

# Opioids: Auditors have found instances of Oregonians ‘doctor shopping’

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Oregon legislators in 2017 revised the state’s prescription reporting system to flag doctors who prescribe high volumes of opioids or prescribe conflicting drugs.

## ‘Doctor shopping’

State auditors examining the system found instances of Oregonians “doctor shopping.” Nearly 150 people were identified as each getting prescribed drugs from at least 30 different doctors.

That led auditors to question how the state deals with those doctors identified as improperly prescribing opioids.

“Questionable prescribing habits seen within the data, even those that are egregious, cannot be elevated to any regulatory or enforcement entities to directly look into those situations,” auditors said in their audit released in December.

Auditors recommended that a state review committee get authority to require prescribers to justify practices deemed “concerning” and to collaborate with licensing boards and police.

The state committee confidentially reviews prescriber, pharmacy and patient prescriptions, according to the Oregon Health Authority. It also developed criteria defining risky prescribing.

When the committee spots a suspicious pattern, it typically writes to the doctor. A sample letter that state auditors reviewed said it was an “invitation to explore” the state’s resources and “review your prescribing practice.”

The doctors don’t have to acknowledge the letter, or take any more training or education, auditors said.

The information can’t be shared with medical licensing boards.

Those licensing boards



The Associated Press

**OxyContin is a powerful painkiller.**

can obtain the state’s information if they certify the information is needed for an investigation.

According to the Oregon Health Authority, state licensing boards in the last three months of 2018 requested drug monitoring information 109 times. Department officials couldn’t recall a time when they denied a request for such information from the board and said the requests are increasing.

Police can obtain the monitoring program’s data with a court order.

By the time Oregon legislators established the state’s prescription drug monitoring program in 2009, Oregon was behind dozens of other states already operating similar programs.

Rob Bovett, former Lincoln County district attorney who at the time lobbied on behalf of law enforcement groups, helped lead the charge to create the monitoring program.

The law was the result of “a lot of bargaining and compromise” between advocates and the ACLU of Oregon and the Oregon Medical Association, Bovett said.

Police and prosecutors wanted to tackle prescription drug abuse at the source, Bovett said.

“Oregon law enforcement doesn’t just want tools to go after people for drug abuse,” Bovett said. “They prefer that drug abuse drop because they’ve got plenty to keep them busy and we just, quite frankly, don’t have enough of them.”

The Oregon District Attorneys Association plans to review the audit report at its board meeting today, according to the association’s executive director, Tim Colahan.

Gary Schnabel, the executive director of the state’s Board of Pharmacy from 1999 to 2014, said the board floated the idea of the state monitoring controlled substance prescriptions for years before the legislation was passed.

He got the idea while at a national conference and learned what other states were doing.

“It was the very beginnings of the opioid crisis, and it was a way to actually monitor opioid use,” Schnabel said.

The point was to identify people using more than a certain amount — whatever program administrators thought was appropriate — and let doctors know.

Pharmacists hoped that the program could prevent issues like doctor shopping

by having doctors intervene when they found a patient had multiple prescriptions for the same or conflicting drugs.

But they didn’t want to share the database with police or investigators.

“The only people who (would have) access to that data were the patient themselves, or the patient’s physician,” Schnabel said. “Nobody else would have access to it.”

The state association representing doctors and the ACLU of Oregon resisted at first, Schnabel said.

## Privacy

The ACLU of Oregon worried the program would invade patient privacy and could be susceptible to data breaches. Some health care providers also voiced privacy concerns, legislative records show.

“They thought it was invasive,” Schnabel said of the Oregon Medical Association. “They thought it might get physicians in trouble, thought it might be punitive against the physician for prescribing. They just didn’t trust it.”

Courtney Dresser, director of government relations for the Oregon Medical Association, said the group never opposed the program.

The monitoring system was cumbersome at first, said Dr. Amy Kerfoot, an Oregon Medical Association trustee who represents the association at the governor’s Opioid Epidemic Task Force.

In recent years, the association urged reforms to make it easier for doctors to use the monitoring data, Dresser said.

In 2017, state lawmakers created the special committee to review prescribing practices of controlled substances.

The bill was sponsored by then-state Rep. Knute Bue-

hler, R-Bend, a surgeon, and supported by the medical association.

The committee advises the Oregon Health Authority on interpreting prescription information and training prescribers. State law requires committee members be licensed health care practitioners with at least five years’ experience prescribing controlled substances.

The following year, Gov. Kate Brown asked the Legislature to mandate registration in the prescription program.

Kerfoot testified in favor, as did other health care groups like the Oregon Primary Care Association.

“Requiring practitioners to register with the Prescription Drug Monitoring Program is another important step in the right direction,” Kerfoot told lawmakers in a letter. She said the program would be “a powerful tool to help providers rethink prescribing decisions that had been automatic in the past, but maybe should not have been for many patients.”

In an interview, Kerfoot acknowledged that the medical association was concerned that doctors would become more liable for their prescribing decisions.

“You never want to have a legislative body sending out what a physician is liable for when they don’t yet have the background on the patient, the indications, the rationale behind it,” Kerfoot said. “They want prescribing to be safe, but prescribing is a tool that should be available to the people who need to use it — qualified physicians and pharmacists.”

But that law created no consequence for not signing up and doesn’t require prescribers to access the database before prescribing a controlled substance.

State auditors cited a study from the National Bureau

of Economic Research that found opioid misuse decreased in states that required health care providers to check such a database.

Dresser said requiring queries by law isn’t necessary.

“There’s no need to mandate it because it will just be part of the workflow as the integration project continues,” Dresser said.

Oregon’s program, auditors said, was “intended to be used for determining the course of treatment for a patient and should be rightfully protected,” auditors wrote. “Yet it is also intended to help ensure appropriate use of prescription medications.”

