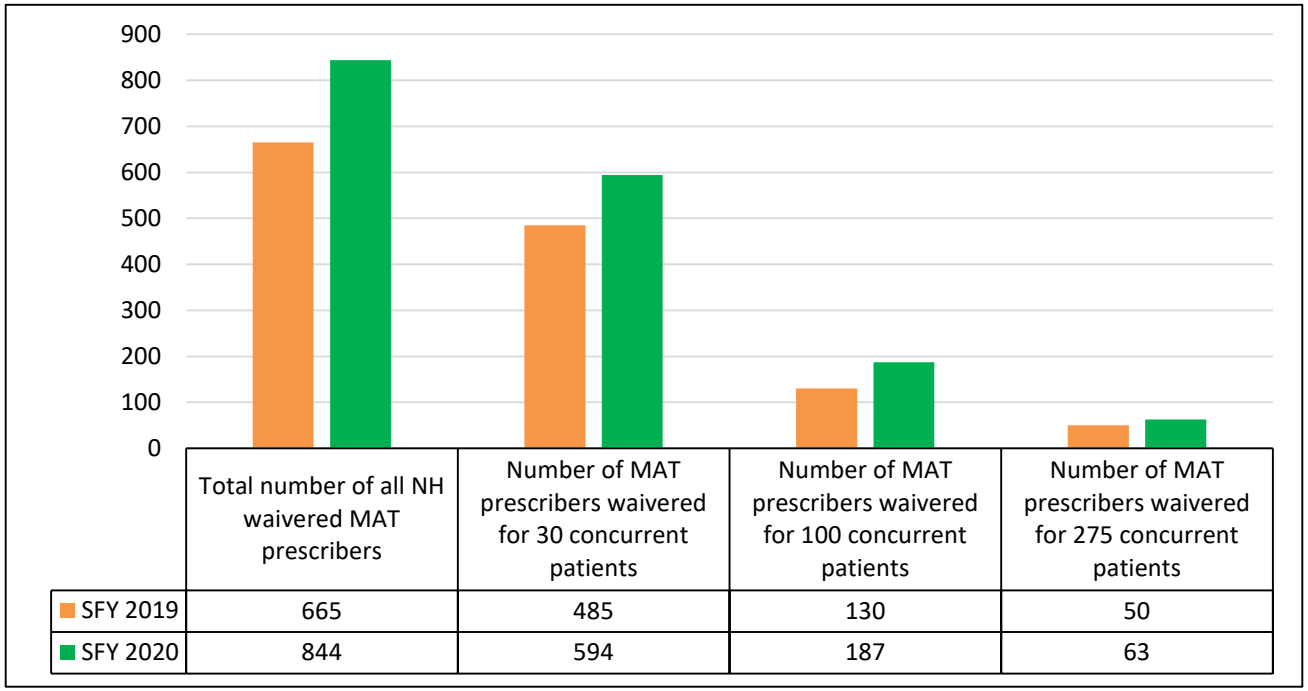
Figure 24

CDC Grant Metric

Medication-Assisted Treatment (MAT) in New Hampshire

MAT Prescriber Counts in New Hampshire by waiver categories

Information provided by the Substance Abuse and Mental Health Services Administration (SAMHSA). This chart shows the number of "waivered" MAT prescribers. Such prescribers require 8 hours of training, in order to apply to the Drug Enforcement Agency for a waiver to prescribe buprenorphine, one of three medications approved by the FDA for the treatment of opioid use disorder. Prescribers are limited to the number of concurrent MAT patients they can treat.



	Total number of all NH waivered MAT prescribers	Number of MAT prescribers waivered for 30 concurrent patients	Number of MAT prescribers waivered for 100 concurrent patients	Number of MAT prescribers waivered for 275 concurrent patients
SFY 2019	665	485	130	50
SFY 2020	844	594	187	63

Figure 27

Medication-Assisted Treatment (MAT) in New Hampshire

MAT prescriber data in New Hampshire

There are 844 New Hampshire waivered MAT prescribers on the SAMHSA waivered provider list as of March 2020. Of those 844 prescribers, 460 prescribers had prescriptions filled by New Hampshire patients (53%) in SFY 2020. In SFY 2019 there were 665 waivered prescribers, with only 402 having MAT prescriptions filled.

