

What's New From the DEA Diversion Control Division

Wednesday, April 14, 2021

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Handouts for today's presentations can be found at:

www.nabp.pharmacy/webinar

What's New From the DEA Diversion Control Division

DIVERSION CONTROL DIVISION
LIAISON SECTION CHIEF CLAIRE BRENNAN

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Learning Objectives



At the conclusion of this webinar, participants will be able to:

- 1. Discuss the Opioid Crisis today
- 2. Identify some drugs of abuse and drug combinations
- 3. Name who needs to report suspicious orders
- 4. Locate DEA regulations and other DEA resources



The Opioid Crisis Today

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Public Health Epidemic



- ☐ In 2014, there were 47,055 drug overdose deaths
- ☐ In 2015, there were **52,404** drug overdose deaths
- ☐ In 2016, there were <u>63,632</u> drug overdose deaths
- ☐ In 2017, there were <u>70,237</u> drug overdose deaths
- In 2018, there were <u>67,367</u> drug overdose deaths (first recorded decline)

Source: CDC

CDC Drug Overdose Data 2018



4.1 % drop in drug overdose deaths

2017: 70,237 2018: 67,367

■ 13.5% decline in prescription opioid deaths

2017: 14,495 2018: 12,552

- 10 % increase in deaths involving synthetic opioids (Fentanyl, etc)
- Opioids involved in 46,802 deaths (69.5% of drug overdoses)
- Prescription opioids involved in 32% of all opioid deaths
- ☐ Two out of three (67%) opioidinvolved overdose deaths involve synthetic opioids

Source: CDC

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The Opioid Crisis Today CDC Preliminary 2019 Data



5% increase in drug overdose deaths

2018: 67,367

2019: 71,999

- ☐ 63,483 (79%) of drug overdose deaths attributed to opioids
 - from 69% in 2018
- □ 37,137 (51%) deaths linked to synthetic opioids
 - from 69% in 2018
- □ 12,068 (17%) deaths involved prescription opioids

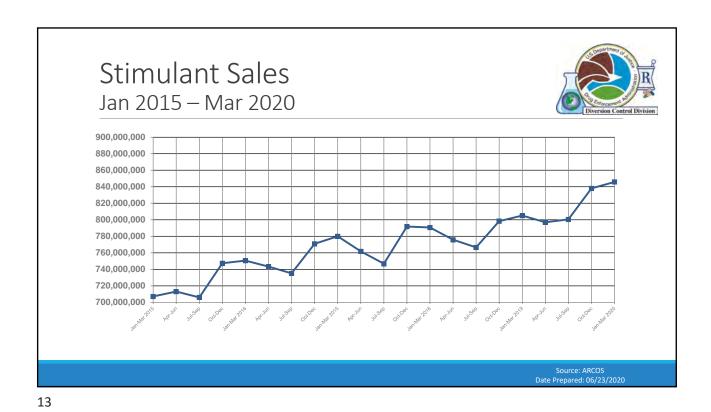
Source: CDC

Top 5 Drugs Sold Nationwide By Drug Strength (Jan 2019-Jun 2020) **#1 Hydrocodone** #4 Methylphenidate Methylphenidate 10mg Hydrocodone w/acetaminophen 10/325mg Methylphenidate 20mg Hydrocodone w/acetaminophen 5/325mg Hydrocodone w/acetaminophen 7.5/325mg Methylphenidate 36mg **#2 Oxycodone #5 Buprenorphine** Oxycodone w/acetaminophen 10/325mg Buprenorphine w/Naloxone Film 8/2mg Oxycodone w/acetaminophen 5/325mg Buprenorphine w/Naloxone Tablets 8/2mg Oxycodone 5mg Buprenorphine 8mg #3 Amphetamine Amphetamine 20mg Amphetamine 30mg Amphetamine 10mg 11

Opioid Sales 2013 - July 2019 140.000.0000 118,563.4586 120,000.0000 110,421.1818 97.308.0303 100,000.0000 81,141.3659 62.563.5043 59 322 0253 60.000.0000 52,626.3341 51,865.8037 47,304.9666 41,758.7142 35,546.614 40.000.0000 20,000.0000 2015 201 2017 2018 OXYCODONE

