

# **Compliance with Controlled Substances Law**

## **Diversion Control and Prevention 2024 Annual Report**

**Wis. Stat. § 961.36 (3)**



**December 2024**

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## **I. Controlled Substances Board Membership**

The members of the Controlled Substances Board (CSB) are appointed as outlined in Wis. Stat. § 15.405 (5g). The Board consists of seven members with no term expiration dates, including the Attorney General, the Secretary of Health Services, and the Secretary of Agriculture, Trade and Consumer Protection, or their designees; the chairperson of the Pharmacy Examining Board, the chairperson of the Medical Examining Board, the chairperson of the Dentistry Examining Board, and the chairperson of the Board of Nursing, or a designee; and two members appointed by the Governor to serve 3-year terms: one psychiatrist member and one pharmacologist member.

- Doug Englebert, Chairperson – Department of Health Services (Designee)
- Alan Bloom, Vice Chairperson – Pharmacologist
- Yvonne M. Bellay, Secretary – Department of Agriculture, Trade and Consumer Projection (Designee)
- Troy A. Alton – Dentistry Examining Board Representative (Alternate)
- Subhadeep Barman – Psychiatrist
- Cullen M. Eberhardy – Attorney General (Designee)
- David Gundesen – Dentistry Examining Board Representative
- Amanda K. Kane – Board of Nursing Representative
- Gregory Schmeling – Medical Examining Board Representative
- Rober W. Weinman – Board of Nursing Representative
- John G. Weitekamp – Pharmacy Examining Board Representative

## II. Drug Scheduling

Under its authority to promulgate rules under Wis. Stat. Chapter 961, the CSB took scheduling action on the following substances as of October 21, 2024:

### Schedule I

- Addition of 9 Fentanyl-related substances (CSB 2.005):
  - Meta-fluorofentanyl
  - Meta-fluoroisobutyl fentanyl
  - Para-methoxyfentanyl
  - 3-fentanyl
  - 2',5'-dimethoxyfentanyl
  - Isovaleryl fentanyl
  - Ortho-fluorofentanyl
  - Alpha'-methyl butyl fentanyl
  - Para-methylcyclopropyl fentanyl
- Addition of 5 Synthetic Cannabinoids (CSB 2.006)
  - MDMB-4en-PINACA
  - 4F-MDMB-BUTICA
  - ADB-4en-PINACA
  - CUMYL-PEGACLONE
  - 5F-EDMB-PICA
- Addition of ADB-BUTINACA, Alpha-PiHP, and 3-MMC (CSB 2.007)
- Addition of 2-methyl AP-237 (CSB 2.008)
- Addition of N-desethyl isotonitazene and N-piperidinyl etonitazene (CSB 2.009)

### Schedule IV

- Addition of Zuranolone (CSB 2.004)

### **III. The Wisconsin Prescription Drug Monitoring Program**

The Enhanced Prescription Drug Monitoring Program (ePDMP) is a program established by the CSB under Wis. Stat. § 961.385 to combat prescription drug abuse in Wisconsin. By providing information about monitored prescription drugs that are dispensed in the state, it aids healthcare professionals in their prescribing and dispensing decisions. The ePDMP also fosters the ability of pharmacies, healthcare professionals, law enforcement agencies, and public health officials to work together to reduce the misuse, abuse, and diversion of monitored prescription drugs.

#### **2024 Accomplishments**

- Since the WI ePDMP migrated to an enhanced data system in the fall of 2023, the system has allowed for improved data quality and user experience. As a result of this update, processing of submitted dispensing records now occurs in real-time. Additionally, the patient matching algorithm has been improved to effectively accommodate search terms and notably reduced the episodes of falsely matched patient profiles. Results of the user satisfaction survey conducted in September 2024 indicated an 87.5% overall user satisfaction rate among respondents.
- The WI PDMP has expanded its interstate data sharing network to now include 32 states and territories in addition to the Military Health System and Veterans Health Administration. Two state PDMPs joined the data sharing agreement with Wisconsin in 2024 including Alabama and Texas.
- In 2024, the WI PDMP continued to expand access to ePDMP data within an electronic health record (EHR) application by eliminating integration service fees for healthcare organizations. This will continue to greatly benefit under-resourced healthcare facilities and independent practices.

