Providers Perception of the Colorado PDMP

Study Title: Assessing the Impact of an Automatic, Electronic Drug Monitoring Program on Opioid Prescribing and Physician Behaviors

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This survey is designed to understand primary care provider's use of the Colorado Prescription Drug Monitoring Program (PDMP) their clinical practice. You are being asked to take this survey because of your role as a primary care provider at a Denver Health Clinic. We want to hear from you about what does and doesn't work in your clinical practice when it comes to prescribing opioids and benzodiazepines in your practice. You may receive a follow up survey in about five months. Please take the follow up survey as well.nPossible discomforts or risks are limited and include the time it takes to complete a survey. There may be risks the researchers have not thought of.nEvery effort will be made to protect your privacy and confidentiality. We will aggregate survey responses and will not publish or reveal any personal identifiable information.

This research is unfunded. Participating in the survey is voluntary.You may have questions about your rights as someone in this study. If you have questions, you can call the COMIRB (the responsible Institutional Review Board) at (303) 724-1055.

Thank you for your time in completing this survey.

Josh Blum and Susan Calcaterra

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1) **Did you known that Colorado has a state wide prescription drug monitoring program (PDMP)?**
   * must provide value

   ○ Yes
   ○ No

   reset

2) **Do you feel that the PDMP is useful in your clinical practice?**
   * must provide value

   ○ 1) Not at all useful
   ○ 2) A little useful
   ○ 3) Moderately useful
   ○ 4) Very useful
   ○ 5) I do not use the PDMP in my clinical practice

   reset

3) **Do you feel that the PDMP is easy to use?**
   * must provide value

   ○ 1) Very easy
   ○ 2) Somewhat easy
   ○ 3) Somewhat difficult
   ○ 4) Very difficult
   ○ 5) I do not use the PDMP in my clinical practice

   reset

4) What barriers do you perceive as limiting your use of a PDMP? (okay to select more than one)

must provide value

- ☐ 1) Difficult to log on
- ☐ 2) Website is difficult to navigate
- ☐ 3) Support for website (such as password recovery and registration is inadequate)
- ☐ 4) Lack of training on how to access, use or interpret data from the PDMP
- ☐ 5) I am not able to designate someone to access the system of my behalf
- ☐ 6) The information in the PDMP is too difficult to interpret or lacks important detail
- ☐ 7) The information is inaccurate
- ☐ 8) I don't have many patients that need controlled substance prescriptions
- ☐ 9) I am uncomfortable confronting a patient when the results of a PDMP search contradict what the patient tells me
- ☐ 10) The formatting of patient and prescriber information is a barrier to use
- ☐ 11) I am uncomfortable using the computer or Internet to conduct the search
- ☐ 12) Other
- ☐ 13) I do not use the PDMP in my clinical practice

5) What would make the PDMP more useful to you in clinical practice? (okay to check more than one)

must provide value

- ☐ 1) Training
- ☐ 2) Faster entry and display of prescription in databases (currently 24 hour lag)
- ☐ 3) Unique patient identifiers to avoid mistaken identity or aliases
- ☐ 4) Linking Colorado PDMP to other state systems (such as Wyoming, Utah, Kansas, Texas, etc)
- ☐ 5) Other
- ☐ 6) I do not use the PDMP in my clinical practice

6) What types of PDMP training would be most helpful? (okay to select more than one)

must provide value

- ☐ 1) Responding to PDMP information
- ☐ 2) Detecting substance abuse or diversion
- ☐ 3) Treatment alternatives
- ☐ 4) Non-confrontational communication of findings
- ☐ 5) Chronic pain management
- ☐ 6) Data interpretation
- ☐ 7) System troubleshooting
- ☐ 8) I don't want more training, I would prefer the PDMP is intuitive and user friendly
- ☐ 9) I do not use the PDMP in my clinical practice

7) Do you have non physician staff who retrieves PDMP data?

must provide value

- ○ 1) Yes
- ○ 2) No
- ○ 3) I do not know

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8) If you have non physician staff who retrieves PDMP data, how many staff members are available to retrieve the data?

must provide value

- ○ 1) One
- ○ 2) Two
- ○ 3) Three
- ○ 4) Four
- ○ 5) Five
- ○ 6) >5
- ○ 7) We do not have non physician staff who retrieve PDMP data, I retrieve the data myself.

reset

9) **Do you utilize a third party web-based application to access the PDMP? (Examples include: OpiSafe or Narx Care)**