PDMP currently can only assess if the prescription is for MAT based on the drug name itself. MAT drugs are buprenorphine, buprenorphine hydrochloride and buprenorphine/naloxone combination. Buprenorphine could be used for pain; PDMP is unable to distinguish between prescriptions for pain and prescriptions for MAT. Buprenorphine represents 1.5% of all filled prescriptions in this time period.

Data based on SAMHSA waivered prescribers	SFY 2019	SFY 2020
Number of Patients	10,303	11,486
Number of Prescribers with filled prescriptions	402	460
Number of RX	141,229	158,370
Number of Days' Supply	1,915,621	2,289,252
Average Days per RX	13.6	14.4

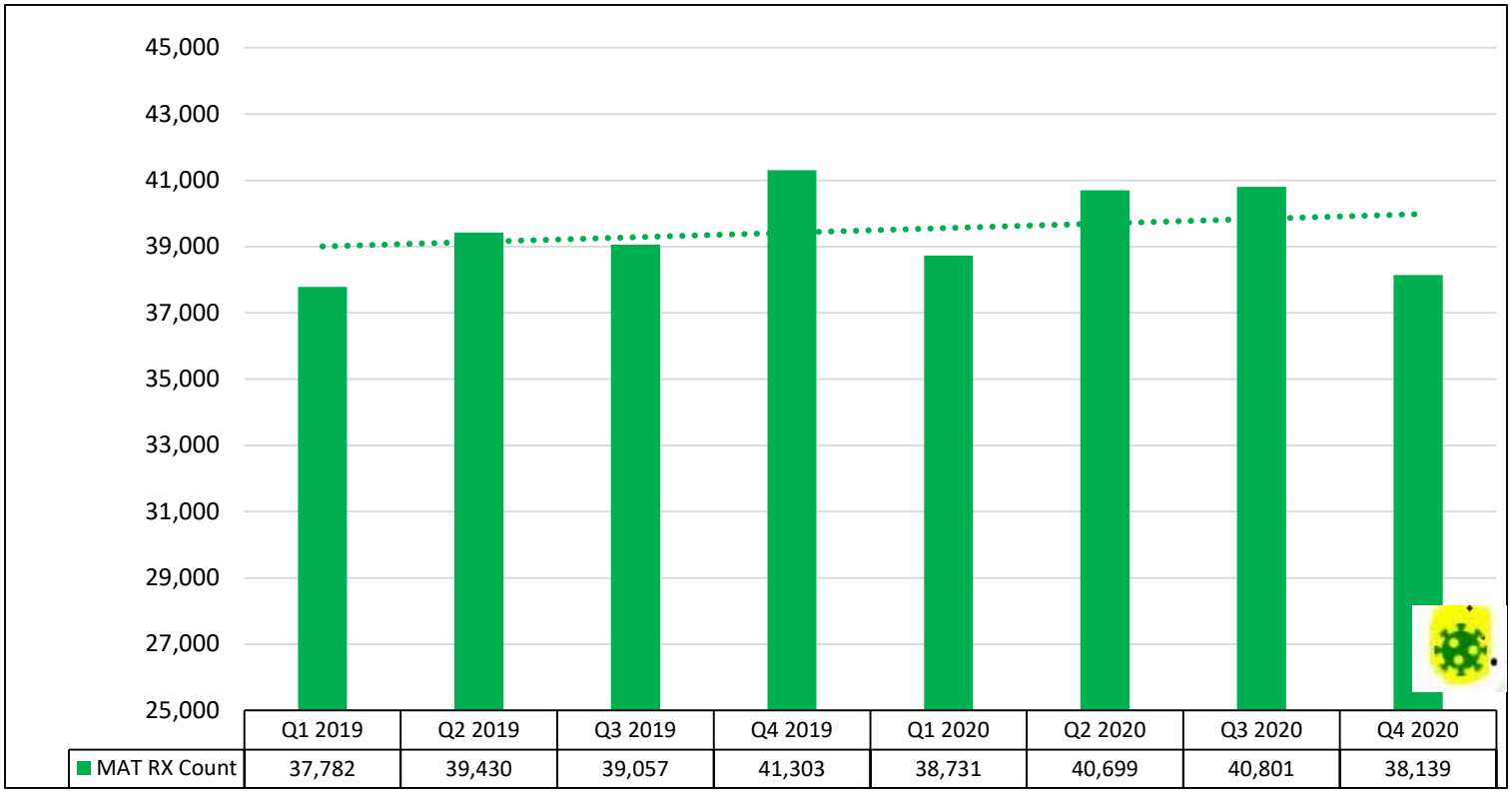
Figure 26

NOTE: SAMSHA waivered provider list provided quarterly by SAMHSA

Medication-Assisted Treatment (MAT) in New Hampshire