#### **2024 Referrals**

The Controlled Substances Board reviews ePDMP reports and refers potentially suspicious or critically dangerous conduct or practices of a pharmacy, pharmacist, or practitioner to relevant licensing boards.

The Controlled Substances Board made the following licensing board referrals in 2024:

- 8 physicians to the Medical Examining Board
- 3 physician assistants to the Physician Assistant Affiliated Credentialing Board
- 1 Advanced Practice Nurse Prescriber to the Board of Nursing
- 1 dentist to the Dentistry Examining Board

#### **Top 15 Dispensed Monitored Prescription Drugs**

In general, the top 15 drugs have remained the same quarter to quarter, with some changes in the rankings. The Top 15 Dispensed, Monitored Prescription Drugs (by Dispensing) in the third quarter (July-September) of 2024 were:

1. Gabapentin (Other)
2. Amphetamine-Dextroamphetamine (Stimulant)
3. Hydrocodone-Acetaminophen (Opioid)
4. Lisdexamfetamine Dimesylate (Stimulant)

5. Oxycodone HCl (Opioid)
6. Tramadol HCl (Opioid)
7. Lorazepam (Benzodiazepine)
8. Methylphenidate HCl (Stimulant)
9. Alprazolam (Benzodiazepine)
10. Clonazepam (Benzodiazepine)
11. Pregabalin (Other)
12. Zolpidem Tartrate (Other)
13. Buprenorphine HCl-Naloxone HCl Dihydrate (Opioid)
14. Oxycodone w/ Acetaminophen (Opioid)
15. Morphine Sulfate (Opioid)

### **2024 Dispensing Trends**

This section of the report summarizes PDMP data from January 1, 2024-September 30, 2024 (Quarters 1-3) and the same timeframe in 2023, for comparison.

There was a 6% decrease in monitored prescription drugs dispensed in Wisconsin from Q1 to Q3 2024 compared to the same timeframe in 2023. Decreases in dispensing were recorded across all four drug classes: Opioids (9%), Benzodiazepines (8%), Stimulants (3%), and Other (4%). Gabapentin, introduced as a monitored drug in Q3 2021, accounted for 996,146 dispensations in the 'Other' drug class through Q3 2024, a 6% decrease compared to the same timeframe in 2023. Gabapentin dispensing comprised 53% of the total drugs dispensed in the 'Other' drug class in 2024.

Compared to the same timeframe in 2017 when the WI ePDMP was launched, an overall 15% decrease in the total dispensing of monitored prescription drugs was observed. The breakdown of changes between 2017 and 2024 by drug classes are as follows:

- 59% decrease in the number of opioid prescriptions dispensed.
- 53% decrease in the number of benzodiazepine prescriptions dispensed.
- 26% increase in the number of stimulant prescriptions dispensed.
- 134% increase in the number of other prescriptions dispensed. This increase can be largely associated with gabapentin which was introduced as a monitored drug in 2021.

For additional information about the WI ePDMP, go to: <https://pdmp.wi.gov/>

## IV. Special Use Authorization (SUA) Permits

Under Wis. Stat. Chapter 961, the CSB issues Special Use Authorization (SUA) Permits. SUA Permits authorize individuals to manufacture, obtain, possess, use, administer or dispense controlled substances. SUA Permits are necessary for scientific research, instructional activities, chemical analysis and other special uses, including industrial applications, humane societies' use, and drug detection dog training.

