

Governor's Task Force on Prescription Drug and Heroin Abuse

Data and Monitoring Workgroup

Meeting Two, Minutes APPROVED

December 16, 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
Baron Blakely, Research Analyst, Department of Criminal Justice Services
Timothy Coyne, Public Defender
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
Lisa Miller, DVM
Amanda Wahnich, MPH, Enhanced Surveillance Analyst, VDH
Anne Zehner, MPH, Epidemiologist, VDH
Marty Mooradian, Impacted Family Member

Members/Staff Absent:

Greg Cherundolo, ASAC, Richmond DEA-US DOJ
Marissa Levine, M.D., State Health Commissioner
David Sarrett, DMD, MS, Dean, VCU School of Dentistry
Deborah Waite, Ops Manager, Virginia Health Information
Staff: Chris Palmer, Graduate Student Intern, Health and Human Resources

Guests:

Enrique Cancel, DEA (representing Greg Cherundolo)

Meeting Agenda

Welcome and Introductions
Review Minutes from December 1, 2014
Review Recommendation Worksheet and Prioritize
Review Presentation for Task Force
Determine next meeting

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.

The meeting was called to order at 10:03 A.M.

Welcome & Introductions

All Workgroup members and guests introduced themselves to fellow attendees.

Review of Minutes from December 1, 2014

Dr. Forster asked Workgroup members to briefly review the minutes from the previous meeting and make comments/suggestions. The minutes were amended, and approved as amended.

Review of Worksheet Recommendations and Prepare Presentation for Task Force

The Workgroup discussed the potential recommendations listed on the worksheet (Appendix 1) as well as a new development regarding availability of PMP data for use in civil proceedings and the need for support from the Secretariat level to enable/authorize data sharing between agencies and programs. A number of the potential recommendations listed on the worksheet will be discussed at the next meeting of the workgroup.

A presentation was developed breaking several recommendations into 5 broad recommendations (Appendix 2) for immediate consideration by the Task Force members. These recommendations were broken down further into Legislative Short Term Action Items and Short Term Action Items (not requiring legislative action but support or action by the applicable agencies in the various Secretariat(s)).

The short term action items presented were as follows:

Legislative Short Term Action Item: Amend 54.1-2522.1

- Add Pharmacists to mandatory PMP registration requirement
- Allow for registration not based on renewal cycle
- Remove language potentially discouraging use of treatment agreements

Legislative Short Term Action Item: Amend 54.1-2521

- To require reporting of prescriber National Provider Identifier (NPI) for prescriptions for human patients
- To require “Species Code” as a required data element

Legislative Short Term Action Item: Amend 54.1-2523

- Clarify that PMP data shall not be available for civil subpoena nor shall such records be deemed admissible as evidence in any civil proceeding

Short Term Action Item: Placement of Morphine Equivalent Doses per Day Information on PMP Reports

- Direct applicable licensing boards to develop improved guidance on use of MEDD information in making treatment or dispensing decisions

Short Term Action Item: Develop clinically oriented criteria for unsolicited reports to prescribers on specific patients

- Identify patients with high risk combinations of controlled substances
- Identify patients receiving more than 100-120 morphine milligram equivalent doses/day

Short Term Action Item: Develop Individual Prescriber Feedback Reports

- To contain up to 7 data points such as the number of a prescriber's patients receiving over 100-120 morphine equivalent doses/day

NOTE: NPI and Species Code reporting to PMP a requirement to fully implement this recommendation

Short Term Action Item: Direct applicable agencies to share data on prescription drug and heroin abuse, overdoses, drug seizures, arrest information, etc to analyze information to mitigate harm from prescription drug and heroin abuse based on existing authority to share data

The next meeting of the Workgroup will be determined once the next meeting(s) of the Task Force are announced.

The meeting was adjourned at 12-10 P.M.