MAT Prescription Counts

MAT prescription counts are showing a slight upward trend. In a previous slide we showed there was an increase in the number of MAT Waivered prescribers in NH, which is likely a contributing factor. In addition, the state has increased addiction resources, such as the Doorways project. There are likely other contributing factors not considered here.



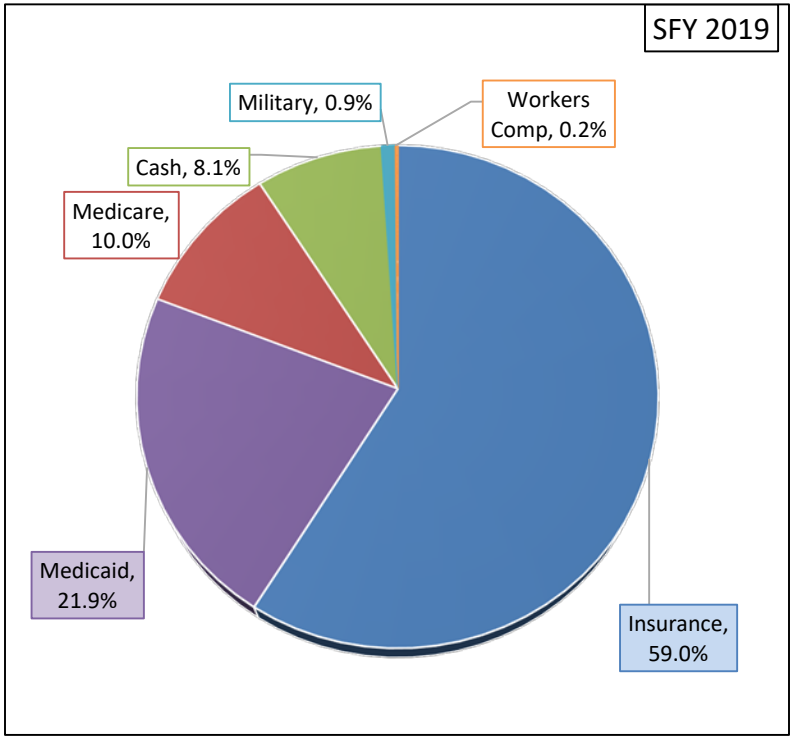
	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020
MAT RX Count	37,782	39,430	39,057	41,303	38,731	40,699	40,801	38,139

Figure 28

Medication Assisted Treatment

Payment Type: Medication-Assisted Treatment Prescriptions- SFY 2019 and SFY 2020

Percentages are calculated on prescription counts. The percent of MAT prescriptions which were paid by Medicaid increased. Commercial insurance shows a decline.