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Source: IQVIA



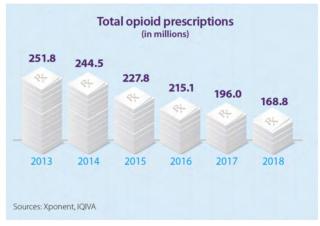
Opioid Prescriptions Decreased 33%



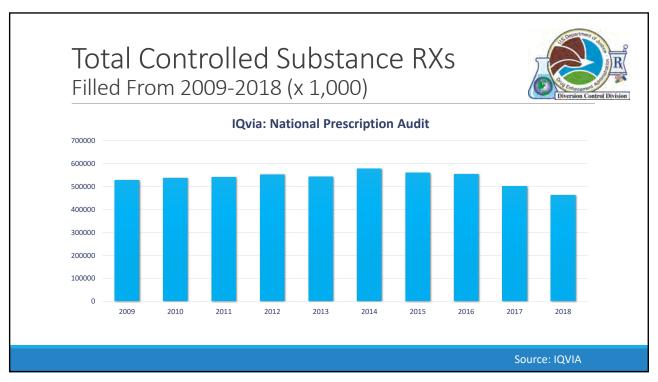
 Every state has seen a decrease in opioid prescriptions over the last five years.

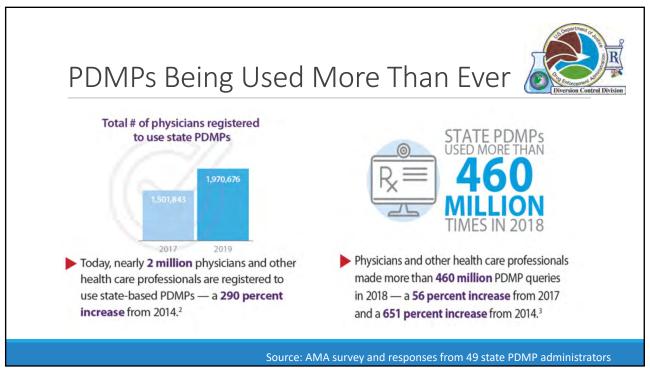
Since 2013

 Between 2017 and 2018 alone there was a 12.4% decrease in opioid prescriptions



Source: Xponent, IQVIA, Danbury, CT, Accessed May 2019





The Opioid Crisis Today CDC Provisional Data for 2020



Over 81,000 drug overdose deaths in the 12 months ending in May 2020 – highest number ever recorded in a 12month period While overdose deaths were already increasing in the months preceding COVID-19, the latest numbers suggest an acceleration of overdose deaths during the pandemic



Source: CDC

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Drugs of Abuse





NFLIS Data Collection





Most Frequently Identified Analyzed Drugs United States - 2019



- 1. Methamphetamine 27.47% 7. Oxycodone 1.48%
- 2. Cannabis 18.58%
- 3. Cocaine 13.74%
- 4. Heroin 8.39%
- 5. Fentanyl 6.50%
- 6. Alprazolam 1.75%

- 8. Buprenorphine 1.35%
- 9. Hydrocodone .84%
- 10. Acetyl Fentanyl .80%
- 11. Amphetamine .74%
- **12.** Tramadol .54%

Source: NFLIS.deadiversion.usdoj.gov

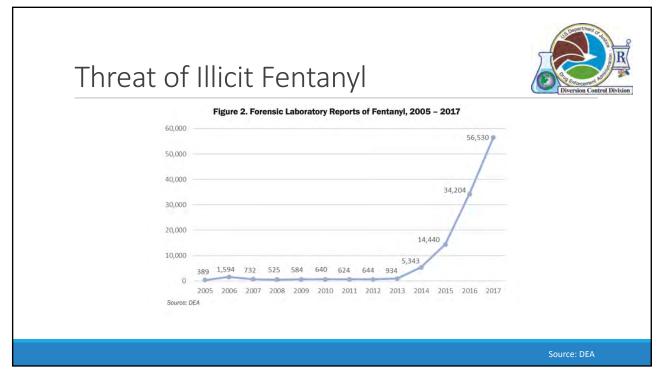
Drug Combinations



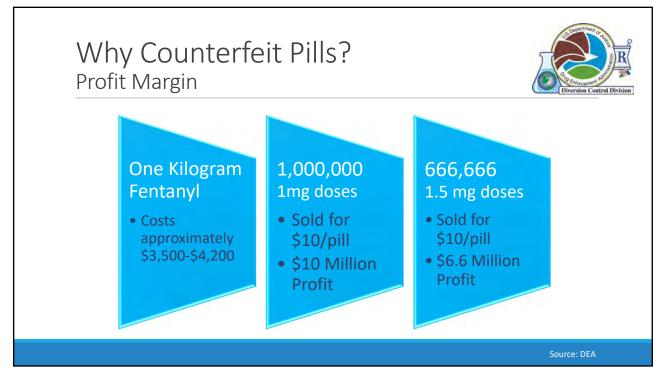
Street Name	Drug Combinations	Effects
Holy Trinity	Opioid, Benzodiazepine, Carisoprodol	Heroin-like, Euphoric high
Stimulant Trinity	Opioid, Benzodiazepine, Stimulant	Heroin-like, Euphoric high
Gaba Trinity	Opioid, Benzodiazepine, Gabapentin	Euphoric high
Zolpidem Trinity	Opioid, Benzodiazepine, Zolpidem	Downer, Depressant
Speedball	Opioid and Stimulant	Combination of Heroin & Cocaine *more intense/long lasting high