## Improve care

The ACLU of Oregon maintains that the monitoring program shouldn’t be used to punish or regulate doctors, but to help them improve medical care.

In 2017, roughly 40 percent of prescribers were registered with the program, according to the Oregon Health Authority. By late 2018, after state outreach efforts, 83 percent of prescribers were registered.

Additionally, only retail pharmacies must submit prescription data to the state. That leaves out pharmacies in long-term care facilities and residential treatment facilities, auditors said.

There are 143 institutional pharmacies licensed in Oregon, according to the Board of Pharmacy. Of those, 56 are pharmacies in long-term care facilities.

Those facilities often care for patients with chronic illnesses or disabilities, rather than patients with acute pain like a back injury.

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# Beer: Cary started Pilot House with Shelton in 2013 as North Coast Distilling

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megabreweries have been for the last few years,” he said. “As that kind of settles out and we see where that goes, this is kind of a growing industry, and we have local people we can work with.”

“Would we have gone out and just bought distilling equipment and found a distiller? Probably not. But it was just kind of knowing Larry and Christina, and being able to trust them and work with them, is kind of what the main spark was.”

Cary, a former billiards salesman, started Pilot House with Shelton in 2013 as North Coast Distilling in the Astoria Plumbing building on Duane Street. The distillery has grown, winning national awards and becoming one of the first to release cocktails in a can.

“My biggest obstacle the last couple of years has been keeping up with demand we’ve created,” Cary said.

Since opening, Cary

has also run into legal hurdles, namely trademark disputes. North Coast Brewing Co., from California, threatened to sue over the similarity of the distillery’s original name, leading Cary to rename the company Pilot House Spirits. House Spirits Distillery in Portland soon made a similar threat, leading to another name change to Pilot House Distilling.

Cary said the craft distilling industry has also been challenged by a draconian state tax system. Distillers pay up to 40 percent of tasting room bottle sales to the state. Gov. Kate Brown’s budget proposal calls for a 5 percent tax hike to raise another \$21 million in revenue.

“It makes it very hard for small distilleries to break out of that small mold and grow,” he said.

The high taxes and administrative requirements have made it difficult to add employees, Cary said. Buoy Beer recently provided help to bottle spirits, along with

mash from its brewhouse, to enable Cary to turn out more whiskey.

Cary is excited about being able to keep up with demand and put out some new varieties of liquor and canned cocktails, which now include a bloody mary, Moscow Mule and a gin and tonic.

“The canned cocktails are crazy,” he said. “That was something I never thought in all my wild dreams would take off like they did. But I cannot keep up with that. We cannot do the bottled spirits at the same time.”

The process of transferring licenses has been delayed by the partial government shutdown, but the two sides hope to complete the changeover by the summer.

In the meantime, the brewers at Buoy will focus on making good beer, while Cary will have the freedom to focus on making good spirits, Kroening said.

“Everybody’s focusing on what their passions are and what they’re great at,” he said.

# Property: Trend highlighted unpredictability of where the homeless may congregate

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Business owners were concerned that some of the problem behaviors would resurface downtown. So far, though, that doesn’t appear to have happened, Heath said.

The trend highlighted the unpredictability of where homeless people may congregate and what behaviors could follow. Right now, vacant storefronts are the hot spots.

“I don’t think that any of the issues have been eliminated because, sometimes, the issues relocate to another spot. This usually manifests itself at a location that is vacant or doesn’t have a business currently using the property,” Randall said. “If there is no signage, such as the Property Watch signs, then those that want to hang out somewhere often see those locations as their best option.”

In addition to the shifting locations, new faces can also appear. Schmidt differentiated between local homeless people and transients who pass through town.

A different group has been hanging out at the small



Colin Murphey/The Daily Astorian

**A sign is posted in the window of a business in the downtown district.**

grassy area by Schmidt’s store in recent weeks. One night, after the store was closed, three different people knocked on the front door and asked an employee inside to let them in. For safety reasons, Schmidt advised against it.

“It just seems like it starts to close in after a while, and I don’t have any answers for them, honestly,” Schmidt said.

The downtown association is sending a survey out to businesses this week in an attempt to measure the scope and severity of nagging concerns. Results from the survey may find their way into comments at public meetings.

“We know it’s a problem with many different aspects,” Heath said. “More to come at this point.”

# Store: Building includes ample shop space

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Culp is cleaning out the store, making repairs, taking stock, securing wood with Hampton Lumber Mills and preparing to restart a franchise with Ace Hardware or independently. He isn’t worried about Home Depot.

“If we don’t (make it), the construction company will just consume the store, and the construction company will eat the inventory,” he said. “I have a plan B.”

The expansive store includes ample shop space. Culp is taking inquiries through his building company on what people are interested in renting as he



Edward Stratton/The Daily Astorian

**Culp & Sons Builders Inc. are relocating their offices to the former Warrenton Builders Supply on Main Avenue, while reopening a hardware store and renting out commercial shop space.**

cleans and repairs the building, remodeling spaces to suit.

The relationship between the Culp and Walter families goes back as far as the opening of Warrenton Builders


Supply, when Culp’s father, Jim, was a contractor and one of Walter’s first customers.

“Because of that, I won three buckets of house stain,” Jim Culp said.

The two families grew a

symbiotic relationship, with Warrenton Builders Supply taking messages for the Culp’s construction company, which provided building services and helped bring customers to the hardware store. The Culp surname still adorned a pegboard next to the cash register when Ken Culp first gained entry to the hardware store.

Many have lamented the loss of local shops with knowledgeable staff because of competition from big-box retailers. Culp is hoping to lend his 48 years of construction experience to the hardware store, keeping a regular presence in the back office and providing advice to customers.



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