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Methods and Mindsets of Drug Seeking Individuals



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Program Objectives

- Define the Desperate, Opportunistic, and Professional drug seekers.
- 2. Explain how perception can relate to your clinic being targeted by drug seekers.
- **3.** Identify safeguards that can help protect your practice from drug seeking individuals.



Overall Objective

To make sure <u>legitimate patients</u> can receive the medication they deserve.









Criminal Street Gangs and Organized Criminal Activity











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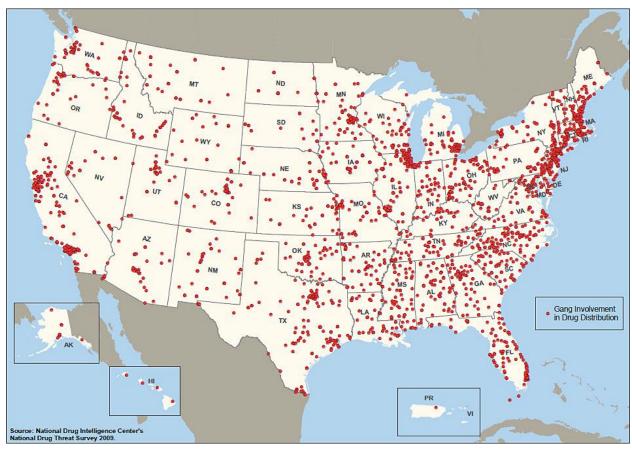


National Drug Intelligence Center National Drug Threat Assessment 2010 (2009 stats) Released February 2010

900,000 criminally active gang members

20,000 Gangs

2,500 Cities



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Motivation

Understanding Motivation Helps Select Effective Safeguards



Categories

Desperate Opportunistic Professional



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Mindset/Motivation

Majority:

Obtains medication to consume

Minority:

Obtains and sells meds to:

- Pay bills
- ✓ Help family, etc...

Duress

 Obtains meds for others to avoid assault/abandonment



Prescription Fraud:

Most likely candidate to commit Prescription Fraud (altering a prescription sheet)



Desperation Scale





Method

- Relies heavily on:
- Past experiences or what they have been told
- Selects a symptom and acts out the part

Clinic Selection

Clinic selection based on:

- Pure chance or
- ✓ What <u>patients</u> say about the clinic



Flags/Indicators

- They may:
- Display aberrant behavior
- Exaggerate symptoms
- Provide excuses to avoid pill counts/urine testing/ physical therapy/weight loss/procedures/etc...
- Request change of medication to avoid withdrawal and/or try to get the medication they want
- Disagree with changing the medication they want
- Subconscious verbal and non-verbal indicator will likely present.



Safeguards – Pre-examination

- 1. Query the state PDMP* the day before the examination.
 - ✓ If you identify any negative information, verify the information prior to confronting the patient.
 - False information can be found in a PDMP query.

* If applicable in your state.



Safeguards – Pre-examination

- 2. Utilize numbered prescription sheets only.
 - Numbered prescription sheets cause every sheet to be unique making prescription fraud much easier to prosecute.
- **3.** Utilize an indelible ink pen to write and/or sign prescription sheets.
 - This makes it next to impossible to wash the writing off the sheet.



Safeguards – General

- Utilize effective risk assessment tools during new patient intake:
 - a. Assess potential risk of abuse
 - b. Assess potential risk of diversion



Safeguards – General

2. Utilize Urine Drug Testing During:

- a. New Patient Assessment
- b. Random at appointment
- c. Random "call to clinic"
- d. For cause

3. Utilize Laboratory Confirmations for UDTs

- a. Point of care (POC) tests may provide a false positive or false negative result.
- b. Information to falsify UDT (POC) outcomes are readily available on the internet.
- c. Laboratory confirmations are much more accurate that point of care results.