* must provide value

- ○ Yes
- ○ No

reset

10) **When do you usually access the PDMP? (okay to select more than one)**

* must provide value

- ☐ 1) When I see a patient for the first time
- ☐ 2) When I suspect diversion, addiction or abuse
- ☐ 3) At every patient visit when I prescribe an opioid
- ☐ 4) At every patient visit when I prescribe a benzodiazepine
- ☐ 5) When a patient requests an early refill of a controlled medication
- ☐ 6) At every patient encounter when my patient is on chronic opioid therapy
- ☐ 7) At every patient encounter regardless of their medication list
- ☐ 8) I never check the PDMP
- ☐ 9) Other

11) **How frequently do you use the PDMP on patients who you think are HIGH RISK of diverting or abusing their medications?**

* must provide value

- ○ 1) Never
- ○ 2) Rarely
- ○ 3) Sometimes
- ○ 4) Often
- ○ 5) Every time

reset

12) **How frequently do you use the PDMP on patients who you think are LOW RISK of diverting or abusing their medications?**

* must provide value

- ○ 1) Never
- ○ 2) Rarely
- ○ 3) Sometimes
- ○ 4) Often
- ○ 5) Every time

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13) **Are you aware of the 2016 CDC recommendations to check the PDMP when starting opioids for chronic pain and then periodically thereafter ranging from every opioid prescription to every 3 months?**

* must provide value

- ○ Yes
- ○ No

reset

14) **What do you do when a PDMP report suggests potential diversion or misuse? (select all that apply)**

* must provide value

- ☐ 1) Discuss the concern with the patient
- ☐ 2) Prescribe alternative therapies
- ☐ 3) Refer the patient to a specialist (addiction, pain or otherwise)
- ☐ 4) Discharge the patient from my practice
- ☐ 5) Require the patient to enter into a medication contract
- ☐ 6) Consult with a pharmacist
- ☐ 7) Take no action
- ☐ 8) Stop prescribing all opioids
- ☐ 9) None the above

15) **Do you feel that the law enforcement, your professional licensing board, or work administration is scrutinizing your prescribing behavior?**

* must provide value

- ○ Yes
- ○ No

reset

16) **Do you worry about the medico legal ramifications of opioid or benzodiazepine prescribing?**

- ○ 1) Not at all
- ○ 2) Rarely
- ○ 3) Somewhat
- ○ 4) A lot

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17) **Do you think that the PDMP has changed your prescribing practices to be MORE cautious or hesitant to prescribe opioids or benzodiazepines?**
* must provide value

- ○ 1) Yes
- ○ 2) No
- ○ 3) Unsure

reset

18) **Do you think that the PDMP has changed your prescribing practices to be LESS cautious or hesitant to prescribe opioids or benzodiazepines?**
* must provide value

- ○ 1) Yes
- ○ 2) No
- ○ 3) Unsure

reset

19) **What gender do you identify with?**
* must provide value

- ○ 1) Male
- ○ 2) Female
- ○ 3) Unspecified

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20) **How many years have you been in practice?**
* must provide value

- ○ 1) <1 year
- ○ 2) 1-5
- ○ 3) 6-10
- ○ 4) 11-20
- ○ 5) >20

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21) **What is your primary role?**
* must provide value

- ○ 1) Physician (MD or DO)
- ○ 2) Nurse Practitioner
- ○ 3) Physician Assistant
- ○ 4) Other

reset

22) **Are you licensed to prescribe Suboxone in your practice?**
* must provide value

- ○ Yes
- ○ No

reset

23) **If you are licensed to prescribe Suboxone, on average, how many patients are you prescribing Suboxone to at any given time?**

- ○ I am not licensed to prescribe Suboxone
- ○ < 10
- ○ 11-20
- ○ 21-30
- ○ 31-40
- ○ 41-50
- ○ >50

reset

24) **How many clinic sessions do you have per month?**
* must provide value

- ○ 1) 1-5
- ○ 2) 6-10
- ○ 3) 11-20
- ○ 4) 21-40
- ○ 5) >40

reset

25) **On average, how many patients do you see per clinic session? (half day session)**
* must provide value

- ○ 1) 1-5
- ○ 2) 6-10
- ○ 3) 11-20
- ○ 4) >20

reset

26) **As members of the Colorado Department of Public Health and Environment continue to evaluate and improve the PDMP, they may conduct focus groups or additional surveys. Would you allow them to contact you for your future participation?**

○ Yes
○ No

reset

* must provide value

Submit

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