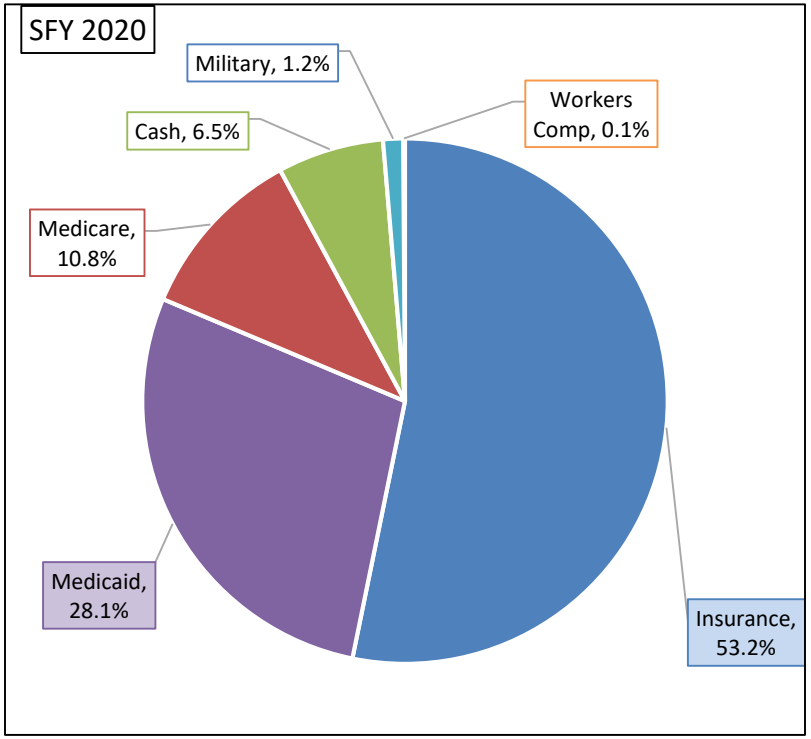


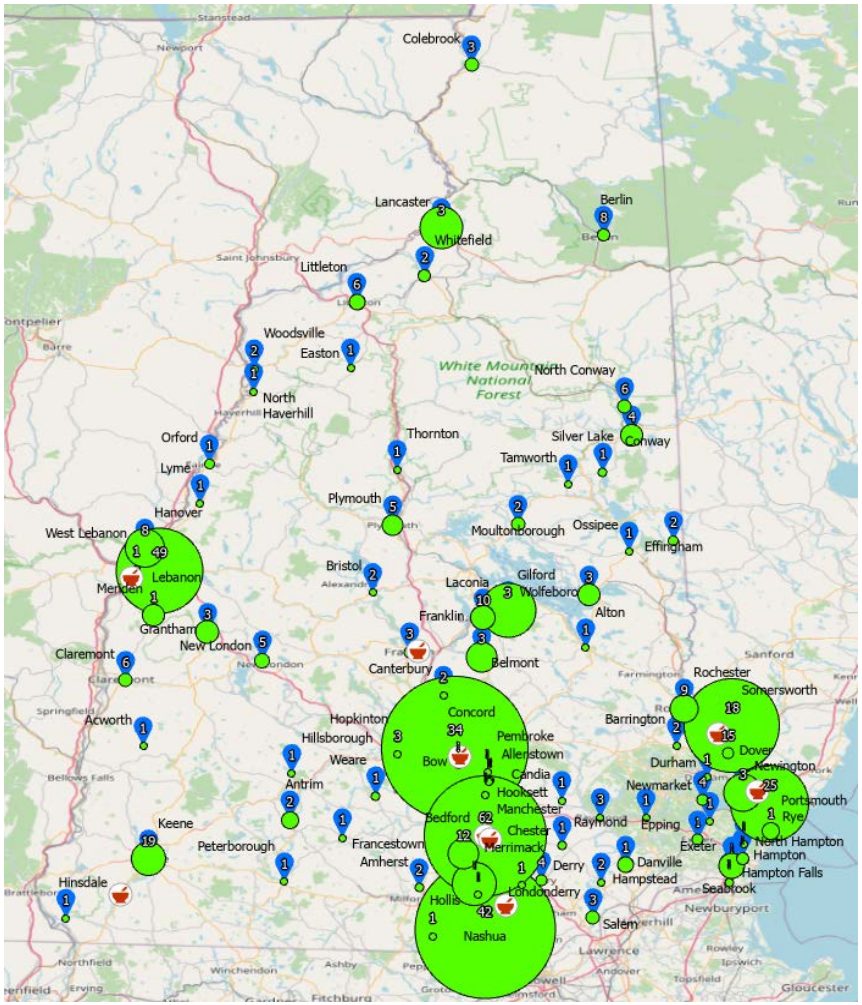
Figure 29

Medication-Assisted Treatment

Map of Waivered Prescribers and Number of Patients Per Prescriber

Blue teardrop indicate the number of MAT waivered prescribers *that had MAT prescriptions* in SFY 2020, showing the top ten prescriber towns by number of patients per prescriber.

