HEALTH PRACTITIONERS' MONITORING PROGRAM

PROGRAM PERFORMANCE REPORT

2018

PRESENTED TO

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DEPARTMENT OF HEALTH PROFESSIONS

BY THE

MONITORING PROGRAM COMMITTEE

HEALTH PRACTITIONERS' MONITORING PROGRAM

REPORT ON PERFORMANCE - 2018

OVERVIEW

The Health Practitioners' Monitoring Program (HPMP) completed 21 years of operation in December 2018, with 16 years (2003-2018) of partnership via a memorandum of agreement between Virginia Commonwealth University Health System, Department of Psychiatry, Division of Addiction Psychiatry. Wendy Welch, M.D., currently serves as the Medical Director of the program. The mission of Virginia HPMP is to provide an alternative to disciplinary action for impaired practitioners by providing comprehensive and effective monitoring services toward the goal of each participant's return to safe productive practice. Additional program goals are to increase the identification of impairment and encourage treatment and recovery; to assist participants with obtaining a comprehensive assessment; to develop recovery monitoring contracts that address the medical, psychiatric and substance abuse treatment needs of the participants; to provide comprehensive, timely and effective monitoring services to participants; and to raise public awareness of the services available for the identification, treatment, recovery and monitoring of impaired practitioners.

HPMP INTAKE PROCESS SUMMARY

Practitioners interested in, or referred to monitoring services are required to contact the intake coordinator and complete a brief psychosocial interview via telephone that enables the program to determine eligibility for services as well as participation contract components. The psychosocial interview consists of basic demographic information, referral source and reason for referral, vocational information, current treatment providers and medications, and a brief history of treatment for physical, mental health, and substance use disorders. If the practitioner meets the eligibility requirements, a participation contract and appropriate releases of information are sent to the practitioner. Once the signed Participation Contract is received and executed by the program, the practitioner is considered an active participant. For participants not currently engaged in treatment for their illness(es), referrals are made to providers for clinical assessment and/or treatment. Whenever possible, multiple provider options are given so the participant may contact each and make an informed decision regarding what provider they would like to contact. If participants have insurance, the HPMP will work with providers within their network whenever possible. For participants actively engaged in treatment, records are obtained and carefully reviewed. Upon receipt of evidence of adequate treatment engagement,

participants are assigned a permanent case manager to provide on-going supportive monitoring and are invited to meet with their case manager and attend program orientation.

Many of our participants find themselves in financial distress early in the recovery process. On November 1, 2018, Virginia Medicaid expanded eligibility and began accepting enrollment applications from Virginians with incomes up to 138 percent of the federal poverty level. Clinical services under Medicaid expansion started in January of 2019, including expanded addiction services under the Addiction and Recovery Treatment Services (ARTS) benefit. HPMP case managers refer participants to the Cover Virginia website (www.coverys.org) to determine if they qualify for Medicaid and access to enhanced addiction treatment services. The expectation with the expansion is quality services will be more available for our participants with limited resources.

ELECTRONIC MONITORING SYSTEM

The Electronic Monitoring Record (EMR) system available via Virginia HPMP's Third-Party Administrator (TPA) for the toxicology screening program, RecoveryTREK launched in September 2016 is now fully functional. The EMR is a HIPAA-compliant platform which stores all monitoring documents, allows participants, treatment providers, and workplace monitors the ability to submit reporting forms electronically, and provides a secure system for electronic communication (similar to email) and transfer of documents between HPMP staff and participants. The secure portal available to participants allows them access to all of the reports they have submitted as well as daily check-in history and dates, screening results(negative/positive), and costs of toxicology testing. During 2018, the remaining data modules and electronic workplace monitor reporting were launched. In addition, approximately 30 quality-assurance reports were implemented. Data for monthly, quarterly and annual reporting requirements are also now available through RecoveryTREK.

