



# MA Prescription Monitoring Program County-Level Data Measures (Calendar Year 2021 Quarter 4 and 2022 Quarter 1)

*Massachusetts Department of Public Health, Bureau of Health Professions Licensure, April 2022*

The Department of Public Health's (DPH) Prescription Drug Monitoring Program (PMP) serves as a repository of data for all prescription drugs dispensed statewide, including those prescriptions that are sought after for illicit and non-medical use and thus represent the highest potential for abuse (federal Schedules II – V, including certain narcotics, stimulants and sedatives). The PMP also enables prescribers and dispensers to access a patient's prescription history and can be used as a clinical decision-making tool, allowing the provider to have a holistic view of the patient's medications.

When interpreting PMP county-level data, it is important to emphasize that increases or decreases in a single measure may not indicate an increase or decrease in prescription misuse or abuse. Put simply, use does not always equate to abuse. There are many factors that might explain an unusually high rate of prescribing in a given area. For instance, an area which contains a large number of residents in long-term care facilities may result in a high rate of opioid prescribing.

These datasets inform critical discussions about opioid prescribing, provide an important baseline to better inform future policy decisions and allow the state and stakeholders to more meaningfully measure whether policy initiatives are effective.

Effective October 6, 2014, all hydrocodone combination drug (HCD) products (e.g., Vicodin) were reclassified from Schedule III to Schedule II. This reclassification during the last quarter of 2014 makes comparisons over time difficult to interpret. Beginning with CY 2015 data, reports of Schedule II products will include all HCD prescriptions.

Individuals with activity of concern "thresholds" for this report are based on a 3-month time period. MDPH has previously released annual county-level reports that provide thresholds based on a 12-month time period. Although the numbers (or rates) generated may appear to be comparable, they represent different time periods and are **NOT** an apples-to-apples comparison. The results are only comparable when the thresholds (e.g., 4 different providers and 4 different pharmacies), time interval (e.g. over a three-month period), and drug products analyzed (e.g. Schedule II opioids) are the same. Meaning, the total number (or rates) of individuals who received Schedule II-V opioid prescriptions from 4 or more providers and had them filled at 4 or more pharmacies in a 3-month period cannot and should not be compared with the total number of individuals (or rates) who received Schedule II-V opioid prescriptions from 4 or more providers and had them filled at 4 or more pharmacies in a 12-month period.

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MA Prescription Monitoring Program: October – December 2021 and January – March 2022

**October - December 2021 (Quarter 4)**

<b>County</b> (County classifications are by patient zip code; patient state must also = MA)	<b>Census Population*</b>	<b>Total Schedule II Opioid Prescriptions</b>	<b>Total Number of Schedule II Opioid Solid Dosage Units</b>	<b>Individuals Receiving Schedule II Opioid Prescription</b>	<b>% of Individuals Receiving Schedule II Opioid Prescription (of total population)</b>	<b>Individuals with Activity of Concern</b>	<b>Rate of Individuals with Activity of Concern (per 1,000)</b>
Barnstable	216,629	20,707	994,615	8,993	4.2	<5	NA
Berkshire	126,398	11,304	566,275	4,940	3.9	<5	NA
Bristol	571,424	53,486	3,213,627	21,451	3.8	<5	NA
Dukes	17,404	1,272	61,787	595	3.4	0	0
Essex	796,916	54,532	2,670,753	25,458	3.2	11	0.4
Franklin	71,169	6,908	403,967	2,807	3.9	0	0
Hampden	470,869	41,122	2,258,235	18,086	3.8	9	0.5
Hampshire	163,997	13,090	764,508	5,377	3.3	6	1.1
Middlesex	1,626,553	78,908	3,784,595	39,924	2.5	20	0.5
Nantucket	11,416	672	32,322	336	2.9	0	0
Norfolk	715,271	41,398	2,137,501	19,523	2.7	26	1.3
Plymouth	527,689	40,506	2,224,696	18,285	3.5	14	0.8
Suffolk	809,594	36,588	2,022,641	16,993	2.1	11	0.6
Worcester	839,053	61,375	3,514,808	27,093	3.2	21	0.8
MA	6,964,382	461,868	24,650,329	210,841	3.0	118	0.6

Note 1: Individuals with activity of concern "thresholds" for this report are based ONLY on a 3-month time period; see notes on previous page; CY2021-Q4

Note 2: Counts greater than 0 but less than 5 are not reported. Rates based on these small values also are not reported (NR).