Source: DEA Targeting and Special Project Unit (DOIT)

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Counterfeit Pills Containing Methamphetamine

DEA Seizure





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Counterfeit Pills Containing Methamphetamine

DEA Seizure



- > 5000 pills seized with marking 3/0 on one side and 974 on the other side
- > Sold for \$7-8 per pill

Source: DEA

Xylazine

Non-Controlled Substance

Diversion Control Division

- Non-opioid, prescription veterinary sedative and muscle relaxant (not all-inclusive use by veterinarians)
- Not intended for human consumption
- ➤ LiveScience.com study in Philadelphia found Xylazine involved in nearly 1/3 (31%) of fatal opioid drug overdoses in 2019*
- Often found mixed with heroin or fentanyl
- ➤ Between 2010 and 2015, Xylazine was only detected in 2% of deaths

* Data from Philadelphia Medical Examiner's Office

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Xylazine

Non-Controlled Substance



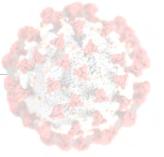
- Often found as an adulterant in illicit substances
- NFLIS received 816 reports of xylazine from items submitted to participating laboratories in 2020
- ➤ 84% contained at least one other identified drug
- Fentanyl was present in 96% of items containing xylazine and at least one other drug

Source: NFLIS DEADiversion.usdoj.gov



Responding to the Opioid Epidemic

DURING A GLOBAL PANDEMIC



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Executive Order 13891 November 1, 2019





- Requires DEA to obtain permission from the Department of Justice (DOJ) and the Office of Management and Budget (OMB) prior to publishing any public guidance document.
- Prior to this Executive Order, DEA could publish guidance documents on its own.

Drug Enforcement Administration Timeline of COVID-19 Response

January 27, 2020

Secretary of
Health and
Human Services
(HHS) declares
the coronavirus a
public health
threat

January 31, 2020

HHS declares a Public Health Emergency March 15 - April 20

DEA issues 24
emergency
guidance
documents to
assist practitioners
in the treatment of
patients

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Medication-Assisted Treatment Guidance During COVID 19



- **Exemption Allowing Alternate Delivery Methods for OTPs** March 16, 2020
- ➤ Use of Telephone Evaluations to Initiate Buprenorphine Prescribing March 31, 2020
- Use of Unregistered Off-Site Locations in MAT April 7, 2020
- Distributor shipments to NTP's signed delivery exception April 11, 2020
- **▶ Use of Unregistered Off-Site Locations in MAT (Buprenorphine)** April 28, 2020

Drug Enforcement Administration Guidance During COVID-19



- Suspicious Orders & Due Diligence
- Prescriptions
- Registration
- Quota
- National Drug Supply
- Electronic Prescribing of Controlled Substances
- Telemedicine
- > Records and Reports

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Reporting Requirement



Attention, this is required





Source: SUPPORT Act & DEA

Reporting Requirement



The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act (Public Law 115-271 – Oct. 24, 2018)

- Requires that **ALL** DEA registrants that **distribute** controlled substances report suspicious orders to DEA

Source: SUPPORT Act & DEA

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Reporting Requirement



October 23, 2019, DEA launched the Suspicious Orders Report System (SORS)

- To be used by DEA registrants who distribute controlled substances to other DEA registrants
- Reporting a suspicious order to the centralized database constitutes compliance with the reporting requirement under 21 USC 832(a)(3)

Source: SUPPORT Act & DEA

Reporting Requirement



The SUPPORT Act states the term "suspicious order" may include, but is not limited to: an order of a controlled substance of unusual size; an order of a controlled substance deviating substantially from a normal pattern; and an order of controlled substances of unusual frequency as per 21 USC 802(57) and 21 CFR 1301.74(b)

Source: SUPPORT Act & DEA

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Reporting Requirement



Pharmacies need to register on the website in order to report to SORS:

- 1. Go to <u>ARCOS Online Reporting System</u> and click on "SORS Registration (for Non-ARCOS Reporters)" hyperlink.
- 2. After completing the initial registration, a confirmation e-mail will be sent to the e-mail address provided.
- 3. Once DEA approves the registration, another e-mail will be sent with a temporary password.
- 4. Go to <u>ARCOS Online Reporting System</u> and type in your username and the temporary password. The system will require you to change the temporary password.
- 5. Upon successfully changing the password, the account will be fully registered to report to the SORS Online system.