OUTREACH EFFORTS

HPMP leadership has embarked on a focused effort to increase awareness of the program across the Commonwealth by engaging a marketing specialty firm from the private sector. Key accomplishments include:

- Creating discipline-specific outreach flyers
- Enhancing webpage contents to reflect HPMP program

- Revising a downloadable fact sheet available on the program's webpage (www.dhp.virginia.gov/hpmp)
- Development of customized letter campaign that highlights HPMP services
- Development of a focused plan to engage professional organizations, major employers, employee assistance programs and other potential referral sources in learning about and extending communication about HPMP services

2018 PROGRAM INQUIRIES

Virginia HPMP received 226 inquiries from January 1, 2018 – December 31, 2018. Intake interviews were completed for 152 (67%), 64 (28%) were closed [individuals wanted information only, were not eligible for the program, or did not wish to enter monitoring for a variety of reasons (delay entry until their board hearing, did not want to refrain from practice, etc.)], and 10 (4%) remained open at the end of the year. Of the 152 with whom intake interviews were conducted in 2018, 126 (83%) were admitted to the program, 14 (9%) decided not to enroll, 4 did not complete the intake process (3%), and 8 (5%) were pending December 31, 2018.

2018 PARTICIPANT ADMISSIONS

There were 445 active participants at the end of December 2017. During 2018, 142 participants entered HPMP and at the end of December 2018 there were 431 active participants. The licensing boards (34%), enforcement personnel (28%), treatment providers (16%), and employers (8%) were responsible for the majority of referrals to HPMP during 2018. The mean number of admissions per month was 12 (range 5-21). Of the 2018 admissions, 64% were licensed by the Board of Nursing, 25% by the Board of Medicine, 5% by the Board of Pharmacy, 3% by the Board of Dentistry, and less than 2% each by the Boards of Veterinary Medicine, Physical Therapy, and Audiology & Speech-Language Pathology. The age of those admitted ranged from 22-70 years and most were female (72%). Eighty-six percent were monitored primarily for substance use disorders and 14% were monitored primarily for psychiatric disorders. The most frequent drug of choice reported was opioids (43%) or alcohol (43%). The number of intakes and monthly census by Board for the previous four years and current reporting year are presented in Tables 1 and 2 (see Appendix I). Number, gender, and age of active participants on December 31, 2018 are presented in Table 3 below. Primary monitoring diagnosis and drug of choice for those monitored for substance use disorders are presented in Table 4 and Figure 1, respectively.

Table 3: Gender & Age
Active Participants 12/31/18

Board	Number	Mean Age (Range)	Percent Male
Medicine	112	45 (25-74)	70
Nursing	274	40 (22-70)	12
Pharmacy	15	40 (25-56)	67
Dentistry	16	45 (33-67)	56
Other*	14	42 (33-70)	36
Total	431	43 (34-70)	32

* Audiology/Speech Pathology, Optometry, Physical Therapy, Psychology, Social Work, Veterinary Medicine

Table 4: Primary Monitoring Diagnosis
Active Participants 12/31/18

Board	Substance Use Disorder # (%)	Psychiatric Disorder # (%)	Physical Disorder # (%)
Medicine	94 (84)	17 (15)	1 (1)
Nursing	248 (90)	26 (10)	-
Pharmacy	1 (100)	-	-
Dentistry	14 (88)	2 (12)	-
Other*	10 (71)	4 (29)	-
Total	381 (88)	49 (11)	1 (<1)

* Audiology/Speech Pathology, Optometry, Physical Therapy, Psychology, Social Work, Veterinary Medicine

