

Report in Brief

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Why OIG Did This Review

According to the Centers for Disease Control and Prevention (CDC), opioids were involved in more than 42,000 deaths in 2016, and opioid deaths were 5 times higher in 2016 than in 1999. CDC has awarded funding to States to address the nonmedical use of prescription drugs and to address opioid overdoses. We are conducting a series of reviews of States that have received CDC funding to enhance their prescription drug monitoring programs (PDMPs). We selected Washington for review because it experienced a significant increase in the rate of drug overdose deaths during 2014 and 2015.

Our objectives were to (1) identify actions that Washington has taken, using Federal funds for improving PDMPs, to achieve program goals toward improving safe prescribing practices and preventing prescription drug abuse and misuse and (2) determine whether Washington complied with certain Federal requirements.

How OIG Did This Review

Our review covered actions that Washington has taken to enhance and maximize its PDMP and that it proposed for CDC's "Prescription Drug Overdose: Prevention for States" grant for March 1, 2016, through August 31, 2017. We examined Washington's status of completing 11 proposed activities and reviewed its documentation to determine whether Washington complied with certain Federal requirements.

Washington State Made Progress Toward Achieving Program Goals for Enhancing Its Prescription Drug Monitoring Program

What OIG Found

We identified actions that Washington has taken, using Federal funds for improving PDMPs, to achieve program goals toward improving safe prescribing practices and preventing prescription drug abuse and misuse. As of July 2018, Washington had completed some of the activities it proposed for the CDC grant to enhance and maximize its PDMP. Specifically, of the 11 activities proposed for the audit period, Washington had completed 6 activities, such as creating PDMP reports and implementing new prescribing metrics (e.g., statistics on patients with new and chronic opioid prescriptions); integrating PDMP data into healthcare systems' electronic health records; and implementing and updating PDMP rules (i.e., State PDMP regulations) to allow pharmacists to delegate access to the PDMP data, change the reporting of prescriptions dispensed from weekly to daily, and allow healthcare systems access to PDMP data.

Washington had partially completed the remaining five activities, such as conducting PDMP data linkage studies and using a mapping tool to identify "hotspots" (outlier geographical areas with respect to prescribing behavior and overdose deaths) and "treatment service deserts" (areas that have a high need for treatment services but have scarce resources). For these activities, Washington provided an estimated completion date for three activities and was unable to provide an estimated completion date for two activities. Washington said that if it is unable to complete these two activities by the end of the project period (August 31, 2019), it plans to use State funds to continue this effort.

Washington complied with Federal requirements for submitting its Federal Financial Report and Annual Performance Report and publicly reporting the five CDC-directed indicators (required for awardees using PDMPs for public health surveillance).

What OIG Recommends

This report contains no recommendations.