### Special Use Authorization Permits Issued

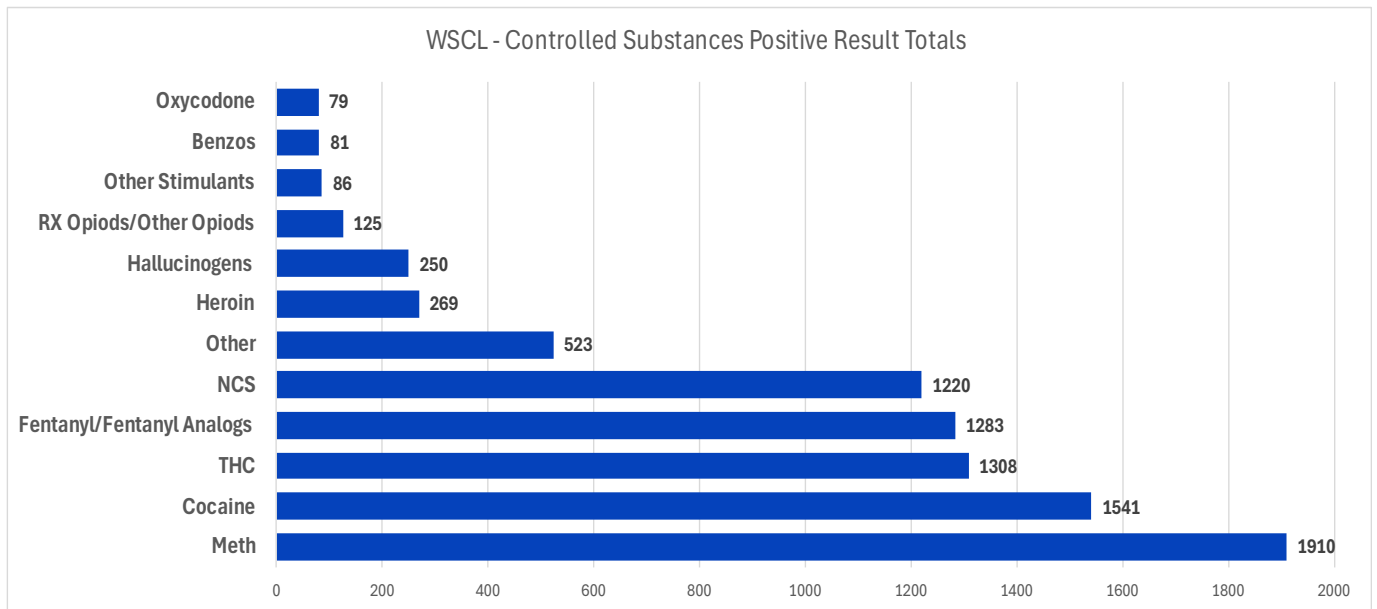
SUA TYPES/ MONTH	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC*	Total per SUA Type
Analytical Lab				2		1				1	1		5
Humane Society	2		1										3
Instruct. Activities													0
Narcotic Dog Training	2	1	4	2			3	4	3		1		20
Research	1	5	5	2		2		6	3				24
Law Enf. Animal Control Officers													0
Industrial/ Commercial Processing													0
Other													0
<b>Total SUA's Issued in 2024</b>	5	6	10	6		3	3	10	6	1	2		52

\*Data current through 11/27/2024

## V. Drug Use Trends in Wisconsin

### Drug Prevalence

The table below displays total results of substances tested by the Controlled Substances Unit of the Wisconsin State Crime Laboratory. This information does not represent total cases nor total substances tested. It is possible for 1 case to have multiple items tested and for 1 item to have multiple drugs present – including residues. Hence the counts shown here are higher than case count and test count.



**\*Notes:**

- The total counts represent completed laboratory assignments from 1/1/2024 – 11/30/2024.
- The “NCS” category includes substances that are not controlled – i.e., acetaminophen, melatonin, ibuprofen, etc.
- The “Other” category includes drugs that do not fall into the other groups.



## **VI. Recommendations for Improving Control and Prevention of the Diversion of Controlled Substances**

1. Work closely with the ePDMP to review referrals of potentially suspicious and critically dangerous conduct or practices, prescribing data and dispensing trends
2. Exercise CSB rule making authority to add, delete or reschedule substances listed in the schedules in Wis. Stat. § 961.14, 961.16, 961.18, 961.20, 961.22 and pursuant to the rule-making procedures of Wis. Stat. Ch. 227
3. Provide information to the public about CSB Actions and the ePDMP
4. Communicate with stakeholders regarding CSB actions, the ePDMP, Diversion Data, Trends and Accomplishments