Figure 1: Drug of Choice
Active Participants 12/31/18
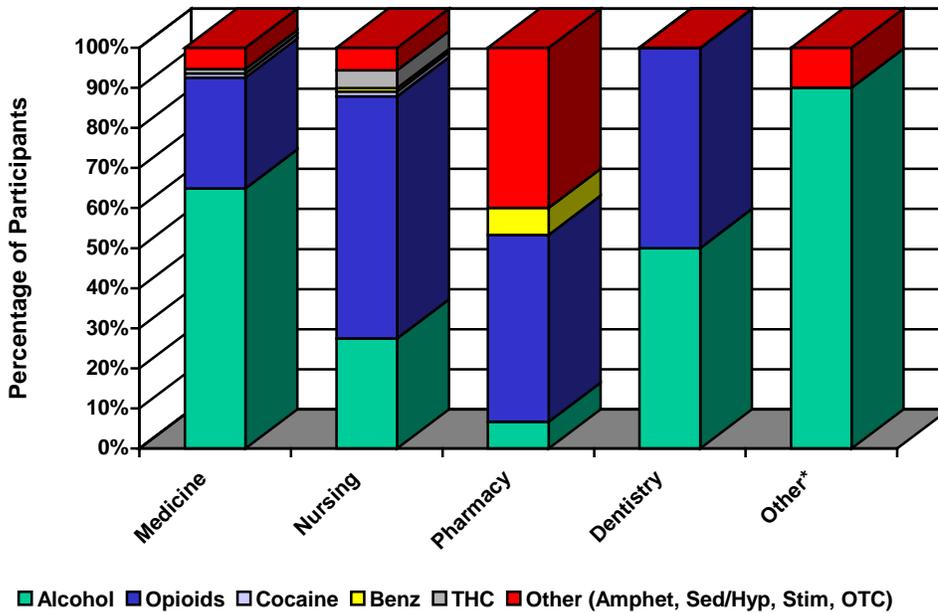

Alcohol Opioids Cocaine Benz THC Other (Amphet, Sed/Hyp, Stim, OTC)

* Audiology/Speech Pathology, Optometry, Physical Therapy, Psychology, Social Work, Veterinary Medicine

MONITORING OUTCOME

Monitoring outcome for participants active in the HPMP 2003 through 2013 are presented in Figure 2 below for all participants. As monitoring contract length is typically five years, participants admitted after 2013 are not included as they have yet to be in the HPMP program for five years and have the opportunity to successfully complete the program. Monitoring outcome is also presented below for physicians (MD, DC, DO, DPM, Intern/Resident) and nurses (LNP, RN, LPN). Monitoring outcomes are defined as follows: completion = successfully completing terms of monitoring contract; resignation = resignation in full compliance with monitoring contract; dismissal = discharged for noncompliance, urgently dismissed for noncompliance, or noncompliant at time of resignation; other = discharged as having reached maximum benefit of monitoring, discharged as ineligible in full compliance with monitoring contract (i.e. license suspended or participant elected not to renew license), or participant died while in the monitoring program. As can be seen in the figure below, approximately 43% successfully completed, 7% resigned, and 47% were dismissed from the program. The rate of dismissal from the program for noncompliance was 23% and 53% for physicians and nurses, respectively.