Note 3: Rates of individuals with activity of concern are based on the population of individuals who have received one or more Schedule II opioid prescriptions during the specified time period.

Note 4: Totals for all counties combined exclude a small number of prescription records that could not be assigned a county due to inaccurate zip code/city town information reported to the program.

Note 5: The total sum for the "Number of Individuals Receiving Schedule II Opioid Prescription" will be slightly different than the sum presented for the state in Figure 2 due to a small number of double counting of individuals moving from one county to another during the specified time period.

Note 6: PMP data are preliminary and subject to updates. The MA PMP database is continuously updated to allow for prescription record correction data submitted by pharmacies. This data were extracted on 10/13/2021; Release Date: Oct 2021.

Note 7: Beginning in 3rd quarter of 2016 the Department of Veteran's Affairs (VA) facilities began submitting data to the MA PMP.

Note 8: Population estimates used for years following the decennial census were developed by the University of Massachusetts Donahue Institute (UMDI) in partnership with the Massachusetts Department of Public Health, Bureau of Environmental Health.

**January - March 2022 (Quarter 1)**

<b>County</b> (County classifications are by patient zip code; patient state must also = MA)	<b>Census Population*</b>	<b>Total Schedule II Opioid Prescriptions</b>	<b>Total Number of Schedule II Opioid Solid Dosage Units</b>	<b>Individuals Receiving Schedule II Opioid Prescription</b>	<b>% of Individuals Receiving Schedule II Opioid Prescription (of total population)</b>	<b>Individuals with Activity of Concern</b>	<b>Rate of Individuals with Activity of Concern (per 1,000)</b>
Barnstable	228,996	19,972	954,042	8,724	3.8	<5	NA
Berkshire	129,026	11,161	557,290	4,921	3.8	<5	NA
Bristol	579,200	51,848	3,104,878	21,011	3.6	10	0.5
Dukes	20,600	1,143	57,085	520	2.5	0	0
Essex	809,829	51,539	2,521,875	24,526	3.0	6	0.2
Franklin	71,029	6,726	386,372	2,807	4.0	0	0
Hampden	465,825	38,619	2,115,313	17,066	3.7	12	0.7
Hampshire	162,308	12,486	723,856	5,232	3.2	5	1.0
Middlesex	1,632,002	75,120	3,593,314	38,285	2.3	18	0.5
Nantucket	14,255	701	31,997	351	2.5	0	0
Norfolk	725,981	39,123	2,040,663	18,710	2.6	9	0.5
Plymouth	530,819	38,509	2,121,119	17,616	3.3	14	0.8
Suffolk	797,936	34,360	1,910,571	16,182	2.0	15	0.9
Worcester	862,111	58,123	3,319,237	26,230	3.0	11	0.4
MA	7,029,917	439,430	23,437,611	201,277	2.9	104	0.5

Note 1: Individuals with activity of concern "thresholds" for this report are based ONLY on a 3-month time period; see notes on previous page; CY2022-Q1

Note 2: Counts greater than 0 but less than 5 are not reported. Rates based on these small values also are not reported (NR).

Note 3: Rates of individuals with activity of concern are based on the population of individuals who have received one or more Schedule II opioid prescriptions during the specified time period.

Note 4: Totals for all counties combined exclude a small number of prescription records that could not be assigned a county due to inaccurate zip code/city town information reported to the program.

Note 5: The total sum for the "Number of Individuals Receiving Schedule II Opioid Prescription" will be slightly different than the sum presented for the state in Figure 2 due to a small number of double counting of individuals moving from one county to another during the specified time period.

Note 6: PMP data are preliminary and subject to updates. The MA PMP database is continuously updated to allow for prescription record correction data submitted by pharmacies. This data were extracted on 04/16/2022; Release Date: April 2022.

