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

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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

- 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

Outliers
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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