Disrupting Pill Mills
Using Data to Investigate and Prosecute Prescription Drug Diversion

Support
This project was supported by Grant No. 2020-YX-BX-K001 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Department of Justice’s Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the SAART Office. Points of view or opinions in this presentation are those of the presenter and do not necessarily represent the official position or policies of the U.S. Department of Justice.

Objectives
- Collaborate with allied professionals to collect and analyze comprehensive data
- Identify connections between at-risk patients and drug-diverting pharmacies and doctors
- Utilize data analysis in conjunction with other intelligence-building techniques to inform charging strategies for prosecuting “pill mill” practices
What kinds of defendants are we looking for?

- Bad doctors
- Bad pharmacists
- Patients with criminal intent and at-risk patients

Using Data to Identify Defendants

- Prescription history data - doctor shopper Reports
- Data from overdose deaths from medical examiners' offices
- Data from EMS or hospitals for "overdose transfers"
- Possession of Controlled Substance charges or arrest data

Goal: to identify patients of interest... but why?
Aggregating Data

Outliers

Who and how does this data identify?

- Bad doctors
- Bad pharmacists
- Patients with criminal intent and at risk patients (except overdose death patients)
  - Patients who are doctor shoppers and/or suffered non-fatal overdoses
  - Patients who have suffered multiple non-fatal overdoses
  - Patients who may have been arrested and suffered non-fatal overdoses
Other Sources of Data

- Problem patients’ prescription history reports
- Other doctors prescribing to these patients
- Anecdotal
  - Other doctors
  - Small pharmacies
  - Nursing community
  - Hospital staff
- Outlier Doctor prescription history reports
- Out-of-county patients

What if my data is limited?

Start with overdose death data
Types of Crimes – Doctors

- State corollaries to prescribing without a legitimate medical purpose or outside the scope of a legitimate medical practice
- Health Insurance Fraud/Theft/Money Laundering
- Possession of a Controlled Substance
- Regulatory Crimes examples
  - Required certificates
  - Improper delegation
  - False or fictitious prescriptions
  - Non-therapeutic prescribing
  - Prescribing to “known” abusers

Outside of the Local Criminal Process

- Report to the Drug Enforcement Administration (DEA)
- Report to regulatory agency
  - Medical Boards
  - Nursing Boards
  - Pharmacy Boards

Evidence to Look for: Deceased Patients

- What was their cause of death?
- What medication was on scene?
- What did their prescription history say?
- What kinds of red flags were known to their family and close friends?
- What kinds of red flags were known or should have been known by their doctors?
- What kinds of medical care were they getting?
- What kinds of treatments were they getting other than prescription drugs?
Evidence to look for: Undercover or Confidential Informant Work

- To establish the basics
- Confidential informants with current prescription history work the best!

Evidence to look for: the Search Warrant Execution

- Almost a must to have a computer forensics expert on scene
- Be picky about what is taken
- Search for controlled substances
- Have your expert on call to ask questions about what he is going to want to see when he reviews the evidence

Cases Against Doctors: Some Examples

- The Traditional Pill Mill
- The Procedure Farm
- The Sympathetic Doctor
- The Struggling Doctor
Rewards from the Process

- Puts bad doctors on notice
- Puts bad pharmacies on notice
- Creates faith in the process from good doctors
- Identifies at-risk patients that may be helped
- Helps family members of deceased victims find closure

Some Points about Patient-Defendants

- There is a difference between a patient who is an addict and a patient who is profiting
- Considerations in plea bargaining
  - Create strict conditions on probation
- Their prescription history reports may be hearsay
  - Get copies of the prescriptions directly from the doctors or the pharmacies

Delivery Resulting in Death — it’s a crime scene!

- Phone dumps – no expectation of privacy for deceased
- Drugs – illicit and prescription drugs are nearby
- Interview all witnesses
- Crime scene photos
- Get as much of the on-scene drugs tested as possible
Delivery Resulting in Death — look for other offenses

- Delivery of Controlled Substance
- Even if a case related to the overdose is not strong, a drug dealer may be identified
- Possession of Controlled Substance
- Assault

Going Forward

- Collaborate with allied professionals to collect and analyze comprehensive data
- Identify connections between at-risk patients and drug-diverting pharmacies and doctors
- Utilize data analysis in conjunction with other intelligence-building techniques to inform charging strategies for prosecuting “pill mill” practices

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