Urine Drug Testing

A valuable tool in assessing:

- Presents of medication/drugs
- Lack of expected medication
- The patient's veracity



Safeguards – General

- 4. Utilize Pill Counts
 - a. Random at appointment
 - b. Random "call to clinic"
 - c. For cause

Note: Be sure UDTs and Pill Counting is a part of your patient agreement:

- When UDTs and Pill Counts will be requested
- Who will actually count the patient's pills



Safeguards – General

5. Updated Patient Agreement that covers:

- a. Failing to take part in the treatment plan
- b. Use of alcohol, other drugs
- c. Selling, trading, lending, borrowing medication
- d. Seeing other doctors
- e. Doctor Shopping Issues
- f. Using one pharmacy
- g. Providing UDTs/Pill Counts
- h. Potential outcome of UDTs/Pill Counts
- i. Refusing UDTs/Pill Counts
- j. Destroying medication
- k. Many other issues



Safeguards – General

- 6. Promote an open rapport with your patients.
- 7. Keep a good balance between stating your intention to enforce your opioid agreement and encourage your patients to identify problems they may be experiencing.
- 8. Observe (and understand) the patient's body language.
- **9.** Consider requesting that the patient include their wife or significant other in their treatment and clinic visits.





Why would someone sell Rx pain medication on the street?



Earnings Potential

Street Dealer Clandestine Narcotics

Example:

Purchase \$500 of cocaineAdd baking soda, etc.Sell total content for approx. \$1,000



Earnings Potential

Professional Drug Seeker

Example:

Common Abusable Drug 120 tablets X \$15 \$1800 Street Value - \$600 Pay off - \$25 Office Visit - \$25 Rx co-pay \$1150

\$1150 X 20 doctors = \$23,000.00 per month <u>\$276,000 per year</u>







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Mindset

Gain schedule II and/or III medication because:

- ✓ Rx medication is safer to use.
- ✓ They like the effect.
- ✓ It is easy to sell on the street to make <u>extra</u> money.
- ✓ There is less risk of going to jail.



Mindset

"If I get it great, if I don't, no big deal."

They don't mind getting caught But They <u>do not</u> want to go to JAIL



Mindset

If they believe there is a chance of being charged with a criminal offense, they will likely walk away.



Not uncommon for an opportunistic drug seeker to:

 ✓ Work with a professional drug seeker OR

✓ Become a professional drug seeker.



Desperation Scale







Clinic Selection

They will look for signs of weakness:

- Clinic's location
- Clinic's appearance

They may select their target clinic based on what patients say about their clinic.



Method

- They will make up a symptom and act out the part.
- 2. They will try to fit in.
- **3.** They will not call in early for refills.
- 4. They will go along with treatment.



Attitude The doctor works for me – I'll tell them what I want to tell them. Prove I'm not in pain.

OR They may appear very friendly.

They may bring gifts!



Flags/Indicators

- **1.** May ask for specific prescription
- 2. May request a change of medication (hoping to get the medication they really want)
- 3. May appear controlling or friendly
- 4. May bring gifts
- 5. Verbal and non-verbal cues may present.
- 6. Less intense than a desperate drug seeker



Safeguards – Pre-examination

1. Query the state PDMP the day before the examination.



Safeguards - General

- 1. New Patient Risk Assessment
- 2. Utilize UDTs/pill counts
- **3.** Utilize lab confirmations
- 4. Enforce your patient agreement
- 5. Open rapport with the patient
- 6. Observe and understand body language
- 7. Include family if possible (in treatment)



Opportunistic Drug Seeker

Safeguards – General

Consider placing a sign in your lobby that states: "Illegal drug seeking behavior will be reported and prosecuted by this clinic."







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Five (5) types

- 1. Those who **Counterfeit** or use stolen prescription sheets
- 2. The Roamer tactic
- 3. Those who use Insurance Fraud as a tactic
- 4. The Recruiter tactic
- 5. The Doctor Shopper



The Counterfeit Tactic - Method

- 1. Obtains names and DEA numbers of doctors
- 2. Uses stolen prescription sheets or makes counterfeit sheets that look official
- **3.** Displays a telephone number on the sheet to call for verification
- 4. Uses scapegoat to pass the prescription sheet to the pharmacy
- Scapegoat passes prescription sheet during high traffic periods



The Counterfeit Tactic - Safeguards

- ✓ You cannot stop this from happening.
- If you find out that someone is passing counterfeit prescriptions call:
 - DEA
 - Your local law enforcement agency



