# **Governor's Task Force on Prescription Drug and Heroin Abuse**

## Data and Monitoring Workgroup Meeting One, Minutes (Final) November 12, 2014

#### **Members/Staff Present:**

Co- Chair: Carol Forster, M.D. Mid-Atlantic Permanente Medical Group Co- Chair: Katya Herndon, Chief Deputy, Department of Forensic Science Staff: Ralph Orr, Director, Virginia Prescription Monitoring Program Staff: Chris Palmer, Graduate Student Intern, Health and Human Resources Baron Blakely, Research Analyst, Department of Criminal Justice Services Greg Cherundolo, ASAC, Richmond DEA-US DOJ Delegate Charniele Herring, Virginia House of Delegates Brian Hieatt, Sheriff, Tazewell County Rosie Hobron, MPH, Statewide Forensic Epidemiologist, VDH-OCME Major Rick Jenkins, Deputy Director, BCI, Virginia State Police Rusty Maney, RPh, Richmond District Pharmacy Supervisor, Walgreens Marty Mooradian, Impacted Family Member Amanda Wahnich, MPH, Enhanced Surveillance Analyst, VDH Deborah Waite, Ops Manager, Virginia Health Information Anne Zehner, MPH, Epidemiologist, VDH

## Members Absent:

Marissa Levine, M.D., State Health Commissioner,

## **Meeting Agenda**

Welcome and Introductions Overview of PMP Discussion of Potential Topics for Initial Recommendations Discussion of Workgroups Needs Additional Perspectives/Representation Additional Research/Presentations/Information Next Steps

#### Welcome & Introductions

#### Overview- Dr. Forster

Workgroup mission: To advance solutions to share and integrate data among relevant licensing boards, state and local agencies, law enforcement, courts, health care providers and organizations, and programs such as the PMP, in order to clarify and address public safety and public health concerns, understand emerging trends, and utilize data-driven decision-making to mitigate harm.

### Potential recommendations discussed:

- Adding pharmacists to those who have mandatory registration with the PMP
- Reducing the list of those who are exempt from reporting to the PMP
  - VA, DOD, veterinarians
- Expanding who can access the PMP to reflect the team approach that is now being used in many practices (as opposed to the current system, which ties pharmacist use to the dispensing function, and prescriber use to the prescribing function)
  - Maryland ties use to scope of practice Action Item: Research for other alternatives?
- Sending "unsolicited reports" in cases involving high risk combinations of drugs (narcotics, benzodiazepines, Soma?)
- Revising statutory requirements for mandatory PMP use
  - Code § 54.1-2522.1 (effective July 1, 2015) requires treatment to be expected to last more than 90 days and there to be a treatment agreement should this time frame be shortened and should the treatment agreement be required or is it simply a loophole?
  - Tennessee and Kentucky were referenced as other state statutes to consider
- Sending prescriber feedback in the form of "report cards" for "outliers" or "high-risk notices".

## **Discussion of Workgroup Needs**

- 90 Day Use Period: There has been quite a bit of discussion regarding prolonged use of an opioid. After 90 days of use there is a higher correlation to long term addiction problems.
- What are the current statutory mandates regarding prescribers to use PMP?
- Morphine equivalent score provides a measurement of dosage across narcotics. Medicare is currently using this measurement to track drug use.
- More data on Heroin use is needed.
- Exploration of best practices of states that have implemented mandatory Prescription monitoring programs.
- Overdose data would be helpful (EMS/hospitals are not reporting overdoses so law enforcement cannot conduct criminal investigations when they occur Possible recommendation for mandatory reports to law enforcement. Possible referral to Education Workgroup
- Treatment data (or input from Treatment Workgroup) idea of allowing substance abuse counselors to access PMP was also raised
- Presentations for Next Meeting (in addition to items referenced above under recommendations where we can provide more info):
  - o DEA
  - Morphine Equivalent Dose (morphine equivalent score on PMP report)
  - o NARxCHECK

## Additional Participants for Workgroup Discussed:

Carol Pugh from OEMS or other source for Emergency Room Overdose data

Meeting Adjourned- Next meeting December 1, 2014, location to be determined.