# What Is Drug Diversion?

Drug diversion is the illegal distribution or abuse of prescription drugs or their use for purposes not intended by the prescriber.[1] Prescription drug diversion may occur at any time as prescription drugs are distributed from the manufacturer to wholesale distributors, to pharmacies, or to the patient.[2] Members of the medical profession may also be involved in diverting prescription drugs for recreational purposes, relief of addictions, monetary gain, self-medication for pain or sleep, or to alleviate withdrawal symptoms.

## The Most Common Types of Drug Diversion

The most common types of drug diversion are:

- Selling prescription drugs;
- Doctor shopping;
- Illegal Internet pharmacies;
- Drug theft;
- Prescription pad theft and forgery; and
- Illicit prescribing.

## **Drug Classes With a High Potential for Drug Diversion and Abuse**

The National Institute on Drug Abuse (NIDA) and the U.S. Drug Enforcement Administration (DEA) have identified the following classes of prescription drugs to have a high potential for diversion and abuse:

- Anabolic steroids;
- Central nervous system depressants;
- Hallucinogens;
- Opioids; and
- Stimulants.[3, 4]

## **Prescriber Precautions That Can Minimize Drug Diversion**

A prescriber should take precautions to avoid giving drug-seeking patients the opportunity to take advantage of them. Precautions include:

- Exercising caution with patients who use or request combination or "layered" drugs for enhanced effects (for example, antipsychotics with opioids or benzodiazepines);
- Documenting thoroughly when prescribing narcotics or choosing not to prescribe;
- Keeping a DEA or license number confidential unless disclosure is required;
- Moving to electronic prescribing so that paper prescriptions are not required;

- Adhering to strict refill policies and educating office staff;
- Using State Prescription Drug Monitoring Programs (PDMPs);
- Referring patients with the need for extensive pain management or prescription-controlled medication to specialized practices; and
- Collaborating with pharmacy benefit managers and managed care plans as they seek to determine the medical necessity of prescriptions for controlled substances.

# **Prescribing Principles That Can Curb the Diversion of Drugs**

Prescribers can curb drug diversion of opioids and other controlled substances by adhering to prescribing principles such as:

- Completing a full evaluation and assessment to verify the need for pain medication;
- Requesting a report of a patient's medication history from the State PDMP before prescribing opioids to patients;
- Screening for substance abuse;
- Prescribing opioids only if alternative therapies do not deliver adequate pain relief; and
- Using pain assessment tools to monitor the effectiveness of controlled substances.

# **Reporting Suspected Drug Diversion**

If a prescriber suspects that drug diversion has occurred, they should document the activity and make a report. The agencies that should be notified of suspected drug diversion include:

- Local law enforcement and local fraud alert networks;
- DEA, for reporting theft or loss of controlled substances, at <a href="https://www.deadiversion.usdoj.gov/webforms/dtlLogin.jsp">https://www.deadiversion.usdoj.gov/webforms/dtlLogin.jsp</a> on the DEA Office of Diversion Control website; and
- U.S. Department of Health and Human Services, Office of Inspector General (HHS-OIG) by email at HHSTips@oig.hhs.gov or by telephone at 1-800-HHS-TIPS (1-800-447-8477); TTY: 1-800-377-4950.

# **Additional Resources**

- For more information about prescription drug diversion, visit <u>https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/Provider-Education-Toolkits/drug-diversion-toolkit.html</u> to review "Prescription Drug Diversion—Use of Legal Drugs for Illegal Purposes" modules 1 and 2 webinars and to download the "What Is a Prescriber's Role in Preventing the Diversion of Prescription Drugs?" booklet.
- For information about fraud prevention and detection compliance guidance, visit <u>https://oig.hhs.gov/fraud/</u> on the HHS-OIG website.
- For more information about drug diversion, visit <u>https://www.deadiversion.usdoj.gov</u> on the DEA Office of Diversion Control website.
- For information specific to preventing opioid drug diversion, refer to <a href="http://store.samhsa.gov/shin/content/SMA14-4742/Toolkit\_Prescribers.pdf">http://store.samhsa.gov/shin/content/SMA14-4742/Toolkit\_Prescribers.pdf</a> on the Substance Abuse and Mental Health Services Administration (SAMHSA) website.
- For information and statistics on prescription drug abuse, visit <u>https://www.drugabuse.gov/drugs-abuse/</u> prescription-drugs-cold-medicines on the NIDA website.

• For more information on strategies to reduce drug diversion in the Medicaid program, visit <u>https://www.</u> <u>cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/MedicaidIntegrityProgram/downloads/</u> <u>drugdiversion.pdf</u> on the Centers for Medicare & Medicaid Services (CMS) website.

To see the electronic version of this fact sheet and the other products included in the "Drug Diversion" Toolkit, visit the Medicaid Program Integrity Education page at <u>https://www.cms.gov/Medicare-Medicaid-Coordination/</u> Fraud-Prevention/Medicaid-Integrity-Education/edmic-landing.html on the CMS website.

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#### References

1 U.S. Department of Health and Human Services. Centers for Medicare & Medicaid Services. Center for Program Integrity. (2012, January). Drug Diversion in the Medicaid Program: State Strategies for Reducing Prescription Drug Diversion in Medicaid. Retrieved January 13, 2016, from <a href="https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/MedicaidIntegrityProgram/downloads/drugdiversion.pdf">https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/MedicaidIntegrityProgram/downloads/drugdiversion.pdf</a>

2 Inciardi, J.A., Surratt, H.L., Cicero, T.J., Kurtz, S.P., Martin, S.S., and Parrino, M.W. (2009, October). The "Black Box" of Prescription Drug Diversion. Journal of Addictive Diseases. 28(4), 332–347. [DOI number 10.1080/10550880903182986; Author Manuscript]. Retrieved January 13, 2016, from <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2824903/</u>

3 U.S. Department of Health and Human Services. National Institutes of Health. National Institute on Drug Abuse. (2015, March). Prescription Drugs & Cold Medicines. Retrieved January 13, 2016, from <u>https://www.</u>drugabuse.gov/drugs-abuse/prescription-drugs-cold-medicines

4 U.S. Department of Justice. U.S. Drug Enforcement Administration. (n.d.). Drug Fact Sheets. [Stimulants: Amphetamines, Cocaine, Khat, and Methamphetamine]. Retrieved January 13, 2016, from http://www.justice.gov/dea/druginfo/factsheets.shtml

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