The Roamer Tactic

- Two (2) Types
- 1. Non-confrontational
- 2. Charismatic



- The Roamer Tactic Non-confrontational Method
- Obtains vehicle license plates and vehicle descriptions by driving or walking through the parking lot of the clinic
- 2. Uses a "public records" website to obtain the address of the owner of the vehicle
- **3.** Burglarizes the patient's home or sells the information to someone who will



The Roamer Tactic - Non-confrontational Safeguards Considerations:

- Security camera to record parking area
- ✓ Fake security camera

✓ Signs indicating that security camera is in use



- The Roamer Tactic Charismatic Methods
- 1. Enters the waiting room and poses as a patient or someone waiting for a patient
- 2. Strikes up a conversation with a patient
- **3.** Utilizing a high level of social intelligence, will obtain information about the patient, their medication and the pharmacy they use



The Roamer Tactic - Charismatic Safeguards **Considerations:** Monitor the waiting room Educate patients not to share their PHI \checkmark Place a sign in the waiting room: "Because we care about our patients, any discussion regarding your personal information, your medical condition or the medication you are taking will not be permitted while in the waiting room."





Greatest Threat to Clinician



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The Insurance Fraud Tactic Methods

- 1. Locates someone desperate for money who has health insurance
- 2. Pays for the use of their insurance card
- **3.** Obtains fake ID or Driver License and become the insured party
- 4. Gains access to pain specialist through primary care by way of referral
- Uses different fake name and insurance card at each clinic. This makes them <u>untraceable</u>!



The Recruiter Tactic Methods

- 1. Identifies people who have health insurance and want to make extra money
- 2. Teaches the recruited person what to say and how to act to gain a referral to a pain management specialist and to gain the correct type of drugs
- **3.** Pays the recruited person for the full bottle of medication to sell on the street



The Doctor Shopper Methods

- 1. Uses a fake ID or Driver License (no insurance); cash pay patient
- 2. Claims to live somewhere close to the clinic
- **3.** Claims to have lost insurance and cannot obtain insurance due to cost or pre-existing condition
- May drive into rural areas perceives doctors to be less aware of their tactics



- **Overall method/mindset**
- ✓ Makes a living selling prescription drugs
- ✓ Not desperate
- ✓ Stays focused
- ✓ Looks at job as a challenge
- Willing to invest money and time to accomplish objective
- Patient, deliberate, and methodical
- May work 30 to 50 doctors a month



- Once in the Clinic the drug seeker will:
- ✓ Be on time for each appointment
- ✓ Not call in early for refills
- ✓ **Go along** with treatment plan
- Present themselves as other patients do
- ✓ Not draw attention to themselves
- ✓ Plan on staying in the practice for years



Clinic/Target selection Location Distance from other targets Perception Clinic - Appears professional



Clinic/Target selection Information from existing patients ✓ How much time does the clinician spend with you? ✓ Does the clinician push procedures? ✓ Do you have to sign a patient agreement? Are you required to provide urine for testing? ✓ Do you hear about the results that day or later? ✓ Does the clinician require pill counts? ✓ How often are urine tests and pill counts required? ✓ Is it hard for you to convince the clinician to change or increase the dosage of your medication? ✓ Does the clinician ever talk about your hobbies or personal life?



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Safeguards

Verify the authenticity of the patient's ID or DL.
Verify all medical records delivered or faxed.

- ✓ Verify all referrals.
- ✓ Utilize an abuse assessment and a diversion assessment during new patient intake.

✓ Provide a urine drug screen upon new patient intake.

✓ Utilize and <u>enforce</u> a comprehensive patient agreement.
 Explain the agreement to the patient.

 Enforce a patient accountability protocol of randomly urine drug screening and pill counting patients.
 Provide eye-to-eye conversations with your patients.



Safeguards

✓Query your state PDMP a day prior to each patient's appointment.

 Take a digital photograph of all patient's during new patient intake.



Conclusion

Due to different laws throughout the United States, if this information causes you to change <u>ANY</u> of your policies and/or procedures, always gain legal counsel first.





Questions?

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