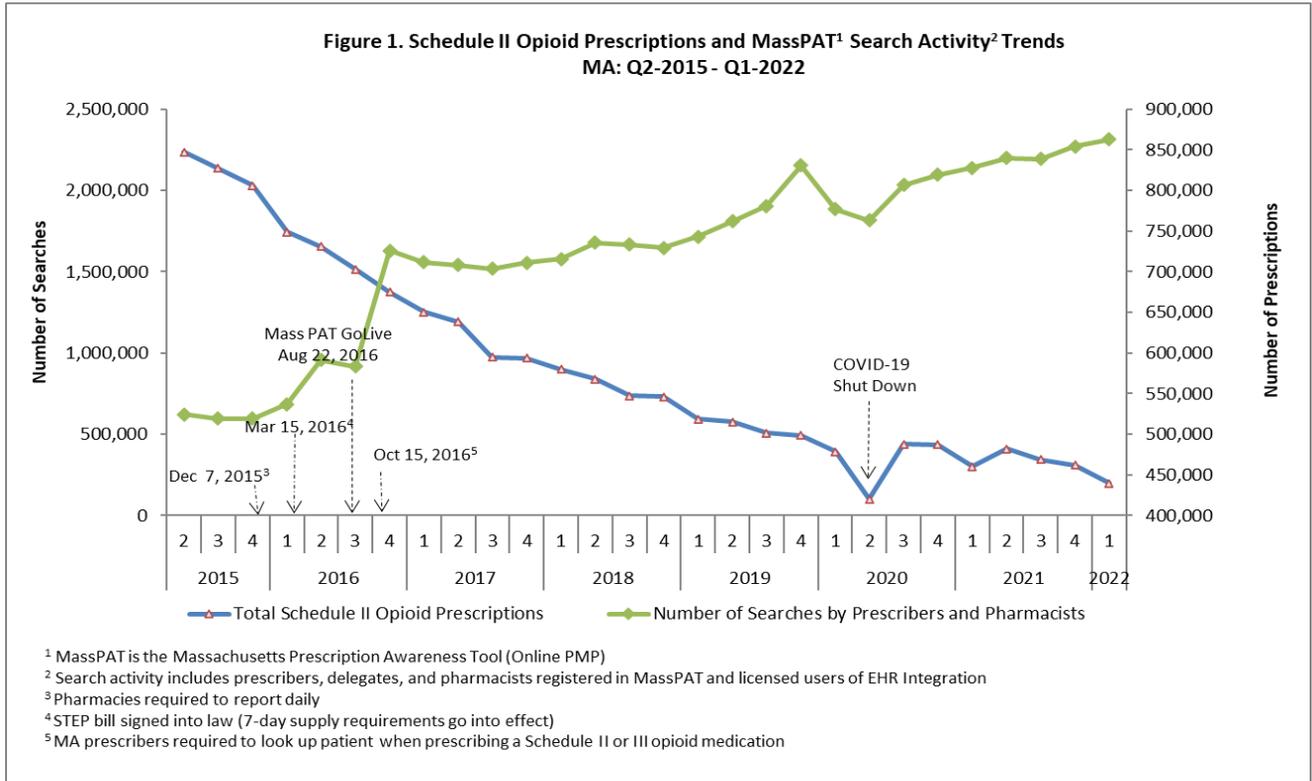
Note 7: Beginning in 3rd quarter of 2016 the Department of Veteran's Affairs (VA) facilities began submitting data to the MA PMP.

Note 8: UMDI Interim 2020 Population Estimates by Age, Sex, Race, and Municipality, UMass Donahue Institute Population Estimates Program, March 1, 2022