Green circles indicate the relative magnitude of MAT prescription counts by town.



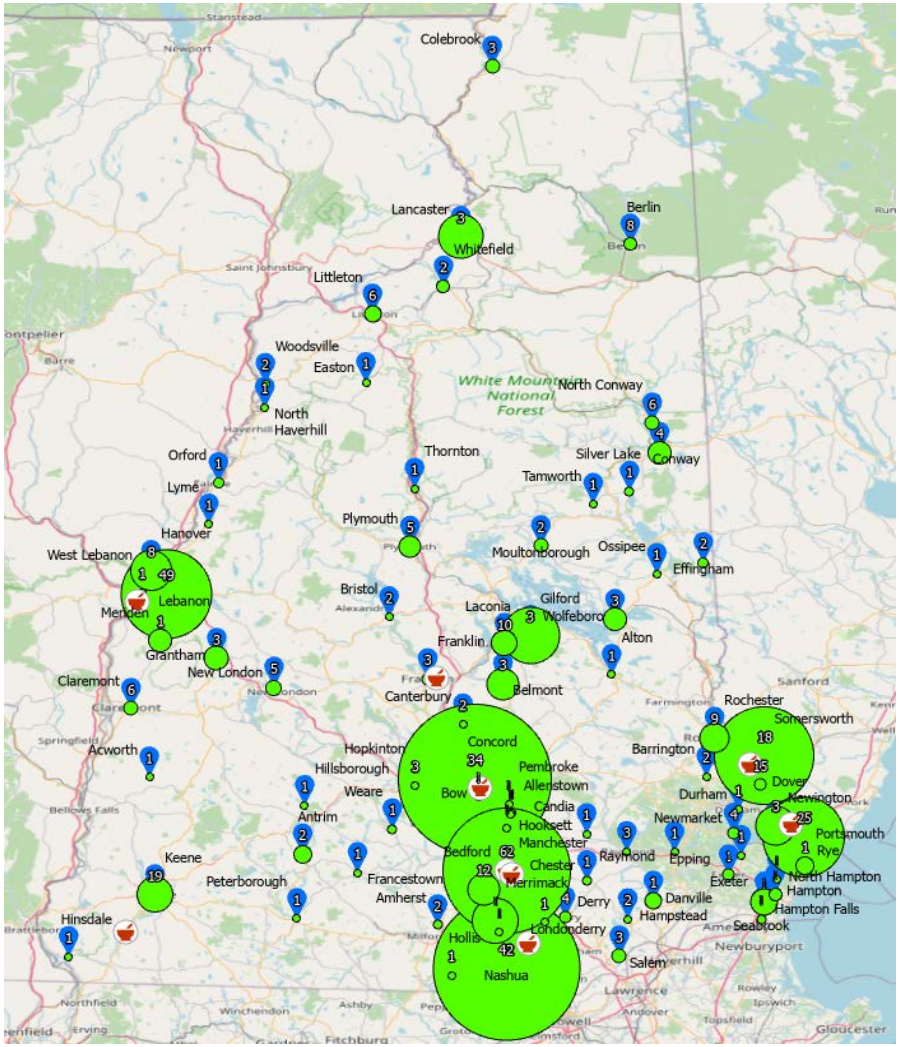
The **red** symbols indicate locations of outpatient treatment programs (OTP). The locations are: Concord, Franklin, Hudson, Manchester (2), Newington, Somersworth, Swanzey, West Lebanon.

