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Budget Cuts May Allow Florida's 'Pill Mills' To Survive



By [Sulome Anderson](#) (Photo by Sulome Anderson/CNS)

When Karen Perry, founder of the Narcotics Overdose Prevention Education (NOPE) Task Force, learned that she had lost her 21-year-old son, Rich, to an overdose in 2003, she went to his old apartment in central Florida and found stacks of empty prescription bottles.

“They were all written out for oxycodone and oxycontin to several different people,” she says.

Perry learned that her son had bought the drugs from a young man who had engaged in the practice of “doctor shopping,” or visiting many doctors in order to obtain prescription medication. Florida is widely known as the prescription drug capital of the United States. The state’s lack of a prescription drug monitoring service makes doctor shopping much easier. Addicts and dealers from other states travel the so-called “Flamingo Express” or “Roxy Highway” to south Florida in order to visit its “pill mills,” or clinics that exist for the sole purpose of administering opioid pain medications.

In late February, federal and state authorities raided pill mills in three Florida counties in the Miami area, indicting six clinic owners and operators. According to the U.S. Attorney for the Southern District of Florida, Wilfredo Ferrer, Florida prescribes more oxycodone pills than all the other states combined.

Despite this, Florida Gov. Rick Scott recently proposed a series of budget cuts that include dissolving the governor’s Office of Drug Control and repealing the state’s fledgling prescription drug monitoring program, or PMDP, before it’s put into place. Law enforcement officials and legislators worry that this decision could continue to affect prescription drug abuse, not only in Florida, but across the eastern seaboard.

Gov. Scott has said that the monitoring service performs a function that should not be undertaken by the government. He has expressed concerns over what he sees as the system’s invasion of patient privacy and cost to the state, as well as doubts about its effectiveness.



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But Dr. Leonard Lado, an addiction psychiatrist in Naples, Fla., says that these concerns pale in comparison to the system's benefits. "I don't understand the incentive for a Republican governor to prevent this," says Dr. Lado. "It ultimately reduces cost to the state by reducing visits to the emergency room and costs to the DEA. Most importantly, it reduces morbidity."

A 2009 study by the Florida Department of Law Enforcement found that approximately seven people die each day from prescription drug overdoses in Florida.

Florida Republican Sen. Mike Fasano says that Gov. Scott's issues with the service are ludicrous. "Other states have implemented the system without any privacy concerns," he says. Such states include Kentucky, West Virginia, Oklahoma and New York.

The information in the prescription monitoring database would be safeguarded by the federal Health Insurance Portability and Accountability Act, designed to protect confidentiality.

The bill was supposed to be implemented this year. Since Florida has received federal grants and donations to cover the \$1.2 million bill for the system's installation and \$500,000 in annual costs, Sen. Fasano wonders how the implementation and maintenance of this system would affect the state's budget. "There's enough money to start this up," he says. "It's not a funding issue. The governor is using these excuses to prevent the system from being implemented."

Some doctors say that they do have their concerns about the implementation of the system. Dr. Carol Weingrod, an addiction psychiatrist in Miami, says that although there is no doubt that Florida's prescription drug problem has spiraled out of control, a prescription drug monitoring system could potentially violate patient privacy.

Dr. Weingrod says that she often prescribes patients addicted to opiate pain medication small amounts of the drug in order to help them withdraw, and worries that a PMDP would hinder her ability to do so. "If you start making a registry, how will we be able to withdraw people from opiates?" she asks. "I think it's important that people who are addicted to opiates are treated like human beings."

Keith Humphries, a professor of psychiatry and behavioral sciences at Stanford University and former senior policy advisor at the White House Office of National Drug Control Policy, says that Gov. Scott's decision will have a destructive effect on other states. "This will overwhelm the efforts of states like West Virginia, Kentucky and Tennessee to curb their prescription drug abuse problems," says Dr. Humphries.

In a letter to the governor, the chairman of the House Appropriations Committee, Kentucky Rep. Harold Rogers, noted that Florida's lack of a PMDP has had adverse effects in Kentucky, where a large amount of illegal prescription drugs are traced to Florida. Rep. Rogers urged Governor Scott to "go to work" implementing the service, saying that cancelling the Florida program "is



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equal to firing firefighters while your house is ablaze; it neither makes sense nor addresses an urgent crisis.”

Van Ingram, executive director of Kentucky’s Office of Drug Control Policy, is concerned that law enforcement could abuse its ability to enter the database without a subpoena. “When I look at our program in Kentucky, 93 percent of the records are requested by doctors, 3 or 4 percent by pharmacists,” he says of the state’s PMDP service, called KASPER. “So it’s clearly not a government tool, it’s a medical tool.”

According to Ingram, the ultimate goal is to have all 50 states eventually implement a PMDP. “Hopefully, someday all those systems will be able to communicate,” he says. “You take one bite of the apple at a time. Is it a panacea? Will it suddenly stop all prescription drug abuse? No. But it’s the best system we’ve come up with.”

The prescription drug monitoring service won’t bring back Karen Perry’s son, Rich, but she strives to keep his memory alive. Perry’s organization, the NOPE Task Force, has been an important voice in the battle for Florida’s PMDP. “We’ve been fighting for the PMDP since out inception,” says Perry. “The monitoring program is absolutely vital. It will save lives.”

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