Source: DEA

Reporting Requirement



The SUPPORT Act requires reporting the suspicious order to both the local DEA field office as well as the DEA Administrator.

HOWEVER, if a DEA registrant files through the DEA electronic SORS portal, that comports with the reporting component as stated above.

Source: DEA

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Scam Alert





Source: DEA

Scam Alert



- Phone call came into the pharmacy. Caller identified himself as being with the board. Told the pharmacist that this was a "sensitive or confidential" matter, and they needed to go somewhere private and call back on cell phone. Gave a phone number.
- Stated that illegal prescriptions with the pharmacist license (NPI) were found in an abandoned car. 45.6g of CII, 1,500 units of CIII, and 500 units of CIV. 16 accounts have been used to wire over 5.4 million/2.3 million, and all have been seized. 15 days ago, received complaint from FBI.
- They knew his/her license number and other personnel data (so much is online now).

Source: DEA

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Scam Alert



- Stated that "Federal parties say to suspend license" he/she cannot practice until receive permission from Board by mail.
- Set up a conference call with "FBI Agent"; was told the case had been forwarded to DOJ and the "protocol of privacy act" must be followed thoroughly.
- During conference call, the "Agents" claim to have the appropriate documents and will forward him/her the DOJ papers to read. Will fax the documents to a UPS store (because it is a privacy issue, they don't want to send it to the pharmacy).

Source: DEA

Scam Alert



- Another conference call is set up with "Board and FBI"; they tell
 pharmacist that they need to give DOJ assurance that the privacy act will
 be followed.
- This is done by a "global transfer" to the US Ambassador. Due to COVID, it all has to remain distant, and due to the "privacy act," it has to go through an international bank.
- This was an international wire transfer of \$9,500 from the pharmacist's bank to a bank in Poland.
- There were numerous phone calls/texts and threats made against the pharmacist.

Source: DEA

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Scam Alert



 When the pharmacist did begin to question, he/she was threatened not only with job but with taking other assets (they had the pharmacist's home address).

Important note

Licensures, addresses, children's names, colleges they attend – these can be found on social media and professional and government websites. (These scam artists took the time to dig out the information on the pharmacist). Names of federal and state officials also available.

Source: DEA

Scam Alert



What to do -

DEA Imposter? ReportFraud.ftc.gov

Internet Crime Complaint? ic3.gov

Can always call local DEA Diversion Group

Source: DEA

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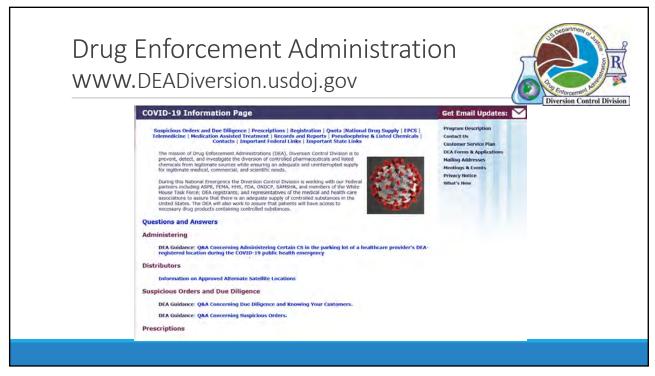