Figure 2: Monitoring Outcome
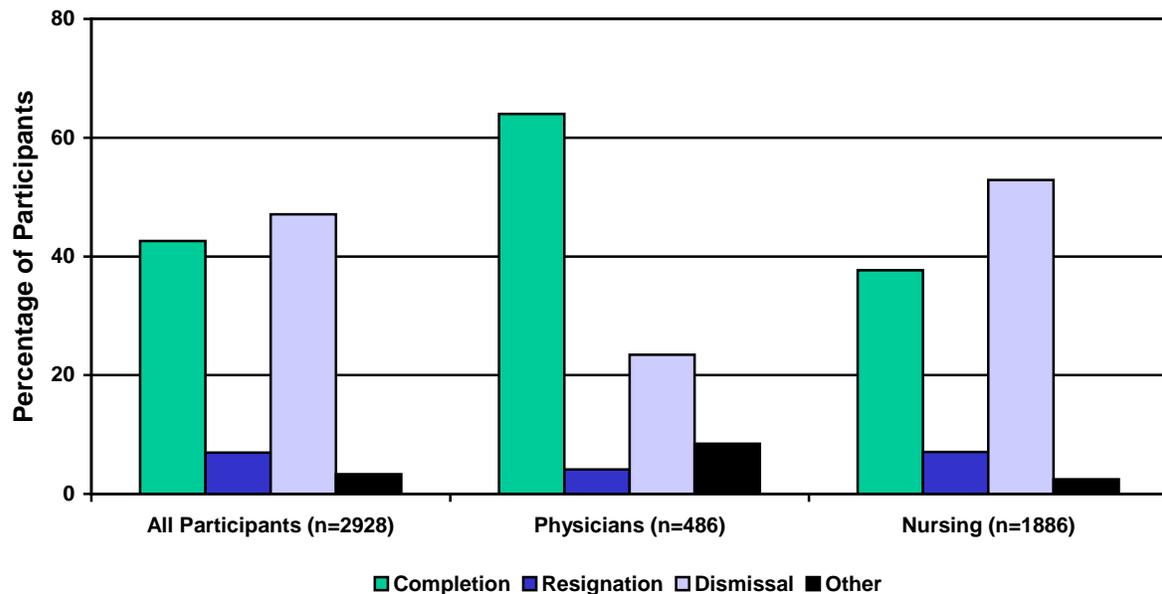
HPMP STAFF

Peggy Wood, Program Manager, DHP
Wendy Welch, MD, CPE, CHCQM – Medical Director
Joel Steinberg, MD – Medical Review Officer
Janet S. Knisely, PhD – Administrative Director
Terry Good, CRA – Personnel/Finance Director

Case Managers	**Case Manager Assistants**
Christopher Bowers (Intake Coordinator)………………Samantha Wilkes
Amy Stewart (Case Manager Coordinator)...…………..Dylan Chaplin
Dawn France………………………………………....Delores Baker
Rebecca Britt……………………………......…..………...Delores Baker
Kathy Ward…………….…………………….…………Samantha Wilkes
Gretchen Miller..…………….……………………….Neetu Sharma
Bridget Turpin...….……………….…………………..Neetu Sharma

Christine Paine – Database Manager, Administrative Director Assistant
Caroline Morton – Receptionist, Program Assistant

Administrative Oversight
Joel J. Silverman, MD - Chief Executive Officer

MONITORING PROGRAM COMMITTEE MEMBERS
Committee Chair – Bruce Overton, DDS
Committee Vice Chair – Charles Williams, MD
Committee Members:
  John Beckner, RPh
  David Boehm, LCSW
  Randy Ferrance, MD, FAAP, SFHM
  Toni Parks, RN
  James Meyer, Citizen Member

APPENDIX I

TABLE 1: NUMBER OF INTAKES BY BOARD 2014-2018

TABLE 2: MONTHLY CENSUS BY BOARD 2014-2018

Table 1
Number of Intakes by Board: 2014-2018

Board	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	2014 Totals
Nursing	10	13	11	7	11	14	12	14	13	10	11	11	137
Medicine	3	1	6	9	2	1	6	7	1	4	1	2	43
Pharmacy	1	1	0	0	0	0	2	0	1	0	2	2	9
Dentistry	0	2	2	0	0	0	0	0	0	0	0	1	5
Other	1	0	3	1	1	2	2	0	0	0	0	1	11
Total	15	17	22	17	14	17	22	21	15	14	14	17	205

Board	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	2015 Totals
Nursing	7	10	12	11	4	8	10	13	5	11	9	16	116
Medicine	4	2	2	6	3	4	2	6	1	5	3	6	44
Pharmacy	0	0	1	1	0	1	1	2	0	1	0	1	8
Dentistry	0	0	2	1	0	1	1	0	1	0	0	0	6
Other	0	0	2	0	0	0	0	0	0	0	1	1	4
Total	11	12	19	19	7	14	14	21	7	17	13	24	178

