

Pill Mills and Pain Management: Legislation and Enforcement

Charlie Cichon

NADDI Executive Director

- Baltimore City Police Department
- Maryland State Board of Physicians
- Eli Lilly – Brand Protection, The Americas
- National Precursor Log Exchange (NPLEx)
Program Administrator
- Consultant - RxChallenges

Prescription Drug Abuse: Strategies to Stop the Epidemic

- **Washington, D.C. October 7, 2013** - Maine has the 14th lowest drug overdose mortality rate in the United States, with 10.4 per 100,000 people suffering drug overdose fatalities, according to a new report, *Prescription Drug Abuse: Strategies to Stop the Epidemic* - Trust for America's Health (TFAH)
- The number of drug overdose deaths - a majority of which are from prescription drugs - in Maine increased by 96 percent since 1999 when the rate was 5.3 per 100,000. Nationally, rates have doubled in 29 states since 1999, quadrupled in four of these states and tripled in 10 more.

Pill Mills

- A pill mill is a doctor's office, clinic, or healthcare facility that routinely conspires in the prescribing and/or dispensing of controlled substances outside the scope of the prevailing standards of medical practice in the community and/or violates the laws regarding the prescribing or dispensing of controlled prescription drugs – Florida Office of the Attorney General

Florida Pill Mills

- 2009 – Florida distributed a half-billion doses of oxycodone, twice the nearest state
- Florida oxycodone deaths increased from 496 in 2006 to over 1500 in 2010 (FL Medical Examiner)
- 2006 -2010 in Palm Beach County there were between 200-300 storefront Pills Mills

“Pill Mill Tip Offs”

- Nontraditional Medical Office Location
- No Insurance Accepted
- Security Guard at Front Door
- Numerous Out-of-State License Plates in Parking Lot
- Parking Lot Loitering/Tailgating
- Long Lines Inside and Outside
- Lack of Medical Equipment
- Treatment Options Limited to Pills Only
- Affiliations with Specific Pharmacies
- Recent Business Name Changes

How Florida Brothers 'Pill Mill' Operation Fueled the Epidemic

- The prescription painkiller business was booming in 2009, making millionaires of Chris and Jeff George, twin brothers who operated several pain clinics in South Florida. Unfortunately for them, their customers had a tendency to die, and not always in a subtle fashion.

“Pill Mill Tip Offs”

1. Nontraditional Medical Office Location

“Mobile MRI Unit parked behind a West Palm Beach strip club.”

“Pill Mill Tip Offs”

2. No Insurance Accepted

“American Pain” clinic in Boca Raton was the biggest single clinic in the country, a Super-WalMart of addiction. The 5 most generous script-writing doctors saw 500 patients per day and, at up to \$100 per patient, earned nearly \$2 million a year.

“Pill Mill Tip Offs”

3. Security Guard at Front Door

“Security workers cruised the clinic grounds in golf carts, steering customers to the clinic door and punishing those inclined to loiter... an enforcer delivered beatings to patrons who did anything to attract police.”

“Pill Mill Tip Offs”

4. Numerous Out-of-State License Plates in Parking Lot

“For drug dealers in states like KY and TN, the 1000-mile trek to South Florida paid for itself, it became common to fill an van with people willing to pose as patients with chronic pain.

“Pill Mill Tip Offs”

5. Parking Lot Loitering/Tailgating

“The parking lot and surrounding streets were lined with cars bearing plates from KY and TN, hotbeds for painkiller abuse. To make it less conspicuous, the clinic instructed patrons to park in lots several blocks away, where they would be picked up by a shuttle van and delivered to the clinic’s front door.”

“Pill Mill Tip Offs”

6. Long Lines Inside and Outside

“It was common to see 30 patrons in a queue before American Pain opened at 7a.m.”

“Pill Mill Tip Offs”

7. Lack of Medical Equipment

“American Pain clinic doctors devoted an average of 3 minutes to each patient, ignoring the results of the MRIs, failing to inquire about the patient’s medical history and neglecting to ask questions necessary to make an objective diagnosis.”