# MA Prescription Monitoring Program Data

## Trend Analyses for Schedule II Opioids Only

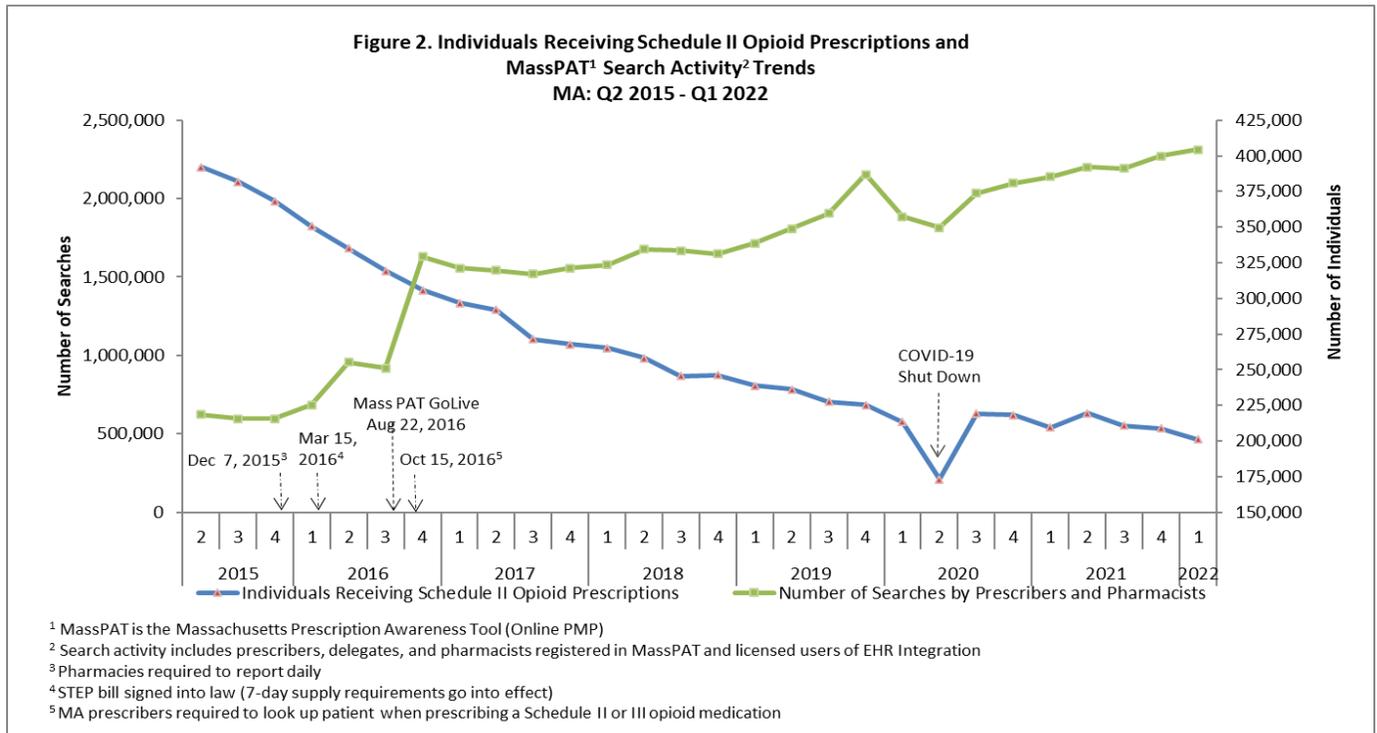
- In the 4th Quarter of 2021, there were approximately 461,900 Schedule II opioid prescriptions reported to the MA PMP; this is a small decrease from the previous quarter and over a 45% decrease from the 1st Quarter of 2015. (n = 841,990 Schedule II opioid prescriptions).
- In the 1<sup>st</sup> Quarter of 2022, there were approximately 439,400 Schedule II opioid prescriptions reported to the MA PMP; this is a small decrease from the previous quarter and over a 47% decrease from the 1st Quarter of 2015 (n = 841,990 Schedule II opioid prescriptions).



**Note:**

- PMP data are subject to updates. The MA PMP database is continuously updated to allow for prescription record correction data submitted by pharmacies. The data for CY2022 Q1 were extracted on 04/16/2022.
- Some discrepancies were identified in search counts reported by data vendor. Reports prior to Q2 CY23 were inflated due to overrepresenting the number of Gateway (i.e., Integration) searches. Archived PMP reports going back to Q3 CY 2018 (beginning of Gateway or Integrated searches) are now updated to reflect the accurate counts. (Dated: March 2024)

