

**VIRGINIA DEPARTMENT OF HEALTH PROFESSIONS  
VIRGINIA PRESCRIPTION MONITORING PROGRAM  
MINUTES OF ADVISORY COMMITTEE**

Thursday, September 14, 2023

9960 Mayland Drive, Suite 300  
Henrico, Virginia 23233-1463

<b>CALL TO ORDER:</b>	A meeting of the Advisory Committee of the Prescription Monitoring Program (PMP) was called to order at 10:05 a.m.
<b>PRESIDING</b>	Jeffrey Gofton, M.D., Chair
<b>MEMBERS PRESENT:</b>	Randall Clouse, Office of the Attorney General Sarah Ebbers-West, M.D., Riverside Health System Eduardo Fraifeld, M.D., Pain Medicine Physician Jeffrey Gofton, M.D., Chair, Virginia Department of Health (VDH), Office of the Chief Medical Examiner Virginia LeBaron, Assistant Professor, University of Virginia School of Nursing, Nurse Practitioner Radhika Manhapra, M.D., Hampton VA Medical Center MaryAnn McNeil, Department of Medical Assistance Services Rodney Stiltner, RPh, Vice Chair, Pharmacist, Virginia Commonwealth University (VCU) Health John Welch, 1SG, Virginia State Police
<b>MEMBERS ABSENT:</b>	Alexis Aplasca, M.D., Department of Behavioral Health and Developmental Services (DBHDS) Tana Kaefer, Pharmacist, Bremo Pharmacy
<b>STAFF PRESENT:</b>	Arne Owens, Director, DHP Lisa Hahn, Chief Operating Officer, DHP Erin Barrett, Director of Legislative and Regulatory Affairs, DHP Matthew Novak, Policy and Economic Analyst, DHP Jim Rutkowski, Counsel, Office of the Attorney General Ashley Carter, Director, PMP Carolyn McKann, Program Deputy for Operations, PMP
<b>WELCOME AND INTRODUCTIONS</b>	Ashley Carter welcomed everyone to the meeting of the Advisory Committee and all attendees introduced themselves.
<b>APPROVAL OF AGENDA</b>	Rodney Stiltner made a motion to approve the agenda and Randy Clouse seconded the motion; the agenda was approved as presented.
<b>APPROVAL OF MINUTES</b>	Randy Clouse made a motion to approve the minutes for the meeting held June 2, 2022. John Welch seconded the motion; the minutes were approved as presented.

<b>PUBLIC COMMENT</b>	Ms. Carter shared an email from Jesse Rabinowitz for the committee's review.
<b>DEPARTMENT OF HEALTH PROFESSIONS REPORT: Arne Owens</b>	Arne Owens welcomed everyone to the meeting and recognized the importance of the PMP. Mr. Owens noted that his early state service coincided with the introduction of the PMP; the success of the PMP required the cooperation of all licensed prescribers and dispensers in the Commonwealth. He complimented the advisory committee and thanked them for their valuable input. Mr. Owens emphasized the importance of the PMP as a screening tool for health practitioners, acknowledging that while overdose deaths plateaued in 2019 prior to Covid-19, they have since increased to over 100,000 deaths per year.
<b>LEGISLATION AND REGULATION UPDATE: Erin Barrett</b>	Erin Barrett provided an overview of several bills in the 2023 General Assembly which impacted DHP.
<b>PMP USER SURVEY FINDINGS: Ashley Carter</b>	<p>Ms. Carter reviewed the results of the PMP user survey conducted in January this year. PMP, in collaboration with VDH, contracted with VCU's Survey Evaluation Research Laboratory (SERL) to conduct the survey and compile the results. The project was funded by the Centers for Disease Control and Prevention (CDC) Overdose Data to Action (OD2A) grant. Over 23,000 survey invitations were sent to the survey population: to all registered dispensers (over 8,000) and 15,000 prescribers. Virginia LeBaron inquired whether the prescribers represented a random sample and Ms. Carter confirmed that they did. Actual responses totaled 3,543, a response rate of 15%. Ms. Carter provided detailed analyses of the findings.</p> <p>Ms. Carter opened the floor for questions and Ms. LeBaron inquired about the impact on decision-making for treatment, particularly with respect to the response regarding reducing, tapering, or eliminating opioids. She referenced the email from Dr. Rabinowitz that was shared during the public comment period citing the inability of his wife to obtain opioids for chronic severe pain. She noted that it would be valuable to know the "why" behind the "reduced, tapered or eliminated CS". Though summary statistics were presented, the raw data provided in the full report includes qualitative data and may provide additional context.</p> <p>Rodney Stiltner noted that it would be valuable for the Board of Pharmacy to disseminate this information; perhaps a one-pager or a brief slide deck would be most appropriate. Ms. Carter requested email suggestions regarding the dissemination of this data.</p>
<b>PROGRAM OPERATIONS: Carolyn McKann</b>	Ms. McKann reviewed key operational metrics and success of efforts to increase uptake of PMP integration within the electronic health record (EHR). She shared several examples of PMP access within an EHR.
<b>PROGRAM DIRECTOR</b>	<i>Study on Collecting/Making Available All Prescriptions</i>

