

STATE OF COLORADO



Colorado Department of Human Services

people who help people

1575 Sherman Street
Denver, Colorado 80203-1714
Phone 303-866-5700
www.cdhs.state.co.us



John W. Hickenlooper
Governor

Reggie Bicha
Executive Director

December 31, 2013

The Honorable Governor John W. Hickenlooper
200 E. Colfax Avenue, Room 136
Denver, CO 80203

Dear Governor Hickenlooper:

The Department of Human Services respectfully submits the enclosed legislative report concerning the Controlled Substance Diversion Program.

- *Section 18-18-309 (4) C.R.S. (2013) requires the Department to submit an annual report by January 1 to the Speaker of the House, President of the Senate, and the Governor concerning outcomes and recommendations related to the Controlled Substance Diversion Program. This report provides information on the funds received and distributed.*

If you require further information or have additional questions, please contact the Department's Legislative Liaison, Sarah Sills, at Sarah.Sills@state.co.us or 303-866-3019.

Sincerely,

A handwritten signature in blue ink that reads 'Reggie Bicha'.

Reggie Bicha
Executive Director

Enclosure

Cc: Melodie Beck, Budget Analyst, Office of State Planning and Budgeting
Kelly Perez, Health Policy Advisor, Governor's Office
Molly Otto, State Librarian
Nikki Hatch, Deputy Executive Director of Operations
Dee Martinez, Deputy Executive Director of Enterprise Partnerships
Melissa Wavelet, Director Office of Performance and Strategic Outcomes
Clint Woodruff, Interim Budget Director
Patrick Fox M.D., Interim Director Office of Behavioral Health
Sarah Sills, Executive and Legislative Liaison
Dan Drayer, Communications Director

STATE OF COLORADO



Colorado Department of Human Services

people who help people

1575 Sherman Street
Denver, Colorado 80203-1714
Phone 303-866-5700
www.cdhs.state.co.us



John W. Hickenlooper
Governor

Reggie Bicha
Executive Director

December 31, 2013

The Honorable Lucia Guzman, President Pro Tempore
Colorado Senate
200 E. Colfax Avenue, Room 271
Denver, CO 80203

Dear President Pro Tempore Guzman:

The Department of Human Services respectfully submits the enclosed legislative report concerning the Controlled Substance Diversion Program.

- *Section 18-18-309 (4) C.R.S. (2013) requires the Department to submit an annual report by January 1 to the Speaker of the House, President of the Senate, and the Governor concerning outcomes and recommendations related to the Controlled Substance Diversion Program. This report provides information on the funds received and distributed.*

If you require further information or have additional questions, please contact the Department's Legislative Liaison, Sarah Sills, at Sarah.Sills@state.co.us or 303-866-3019.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Reggie Bicha', written over a light blue circular stamp.

Reggie Bicha
Executive Director

Enclosure

Cc: Melodie Beck, Budget Analyst, Office of State Planning and Budgeting
Kelly Perez, Health Policy Advisor, Governor's Office
Molly Otto, State Librarian
Nikki Hatch, Deputy Executive Director of Operations
Dee Martinez, Deputy Executive Director of Enterprise Partnerships
Melissa Wavelet, Director Office of Performance and Strategic Outcomes
Clint Woodruff, Interim Budget Director
Patrick Fox M.D., Interim Director Office of Behavioral Health
Sarah Sills, Executive and Legislative Liaison
Dan Drayer, Communications Director

STATE OF COLORADO



Colorado Department of Human Services

people who help people

1575 Sherman Street
Denver, Colorado 80203-1714
Phone 303-866-5700
www.cdhs.state.co.us



John W. Hickenlooper
Governor

Reggie Bicha
Executive Director

December 31, 2013

The Honorable Mark Ferrandino, Speaker of the House
Colorado House of Representatives
200 E. Colfax Avenue, Room 271
Denver, CO 80203

Dear Speaker Ferrandino:

The Department of Human Services respectfully submits the enclosed legislative report concerning the Controlled Substance Diversion Program.

- *Section 18-18-309 (4) C.R.S. (2013) requires the Department to submit an annual report by January 1 to the Speaker of the House, President of the Senate, and the Governor concerning outcomes and recommendations related to the Controlled Substance Diversion Program. This report provides information on the funds received and distributed.*

If you require further information or have additional questions, please contact the Department's Legislative Liaison, Sarah Sills, at Sarah.Sills@state.co.us or 303-866-3019.

Sincerely,

A handwritten signature in blue ink that reads 'Reggie Bicha'.

Reggie Bicha
Executive Director

Enclosure

Cc: Melodie Beck, Budget Analyst, Office of State Planning and Budgeting
Kelly Perez, Health Policy Advisor, Governor's Office
Molly Otto, State Librarian
Nikki Hatch, Deputy Executive Director of Operations
Dee Martinez, Deputy Executive Director of Enterprise Partnerships
Melissa Wavelet, Director Office of Performance and Strategic Outcomes
Clint Woodruff, Interim Budget Director
Patrick Fox M.D., Interim Director Office of Behavioral Health
Sarah Sills, Executive and Legislative Liaison
Dan Drayer, Communications Director



Colorado Department of Human Services

Office of Behavioral Health

Controlled Substance Diversion Prevention and Control Report (C.R.S. §18-18-309)

Report to the Governor and to the President of the Senate and the Speaker of the House of Representatives

January 1, 2014



This report was prepared by:

The Office of Behavioral Health
Denise Vincioni, Manager, Medication Assisted Treatment Programs, Controlled Substance Administrator
Chris Habgood, Director, Policy and Planning

INTRODUCTION

The Colorado Department of Human Services, Office of Behavioral Health submits this report entitled, Controlled Substance Diversion Prevention and Control Report to the Governor and to the President of the Senate and the Speaker of the House of Representatives in compliance with:

§18-18-309 (4) C.R.S. 2013 Diversion Prevention and Control

The department shall annually report to the governor and to the president of the senate and the speaker of the house of representatives on the outcome of this program with respect to its effects on distribution and abuse of controlled substances, including recommendations for improving control and prevention of the diversion of controlled substances in this state.

