

## Kentucky All Schedule Prescription Electronic Reporting (KASPER)

**Coordinator:**

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**State Web Site:**

[www.chfs.ky.gov/KASPER](http://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 lies 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.

### **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 Information: name, date of birth, gender, address, and method of payment.
- Prescription Information: fill date, quantity, days supply, and prescription number.
- Prescriber Information: name, address, and Drug Enforcement Administration (DEA) number.
- Drug Information: drug name, strength, and National Drug Code (NDC) number.
- Dispenser Information: name, address, phone number, and DEA number.

### **Strength 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 approved KASPER user surveys. User survey results are used to identify user requested program improvements and system enhancements, along with desired user training.

### **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.

### **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.

### **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. Data sets provided for research purposes will not identify any individual prescriber, dispenser or patient.

- **Average Annual Controlled Substance Prescription Records Reported to KASPER 2010 – 2016:** 11,144,862
- **Smallest Geographic Level Released:** County
- **Data Format:** Excel Spreadsheet
- **Cost of Data Set:** No Cost

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### **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, the OIG reviews the request and obtains additional information as needed. The 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, the OIG may approve the request for data, subject to approval by the CHFS Institutional Review Board. 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 along with a series of quarterly KASPER Threshold Reports produced in collaboration with the Kentucky Injury Prevention and Research Center are publically available on the KASPER web site at [www.chfs.ky.gov/KASPER](http://www.chfs.ky.gov/KASPER). The quarterly trend and threshold reports contain information regarding controlled substances reported to KASPER, KASPER usage statistics and prescribing and usage patterns by age, gender, and geographic area in Kentucky. The reports are available to download in PDF format. KASPER trend and threshold 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**].

<p style="text-align: center;"><b>Contributing Author</b></p>
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