**REPORT: Ashley Carter**

Ms. Carter discussed HB2345, the Smartchart Network bill, which directed the Departments of Health and Health Professions to convene a workgroup to study and establish a plan to develop and implement a system to share information regarding a patient's prescription history for medication reconciliation. Three meetings were held over the summer of 2023 and the resulting report is due to the General Assembly 10/1/23. The workgroup recommended existing PMP data collection infrastructure be used to collect all prescriptions. There are two (2) proposed solutions to deliver the data to eligible recipients. The first solution expands the PMP to all prescriptions and the second solution maintains the PMP for covered substances and expands the health information exchange (HIE) to deliver all non-covered substances.

Ms. LeBaron inquired about the rationale for all prescriptions. Ms. Carter responded that the patient safety and need for medication reconciliation are most often cited as justification for collecting all prescriptions. Dr. Eduardo Fraifeld also responded that many patients do not know what medications they are taking nor who their treating provider is, so a complete list is invaluable. Dr. Sarah Ebbers-West stated that she is able to view a patient's prescription history through her hospital's EHR. Ms. Carter responded that what Dr. Ebbers-West is describing is a subscription to a commercially available service which aggregates data from pharmacy benefit managers and many pharmacies. However, this data source is incomplete and, as a subscription-based service, may be cost-prohibitive to providers.

*Medical Cannabis Reporting*

Ms. Carter provided data demonstrating the rapid rise in cannabis dispensations since they were first collected by the Virginia PMP in 2020. Gabapentin was scheduled in 2017 and was the most frequently prescribed covered substance until cannabis dispensations exceeded them during 2023.

Also, with respect to cannabis products, HB2368 was passed during the 2023 General Assembly session which changed the way cannabis products were reported on the patient's PMP report. Prior to July 2023, each pharmaceutical processor chose the names for the products; this legislation requires that the drug name be displayed as the primary cannabinoid (Tetrahydrocannabinol, Tetrahydrocannabinol-A, Cannabidiol, or Cannabidiol-A).

*Funding*

Ms. Carter briefly reviewed PMP funding. \$11M remains from the Trust Account and is expected to be depleted by 2030. The Virginia PMP was also awarded \$361,219 from the Opioid Abatement Authority to offset costs of clinical workflow integration. For several years, Virginia PMP has received \$1.1M annually from the Overdose Data to Action (OD2A) grant; however, a new grant cycle began this month and support for PMP will be limited to \$550,000 annually.

	In closing, Ms. Carter noted two topics the program is monitoring going forward. A bill in the last General Assembly session, HB1814, would have eliminated the exemption from PMP reporting for narcotic treatment providers. The bill passed the original chamber but was withdrawn by the patron after crossover. Dr. Ebberts-West inquired why methadone is not reported to the PMP and Ms. Carter cited the federal privacy statute 42CFR Part 2. Additionally, Narcan became available over the counter this month. While still reportable to the PMP when dispensed as a prescription, reported dispensing will likely decline considerably.
<b>NEXT MEETING DATE FOR 2024:</b>	June 5, 2024
<b>ADJOURN:</b>	With all business concluded, the meeting was adjourned at 11:58 a.m.
	_____ Jeffrey Gofton, M.D., Presiding
	_____ Ashley Carter, Director