DEA Resources

DEADIVERSION.USDOJ.GOV

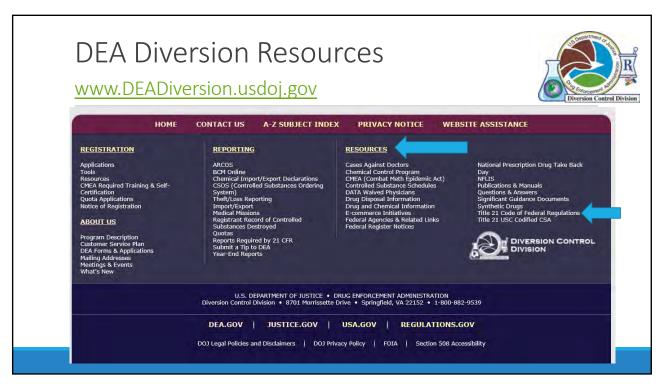








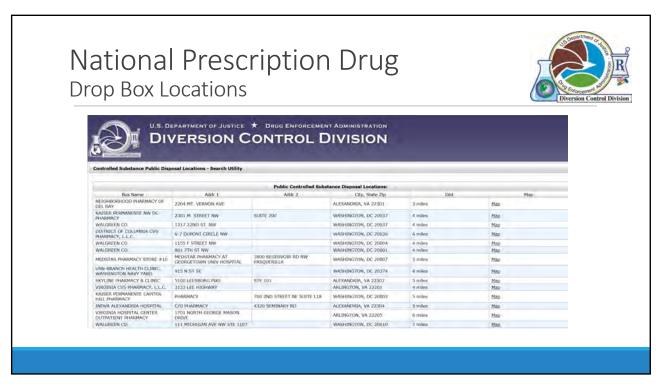






DEA Diversion Resources www.DEADiversion.usdoj.gov What's New Get Email Updates: **Publications** Final Rule: Placement of cyclopenlyl fentanyl, isobutyryl fentanyl, para-chlorolsobutyryl fentanyl, para-methoxybutyryl fentanyl, and valeryl fentanyl in Schedule I (November 25, 2020) Johnson Matthey Pharmaceutical Materials Inc. (November 23, 2020) Lewis Leavitt III, M.D.; Decision and Order (November 19, 2020) Suntree Pharmacy and Suntree Medical Equipment, LLC; Decision and Order (PDF) (November 19, 2020) Monica Ferguson, F.N.P., R.N.; Decision and Order (November 19, 2020) Jeffrey M. Wolk, M.D.; Decision and Order (November 19, 2020) **Quick Links** ARCOS (Automation of Reports & Consolidated Orders System) Julie I. Dee, M.D.: Decision and Order (November 19, 2020) Verne A. Schwager, M.D.; Decision and Order (November 19, 2020) **Chemical Control Program** Controlled Substance Schedules In The News CSOS (Controlled Substances Ordering System)
EPCS (Electronic Prescriptions for Controlled Substances) Pharmacy Pays \$250,000 to Resolve Controlled Substances Act Violations (November 17, 2020) TLR (Theft/Loss Reporting Online) Valley Stream man arrested for allegedly using doctor's prescription pad to acquire thousands of opioid pills (November 13, 2020) Theft/Loss Reports for 2014-2018 Find Your Local Diversion Field Office Burke County men indicted for operation of illegal pill factory (Nove Mailing Addresses for Topics Related to Title 21 CFR Submit a Tip to DEA DEA NATIONAL & Report Illicit Pharmaceutical Activities **EMERGENCY** RX ABUSE TAKEBACK DISASTER ONLINE RELIEF al Prescription Drug Take Back Day







National Prescription Drug
Take Back Day



- Free, anonymous way to safely dispose of unused, unwanted and expired prescription medications
- ☐ Began in 2010
- 19 successful National Prescription Take Back Days
- ☐ Held twice a year typically on the last Saturday in April and October





Secure Your Meds Campaign

Securely store your meds until it's time to take back

TakeBackDay.DEA.gov

Post Test Question #1

True or False:

Buprenorphine and methylphenidate are two of the Top 5 drugs Sold Nationwide (January 2019-June 2020).

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Post Test Question #1

True

Buprenorphine and methylphenidate are two of the Top 5 drugs Sold Nationwide (January 2019-June 2020)

Post Test Question #2

True or False:

Gaba Trinity is the street name for one of the trinity combinations of drugs.

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Post Test Question #2

True

Gaba Trinity is the street name for one of the trinity combinations of drugs.

Post Test Question #3

True or False:

Every pharmacy has to report to the Suspicious Orders Report System.

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Post Test Question #3

False

Only a pharmacy that *distributes* to another DEA registrant has to report to the Suspicious Orders Report System.

Thank You

Website: DEADiversion.usdoj.gov

Email: ODLP@usdoj.gov

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Q&A

Please use the chat tool on your screen to submit questions to the presenter.

Please change the "To" field in the chat box to "All panelists and attendees" so that everyone can see your question or comment.

Our host will read the questions out loud in the order they are received.



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- 2. Select the webinar from the Live Meetings and Conferences section
- 3. Enter the session code provided at the end of the webinar
- 4. Complete the course and speaker evaluations
- 5. Select the appropriate credit (pharmacist or pharmacy technician)
- Enter your NABP e-Profile ID and date of birth and certify that the information is correct
- 7. Click the claim button

Claims must be submitted by noon on June 13, 2021



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1 contact hour (0.1 CEU) 0205-0000-21-023-L03-P 0205-0000-21-023-L03-T

Claims must be submitted by noon on June 13, 2021

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