



KENTUCKY ALL SCHEDULE PRESCRIPTION ELECTRONIC REPORTING (KASPER)

Coordinator/Data Contact:

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State Web Site:

www.chfs.ky.gov/KASPER

Sources of Information for the Database

The Kentucky All Schedule Prescription Electronic Reporting (KASPER) system is Kentucky's prescription drug monitoring program (PDMP). Responsibility for KASPER is with the Cabinet for Health and Family Services (CHFS), Office of Inspector General. KASPER tracks most Schedule II–V controlled substance prescriptions dispensed in Kentucky. Under Kentucky Revised Statute (KRS) 218A.202 practitioners and dispensers are required to report daily to CHFS the Schedule II – V controlled substances they have administered or dispensed. KASPER funding is allocated by the Kentucky Legislature. CHFS has also been awarded funding to support KASPER enhancements under the federal Harold Rogers Prescription Drug Monitoring Program Grants administered by the U.S. Department of Justice, Bureau of Justice Assistance.

Description of the Data Collected

KASPER collects data on Schedule II – V controlled substances dispensed in Kentucky. Data maintained in KASPER include the following:

- patient name, date of birth, address and method of payment
- prescription information including date filled, quantity, days supply and prescription number
- prescriber name, address and Drug Enforcement Administration (DEA) number
- drug name, strength, National Drug Code (NDC) number
- dispenser name, address, phone number and DEA number

Strengths of the Data

KASPER supports improved public health and safety in Kentucky by providing data for health care providers to help identify patients who may be at risk for prescription drug abuse and to verify compliance with a treatment regimen established by the patient's health care team. KASPER is also used as a tool for law enforcement and regulatory officials during bona fide investigations and other appropriate reviews.

Information regarding authorized users of KASPER is utilized to select representative stratified samples for periodic KASPER User Satisfaction Surveys and other approved KASPER user surveys. Results of the user satisfaction surveys are used to identify user requested program improvements and system enhancements, along with desired user training.

Specific Uses of Information

- Analysis and reporting of controlled substance usage trends in Kentucky
- Data integration and analysis projects performed by approved partners. For example, controlled substance usage and public health and safety related issues such as drug related accidents, drug related deaths, drug related crime activity, etc.
- Monitor patient activity (by authorized health care providers to determine patients who may be at risk for prescription drug abuse)
- Monitor provider activity (by authorized regulatory officials during bona fide investigations and other appropriate reviews)
- Monitor patient and provider activity (by authorized law enforcement officials during bona fide drug investigations)
- Gather KASPER user feedback and evaluate KASPER user satisfaction

Data Limitations

CHFS may disclose KASPER data only to entities authorized, and for the purposes specified under KRS 218A.202. KASPER data may also be used by CHFS for investigations, research, statistical analysis, educational purposes, and to proactively identify trends in controlled substance usage and other potential problem areas. However under KRS 218A.240, studies and trend reports prepared using KASPER data cannot identify any individual prescriber, dispenser or patient.

System Evaluation

The data collected are reviewed to eliminate duplicate record transmissions, to validate specific data elements including Drug Enforcement Administration (DEA) numbers and National Drug Control (NDC) numbers, and to perform basic field format edits on remaining data elements.

Data Set Availability

Authorized users have online access to KASPER data for two full years plus the current year. Remaining data from inception of the KASPER program in 1999 are available from archival records for research purposes. Datasets provided for research purposes will not identify any individual prescriber, dispenser or patient.

Average Annual Controlled Substance Prescription Records Reported to KASPER 2006 – 2012	10,725,526
Smallest Geographic Level Released	County
Data Format	Excel Spreadsheet
Cost of Data Set	No Cost

Data Release Policy

Spreadsheet versions of the KASPER controlled substance prescribing and usage data are available upon request from the Office of Inspector General (OIG) data contact. Additional KASPER data can be made available to appropriate research agencies through submission of a formal request to the OIG data contact. Each request should identify the requesting organization, purpose of research, proposed methodology to be employed and publication plan. On a case by case basis, OIG reviews the request and obtains additional information as needed. OIG and the research team agree upon a collaboration plan documenting the study–schedule, methods, analysis, reporting, and publication. Upon review and agreement of the study plan, OIG may approve the request for data. However under KRS 218A.240, studies and trend reports prepared using KASPER data cannot identify any individual prescriber, dispenser or patient.

Data Publications

According to KRS 218A.240 the Cabinet shall, on a quarterly basis, publish trend reports from the data obtained by KASPER. The quarterly KASPER Trend Reports are publically available on the KASPER web site at www.chfs.ky.gov/KASPER. The quarterly trend reports contain information regarding controlled substances reported to KASPER, KASPER usage statistics and prescribing and usage patterns by geographic area in Kentucky. The reports are available to download in PDF format. KASPER Trend Reports do not identify any individual prescriber, dispenser or patient. The trend reports utilize geographic information systems (GIS) software to provide graphical representation of the prescribing and usage data by geography.

Suggested Data Citation

Kentucky All Schedule Prescription Electronic Reporting (KASPER) System. Frankfort, Kentucky: Cabinet for Health and Family Services, Office of Inspector General, [data extraction years].

Contributing Author

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