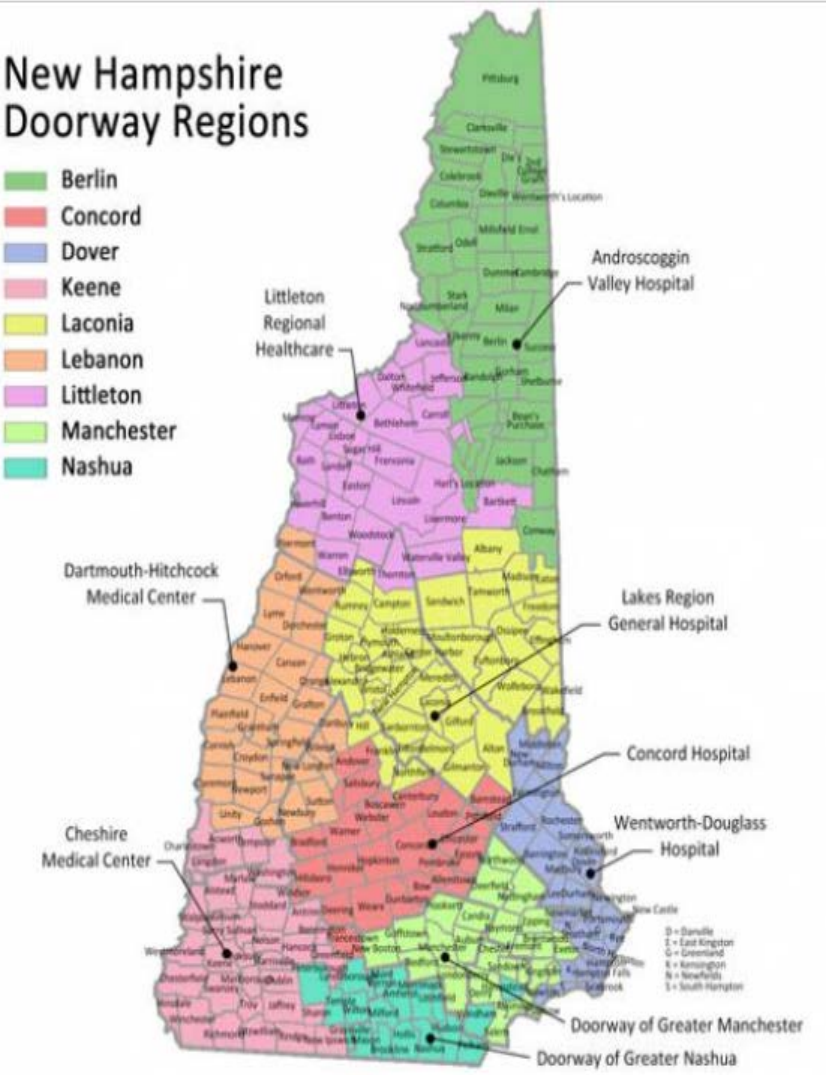
Top 10 patient towns by MAT RX	Average Number of Patients per MAT Prescriber	Number of distinct prescribers that had MAT RX
GILFORD	186	5
NEWINGTON	143	5
MERIDEN	109	2
HAMPTON FALLS	85	2
PELHAM	76	2
SOMERSWORTH	68	17
LANCASTER	67	5
BOW	64	3
WHITEFIELD	62	1
EFFINGHAM	61	4

The average number of patients per MAT prescriber statewide was 26.