Board	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	2016 Totals
Nursing	9	9	13	8	5	13	4	13	13	9	9	2	107
Medicine	5	0	1	4	2	2	6	2	2	3	1	5	33
Pharmacy	0	0	1	0	0	1	1	0	0	0	1	1	5
Dentistry	1	0	0	0	0	0	0	1	1	0	0	2	5
Other	0	0	0	1	0	2	0	0	0	0	0	1	4
Total	15	9	15	13	7	18	11	16	16	12	11	11	154

Board	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	2017 Totals
Nursing	9	7	11	4	11	8	10	10	9	10	8	6	103
Medicine	1	3	3	4	3	3	4	3	3	5	2	4	38
Pharmacy	1	0	0	1	0	1	1	0	0	0	0	0	4
Dentistry	1	0	0	0	0	1	0	1	1	0	0	0	4
Other	0	1	0	1	1	0	0	0	2	2	0	0	7
Total	12	11	14	10	15	13	15	14	15	17	10	10	156

Board	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	2018 Totals
Nursing	5	9	6	6	15	13	11	8	6	7	2	3	91
Medicine	1	1	5	3	3	4	9	3	1	2	3	1	36
Pharmacy	1	1	1	1	1	0	0	2	0	0	0	0	7
Dentistry	0	1	0	0	0	0	1	0	0	1	1	0	4
Other	0	0	1	0	0	0	0	0	0	2	0	1	4
Total	7	12	13	10	19	17	21	13	7	12	6	5	142

Table 2
Monthly Census by Board: 2014-2018

Board	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14
Nursing	368	356	367	357	363	354	364	357	367	352	360	371
Medicine	109	108	112	112	114	110	116	115	116	113	113	114
Pharmacy	31	31	31	28	28	26	28	28	29	27	29	31
Dentistry	16	18	20	18	18	18	18	17	16	14	14	15
Other	23	21	24	24	24	26	28	26	26	24	23	24
Total	**547**	**534**	**554**	**539**	**547**	**534**	**554**	**543**	**554**	**530**	**539**	**555**

Board	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15
Nursing	327	336	324	330	310	312	291	304	291	301	292	305
Medicine	109	111	109	115	115	119	116	122	116	121	124	128
Pharmacy	30	30	27	28	24	24	23	25	24	25	24	24
Dentistry	15	15	16	17	17	18	16	16	16	16	15	15
Other	23	23	22	22	20	20	20	20	18	17	16	17
Total	**504**	**515**	**498**	**512**	**486**	**493**	**466**	**487**	**465**	**480**	**471**	**489**

Board	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16
Nursing	314	298	291	295.5	283.5	293	280	288	287	293	289	288
Medicine	133	124	119	123	112	113	111	111	110	112	107	111
Pharmacy	24	23	22	22	20	21	22	22	20	19	18	19
Dentistry	16	16	16	16	14	14	12	13	13	13	13	15
Other	17	15	15	15.5	14.5	16	15	15	14	14	14	15
Total	**504**	**476**	**463**	**472**	**444**	**457**	**440**	**449**	**444**	**451**	**441**	**448**

Board	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Nursing	281	282	282	280	280	284	276	282	274	282	278	284
Medicine	107	110	106	110	105	108	107	110	110	114	110	112
Pharmacy	18	18	18	19	19	20	18	18	17	17	16	16
Dentistry	15	15	15	15	14	15	15	16	16	17	16	15
Other	15	14	9	15	16	16	16	16	17	19	18	18
Total	**436**	**439**	**430**	**439**	**434**	**443**	**432**	**442**	**434**	**449**	**438**	**445**

Board	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
Nursing	274	280	271	277	274	280	281	290	281	288	272	274
Medicine	111	112	113	116	108	110	116	119	113	115	111	112
Pharmacy	16	16	16	17	15	15	15	17	16	16	15	15
Dentistry	15	16	16	16	14	13	14	14	14	15	16	16
Other	17	17	18	18	15	15	14	14	13	15	13	14
Total	**433**	**441**	**434**	**444**	**426**	**433**	**440**	**454**	**437**	**449**	**427**	**431**