CONTROLLED SUBSTANCE DIVERSION PREVENTION AND CONTROL REPORT

As required by C.R.S §18-18-309 (4), the Department of Human Services, Office of Behavioral Health is reporting on the controlled substance diversion prevention and control program.

The Department of Human Services, Office of Behavioral Health serves as the state authority for the Controlled Substances Act in Title 27, Article 80, Part 2. For the purposes of this report controlled substances only relates to the use of controlled substances specifically: methadone, buprenorphine, lorazepam, chlordiazepoxide, alprazolam, and diazepam in licensed addiction programs that compound, administer, or dispense controlled substances to treat substance abuse and addiction. The Department of Human Services regulates controlled substances dispensed by licensed controlled substance addiction treatment programs to address potential misuse and diversion of these medications by the patients these programs serve. The Department of Regulatory Agencies has oversight and authority of the prescription drug monitoring program which relates to the prescribing of controlled substances for medical purposes not related to the treatment of addictions. The Department of Human Services' Controlled Substances Administrator works closely with the Department of Regulatory Agencies and the prescription drug monitoring program to coordinate and provide technical assistance between the two programs.

The Department of Human Services has created policies that outline exactly how the state implements diversion from the perspective of protecting the public from the loss, theft or misuse of controlled substances. The policy requires that licensed controlled substance addiction treatment programs that dispense controlled substances report directly to the Department's Controlled Substances Administrator when a client has lost, stolen or misused their medication. Licensed controlled substance addiction treatment programs are required to investigate when an individual may have misused the medication and then reduce the quantity of the controlled substance allowed to be taken outside the clinical facility. The reporting information is compiled regularly and reviewed by the Controlled Substance Administrator for the purposes of understanding the scope of the problem, improving control and oversight, and to assist programs through the provision of technical assistance.

Outcomes

The Department has not received any founded complaints and has identified no deficiencies with the state's 21 licensed controlled substance addiction treatment programs or their compliance with required policies in the last year. If there were any reported incidents of misuse or diversion, the licensed controlled substance treatment program would be required to follow prescribed protocols

and procedures as required by the Department of Human Services to ensure program integrity and to resolve all diversion issues.

Recommendations

The Department of Regulatory Agencies has recently completed the 2013 Sunset Review of the Colorado Licensing of Controlled Substance Act. The Department of Human Services supports all of the recommendations contained in the Sunset Review report, which include:

- Continue the Act for 11 years, until 2025.
- Grant the Department of Human Services wider disciplinary discretion in implementing the Act.
- Expand prescription drug monitoring program (PDMP) access to the staff at facilities that treat addiction with controlled substances.
- Direct the Department of Human Services to provide secure online access to the central registry.
- Direct the Department of Human Services to administratively establish license fees for facilities regulated by the Act.
- Implement a formal, accurate, objective recordkeeping and tracking system for complaints and final agency actions.

To improve control and prevention of controlled substances the Department of Human Services is recommending and initiating the following Diversion Control Policy.

Background

Diversion control is the primary role of the Controlled Substance Act. The goal of the act is to prevent diversion by the individual to whom controlled substance medication is prescribed outside of the purpose for which it was intended. The Department of Human Services, Office of Behavioral Health tracks information through a critical incident reporting process as required of licensed controlled substance addiction treatment programs. This information is used to guide policies and to inform and improve clinical practice to reduce further diversion of medication.

Policy

It is the policy of the Department of Human Services, Office of Behavioral Health that all incidents of diversion as defined below are to be reported to the Controlled Substances Administrator to prevent diversion by the individual to whom controlled substance medication is prescribed outside of the purpose for which it was intended. In addition, diversion checks by licensed controlled substance addiction treatment programs are conducted regularly and consistently to monitor the effectiveness of the take-out privilege process.

Scenarios Suggestive of Medication Misuse or Diversion

1. The use of the controlled substance by the individual for whom it is prescribed in an inappropriate way, i.e. using more than prescribed.
2. Reported loss of the medication.
3. Reported and documented theft of the medication.
4. Failure to return medication when required to do so, i.e. "Diversion checks" or return from hospital stays when the patient was to return a certain amount after hospital discharge.
5. When bottles are lost and/or discovered on another person for whom it is not intended.

6. When an individual has given or sold his or her medication to another individual.

Procedure: Diversion checks

1. Are required on a regular basis for every program that dispenses controlled substances within the state of Colorado.
2. Will be incorporated into every clinic's policies and procedures.
3. Are to be conducted twice annually based on the individual's level of treatment status.
4. Are to be conducted any time a patient is suspected of behavior suggestive of medication diversion.
5. The clinic policy with respect to diversion checks must be explained to the patient at the time of his or her admission to the program, including the need for diversion checks to be conducted as the patient advances through the phases of the program.