“Pill Mill Tip Offs”

8. Treatment Options Limited to Pills Only

One of the “fastest-moving” physicians stated, “These hillbillies don’t give a s--- about their health. Powerful painkillers, he added, are “all they’re here for.” (This physician was sentenced to 6 years in prison)

“Pill Mill Tip Offs”

9. Affiliations with Specific Pharmacies

Customers were guided to pharmacies controlled by the clinic’s family but more drugs were dispensed at the clinic. The clinic owner’s wife dispensed the drugs, her previous job – dancing at a strip club.

“Pill Mill Tip Offs”

10. Recent Business Name Changes

South Florida Pain Center

East Coast Pain

American Pain

20 Million Pills in Three Years

- Chris George – 17 and half years in prison
- Jeff George – 15 and one half years in prison
- Derek Nolan – 14 years in prison
- William Overstreet, MD – died in Panama
- Patrick Graham, MD – 4 years in prison
- Michael Aruta, MD – 6 years in prison

State Legislative Update

- Physicians and other health care professionals have encountered a relatively new type of state legislation in the past few years that affects the way they prescribe painkillers. This legislation has emerged in response to the growing epidemic of misuse and overprescribing of painkillers and the rising costs associated with overdoses and pill mills.
(American College of Surgeons April 2013)

State Legislative Update

- This epidemic affects nearly every state in the U.S., which is why policymakers, medical associations, and government agencies, such as the medical boards, have joined the fight to combat this elusive issue on both the legislative and regulatory fronts.

Government Efforts

- Federal agencies have found that most prescription drugs enter the illegal market primarily through “doctor shoppers,” meaning people known to seek out and take advantage of physicians who inappropriately prescribe and pharmacists who improperly dispense medications.
- Prescription Monitoring Programs

Other State Legislative Efforts

- Florida - The law requires physicians to register with the Florida Department of Health and to write prescriptions on counterfeit-proof paper. Physicians who overprescribe face a minimum fine of \$10,000 and suspension of their license for six months. The law also bans physicians from on-site dispensing of the more commonly abused drugs, such as oxycodone and hydrocodone.

Other State Legislative Efforts

- Ohio - The law mandates licensure of pain management clinics, authorizes the state medical board to establish rules on when a physician should review the state prescription reporting database, severely restricts in-office dispensation of controlled substances, and establishes a Medicaid pharmacy lock-in program and prescription drug take-back program.

Other State Legislative Efforts

- Kentucky - Imposes requirements not just for physicians practicing pain medicine, but for all practitioners who prescribe controlled substances. The bill places significant limits on who may own a pain clinic and how a pain clinic is operated, such as requiring a licensed physician to be present at the facility at least 50 percent of the time that patients are being seen.

Other State Legislative Efforts

- Washington State - specifies that rules affecting physicians and nonphysician prescribers offer specific instructions on how to evaluate and care for patients with chronic pain that is not due to cancer. It also requires written treatment plans, known as patient contracts, that may mandate periodic urine screenings.

Alternatives

- Federation of State Medical Boards – model policy
- Acknowledging the inadequate management of pain and barriers to appropriate treatment
- Emphasizing the dual obligation of government to develop a system that prevents abuse, trafficking, and diversion of controlled substances while ensuring their availability for legitimate medical purposes
- Revising definitions of addiction, chronic pain, and physical dependence to reflect current consensus and expertise in the medical community
- Updating criteria for evaluating the appropriate management of pain

“The Reality”

- Although new legislation and awareness is critical in reducing the illegitimate prescribing of opioids, the landscape of treating chronic pain patients with opioids has changed. As a result, physicians have a difficult balancing act when it comes to treating patients with chronic pain.
- Legitimate prescribers must find the appropriate balance between ensuring optimal patient care while minimizing abuse and diversion.

Prescription Drug Abuse: Strategies to Stop the Epidemic

- "Fifty Americans die a day from prescription drug overdoses, and more than 6 million suffer from prescription drug abuse disorders. This is a very real epidemic - and warrants a strong public health response," said Andrea Gielen, ScD, Director of the Johns Hopkins Center for Injury Research and Policy. "We must use the best lessons we know from other public health and injury prevention success stories to work in partnership with clinical care, law enforcement, the business community, community-based organizations, and other partners to work together to curb this crisis."

Thank You!

- Questions?