



## Legislative Fiscal Bureau

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Joint Committee on Finance

Paper #690

### **Prescription Drug Monitoring Program (Safety and Professional Services -- Regulation of Professions)**

[LFB 2023-25 Budget Summary: Page 556, #7]

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#### **CURRENT LAW**

Chapter 961 of the statutes directs the Controlled Substances Board to establish a program for monitoring the dispensing of prescription drugs. The prescription drug monitoring program (PDMP) was created under 2009 Wisconsin Act 362 and assists health care professionals in their prescribing and dispensing decisions by providing them with information about controlled substance prescriptions dispensed in the state. The Department of Safety and Professional Services (DSPS) funds operations of the program from its health and business credentialing fee program revenues (PR).

The primary purpose of the PDMP is to improve patient care and safety, and to reduce the abuse and diversion of prescription drugs, while ensuring patients with a legitimate medical need for the drugs are not adversely affected. The program's online database is typically referred to as the electronic Prescription Drug Monitoring Program (ePDMP). The site can be accessed online at [pdmp.wi.gov/statistics](http://pdmp.wi.gov/statistics). DSPS estimates that the online prescription drug monitoring database is used by approximately 70,000 registered users, including Wisconsin pharmacy staff, healthcare professionals, law enforcement agencies, and public health officials to prevent opioid abuse in the state.

#### **DISCUSSION POINTS**

1. Assembly Bill 43/Senate Bill 70 would provide \$253,800 in 2023-24 and \$861,400 beginning in 2024-25 in ongoing funding for software improvements, electronic health records integration, and recurring licensing costs for the state's ePDMP. Recent improvements to the ePDMP were made using funds from the federal Harold Rogers PDMP Grant Program, including: (a) \$1.9

million in 2019-20 for user security, mapping improvements, and other upgrades; (b) \$1.6 million in 2020-21 for health record integration to improve searches by system users, particularly for users lacking in service and for those treating patients in tribal, rural, or otherwise disadvantaged areas; and (c) \$1.4 million in 2021-22 for improving self-service functions for users of the system. However, the Department notes that the Harold Rogers PDMP Grant Program does not pay for ongoing system maintenance, so state funds are required for maintenance to occur. DSPS started paying for ongoing operational costs for this system in January of 2023.

2. DSPS states that funding of \$253,800 in 2023-24 and \$261,400 in 2024-25 would be utilized for quality assurances activities in the online PDMP system. This cost is specified under current contract with NIC, a private technology company that provides multi-factor authentication system management to several state governments, including Wisconsin. DSPS reports that the PDMP system has experienced issues related to matching dispensing records to patient profiles. Funding in each year would support the continued contract with NIC to correct and monitor these issues.

3. DSPS reports that funding of \$600,000 in 2024-25 would be used for additional quality assurance activities and data analytics related to electronic health records integration and distribution. DSPS reports that the cost for electronic health records management and distribution under ePDMP is \$50,000 monthly, or \$600,000 annually. State accounting records indicate these payments in 2022-23 have been made mostly from federal funding, but DSPS states that federal funds used to complete this work will expire prior to 2024-25. DSPS staff indicate the Department continues to seek grant funding for program improvements.

4. Funding would be provided from the DSPS general program operations PR appropriation for the Medical Examining Board and the Controlled Substances Board's operation of the PDMP, which derives revenues from credentialing and licensing activities for health and medical professions. The appropriation had an available balance of \$5.7 million on July 1, 2022.

5. Given the PDMP improvements being pursued, the Committee could approve all funding [Alternative 1]. As DSPS pursues additional grant funding for program improvements, the Committee could also specify that the funding for the biennium is on a one-time basis [Alternative 2]. This would allow the Department funding to meet current anticipated or contracted program costs, but allow the Committee to evaluate additional base funding at a later time. The Committee could also take no action [Alternative 3].

## ALTERNATIVES

1. Provide \$253,800 in 2023-24 and \$861,400 in 2024-25 in ongoing funding for software improvements, electronic health records integration, and recurring licensing costs for the state's electronic Prescription Drug Monitoring Program (ePDMP).

ALT 1	Change to Base
PR	\$1,115,200

2. Specify that the funding is one-time.
3. Take no action.

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