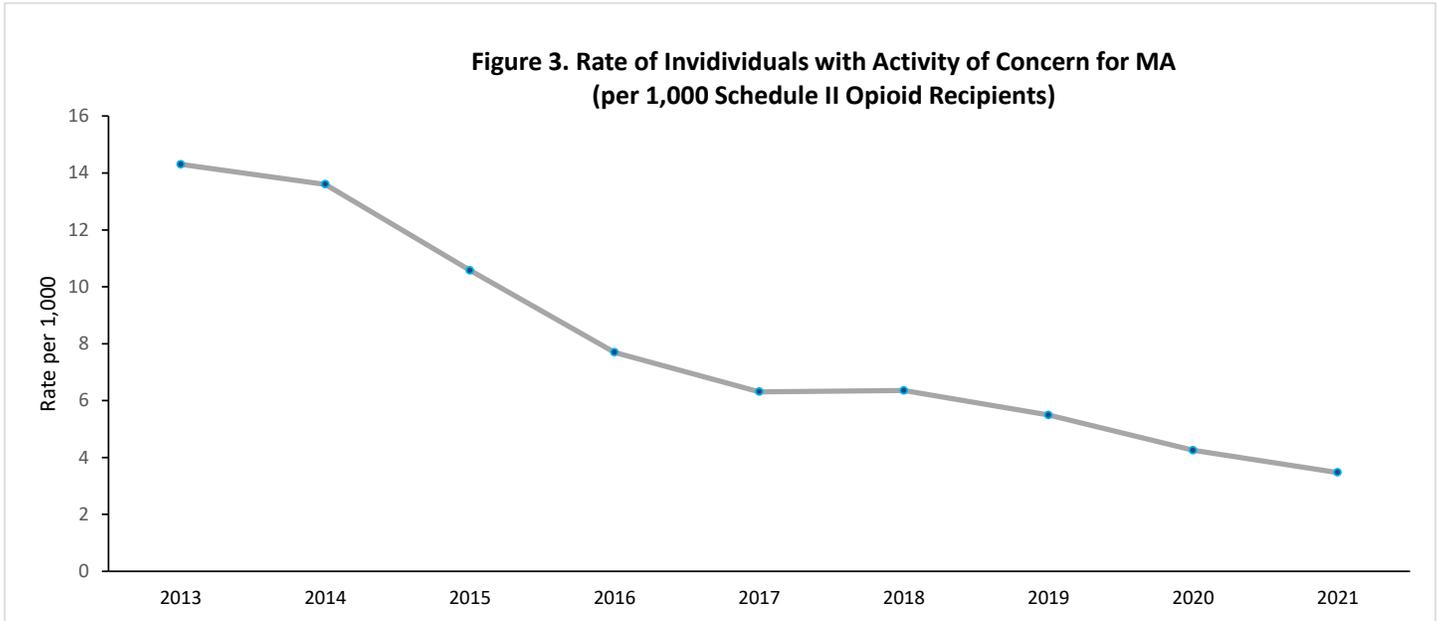
- Roughly 208,800 individuals in MA received prescriptions for Schedule II opioids in the 4th Quarter of 2021; this is a slight decrease from the previous quarter (a decrease of about 1,900 individuals) and over a 46% decrease from the 1st Quarter of 2015 (n = 390,532).
- Approximately 201,000 individuals in MA received prescriptions for Schedule II opioids in the 1st Quarter of 2022; this is a slight decrease from the previous quarter (a decrease of about 7,500 individuals) and over a 48% decrease from the 1st Quarter of 2015 (n = 390,532).



**Note:**

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- Some discrepancies were identified in search counts reported by data vendor. Reports prior to Q2 CY23 were inflated due to overrepresenting the number of Gateway (i.e., Integration) searches. Archived PMP reports going back to Q3 CY 2018 (beginning of Gateway or Integrated searches) are now updated to reflect the accurate counts. (Dated: March 2024)

- The rate of individuals with activity of concern (also referred to as multiple provider episodes) decreased from 14.3 to 3.4 per 1,000 individuals between CY 2013 and CY 2021, more than a 75% reduction in activity of concern. Between CY 2020 and CY 2021 the rates of individuals with activity of concern decreased from 4.2 to 3.4 per 1,000 patients.



**Note:** PMP data are subject to updates. The MA PMP database is continuously updated to allow for prescription record correction data submitted by pharmacies. The data for CY2021 were extracted on 04/06/2022.

**Source**

- Prescription Drug Monitoring Program, Bureau of Health Professions Licensure, MDPH

