

HB4150: Leveraging EDIE and PDMP to inform providers of non-fatal and fatal overdose events

Problem:

Drug overdoses are rising rapidly, generating more than 10,000 hospital emergency department visits in 2022. Even more alarming, overdose deaths – from both prescribed and street drugs – more than doubled from 2018 to 2022. While risky controlled substance (narcotic) prescribing has declined as more prescribers adopt best practices, a recent OHA analysis showed that 45% of patients who had a fatal overdose received a controlled prescription in the year prior to their death.¹

A prescriber may have no idea that their patient suffered an overdose.

Solution:

Close the information loop by leveraging Oregon’s successful Prescription Drug Management Program, which for years has tracked narcotic prescriptions and has been used by the majority of hospital emergency departments through the Emergency Department Information Exchange (EDIE).

Data suggests when providers are aware of high-risk prescribing and/or an overdose to one of their patients, they take actionable steps and change prescribing practices and/or support patients in accessing SUD treatment and harm reduction services.

The PDMP, under its strict statutory sideboards, currently integrates minimally necessary information on narcotics prescribed to patients with EDIE, but it is not allowed to use *prescriber* information to inform other prescribers of subsequent events like overdoses. *We need a narrow statutory fix to allow EDIE to use PDMP prescriber information to send a secure, encrypted notice to a prescriber when one of their patients suffers an overdose.*

Who would send these notices? EDIE (also known as the Collective Platform) is a secure, statewide care coordination data system that is a long-standing public-private collaboration between the state’s health care industry and the Oregon Health Authority. All of Oregon’s CCOs receive hospital notifications through the Collective Platform, as do most Oregon health plans, hundreds of primary care and behavioral health clinics, several tribal clinics, and all of Oregon’s Dental Care Organizations. The Collective Platform enables a wide range of care coordination activities, such as arranging care following a hospitalization.

¹ Linking the State SUDORS and PDMP Data in Oregon: Examining Additional Information during the year Prior to a Fatal Overdose Event. Oregon Health Authority, CSTE 2023 Annual Conference.

LC146 adds to the PDMP statute language to enable, not mandate, such secure notices. The notice data could not be used by health licensing boards for disciplinary purposes.

A statewide notification program would:

- **Reduce** the number of initial and recurring overdoses in Oregonians.
- **Reduce** the number of fatal and non-fatal overdoses in Oregonians.
- **Provide an avenue** for providers and patients to have conversations around opioid and other substance use.
- **Increased visibility** of safe prescribing measures.
- **Provide guidance and resources for providers** to effectively support patients following a non-fatal overdose.

The development of this overdose notification program is supported by the providers and substance use disorder (SUD) experts on OHLC's Best Practice Committee and SUD Workgroup.

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