Medication-Assisted Treatment

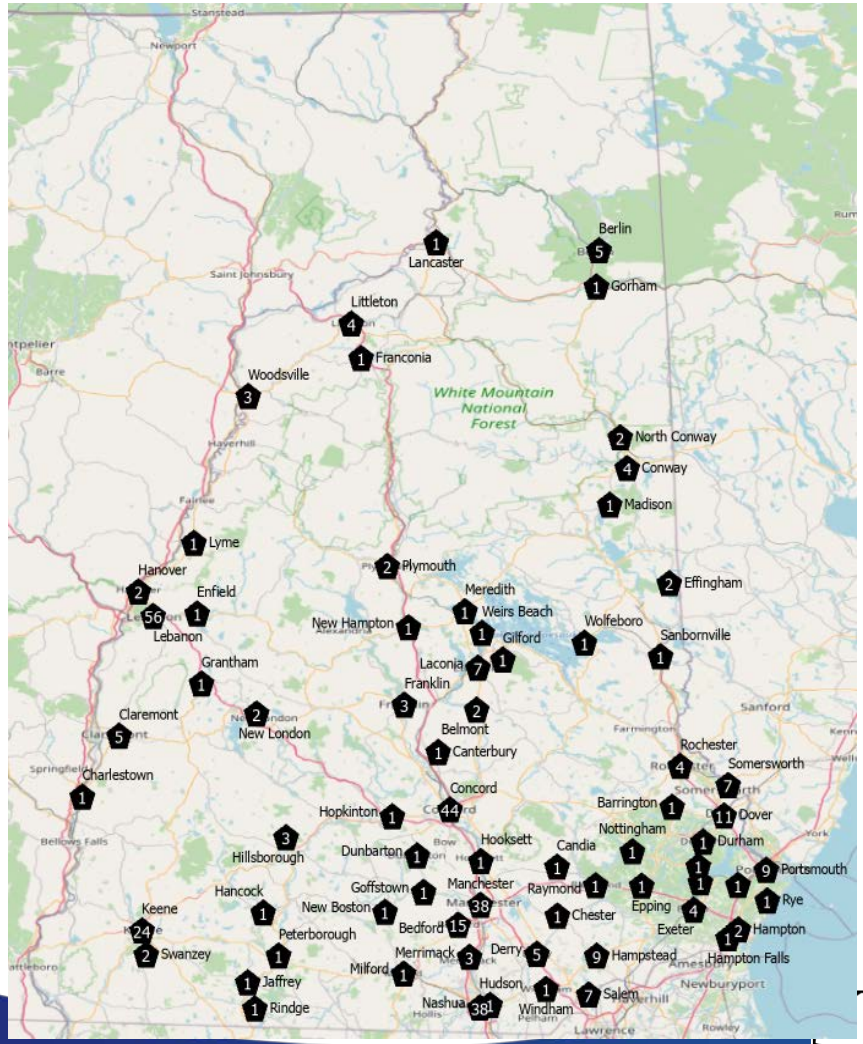
MAT prescription volume locations and Doorways project facilities.





Medication-Assisted Treatment (MAT): Access

According to SAMHSA, there are 850 MAT Waivered prescribers in NH. A little over half of them, 460, had at least one filled MAT prescription. The **black** pentagons indicate the number of MAT waivered prescribers by location who did not have any MAT prescriptions.



County	Total Number of MAT prescribers*	Number of MAT Prescribers with an MAT RX	% of MAT prescribers NOT active
BELKNAP	31	15	52%
CARROLL	30	24	20%
CHESHIRE	50	22	56%
COOS	23	17	25%
GRAFTON	155	79	49%
HILLSBOROUGH	241	129	46%
MERRIMACK	117	61	49%
ROCKINGHAM	103	62	40%
STRAFFORD	74	43	45%
SULLIVAN	17	8	53%
STATEWIDE	**850**	**460**	**47%**

* Source of MAT Waivered prescribers in NH is SAMHSA.

Data Requests

PDMP staff respond to data requests from a variety of sources. Several different entities are entitled to timely access to PDMP data: patients, healthcare regulatory boards, and law enforcement agencies (upon court order).

	SFY 2019	SFY 2020
Patient Requests	2	
Regulatory Boards	19	
Law Enforcement with court order	2	
Medical Examiner Office	1,177*	
Referrals/Letters of Concerns to Boards	9	
TOTAL	**1,209**	

*** Note: Medical Examiner Office gained direct access to query PDMP in July 2018**

Figure 30

ACKNOWLEDGMENTS

This publication was prepared by the NH Prescription Drug Monitoring Program, including:

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THANK YOU