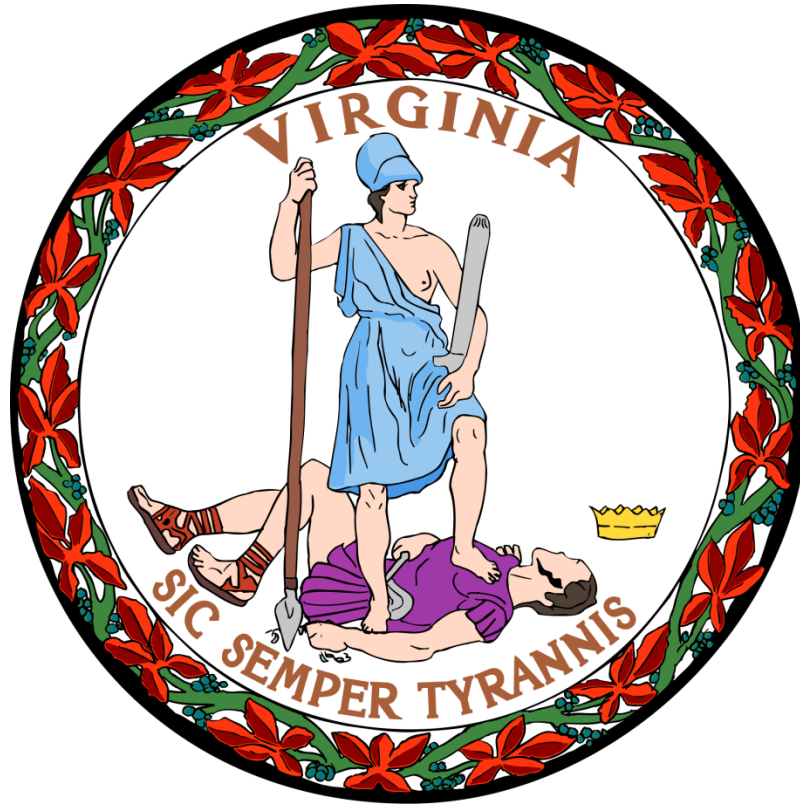




Governor's Taskforce on Prescription Drug & Heroin Abuse



Data and Monitoring Workgroup Recommendations

March 19, 2015

Data & Monitoring Workgroup

Accepted Recommendations

1. Amend § 54.1-2522.1 to add pharmacists to mandatory PMP registration requirement, allow for registration not based on renewal, and remove language potentially discouraging use of treatment agreements
2. Amend § 54.1-2521 to require reporting of prescriber National Provider Identifier (NPI) for prescriptions for human patients and to add “Species Code” as a required data element, which will enable the PMP to determine in what specialty the prescriber is practicing
3. Amend § 54.1-2523 to clarify that PMP data shall not be available for civil subpoena nor shall such records be deemed admissible as evidence in any civil proceeding
4. Place Morphine Equivalent Doses per Day (MEDD) information on PMP Reports
5. Develop clinically oriented criteria for unsolicited reports to prescribers on specific patients
6. Develop individual prescriber feedback reports
7. Direct applicable agencies to share data on prescription drug and heroin abuse, overdoses, drug seizures, arrest information, etc., so that data can be analyzed to mitigate harm from prescription drug and heroin abuse



Data & Monitoring Workgroup Recommendation Update

Recommendation #1 - Amend §54.1-2522.1

- HB1841 passed the General Assembly (Patron - Delegate Herring)
- Requires all prescribers and pharmacists to be registered with the PMP (provisions effective January 1, 2016)
- Requires prescribers to request info from the PMP before prescribing benzodiazapine or an opiate anticipated at the onset of treatment to last more than 90 days (eliminates treatment agreement requirement)



Data & Monitoring Workgroup Recommendation Update

Recommendation #3 - Amend §54.1-2523

- HB1810 passed the General Assembly (Patron - Delegate Herring)
- Clarifies that records in possession of the PMP may not be used in civil cases:
 - Shall not be available for civil subpoena
 - Shall not be disclosed, discoverable or compelled to be produced in a civil proceeding
 - Shall not admissible as evidence in a civil proceeding for any reason



Data & Monitoring Workgroup Recommendation Update

Recomm. #4 – MEDD Score on PMP

- PMP vendor is working to add Morphine Equivalent Doses per Day (MEDD) score on PMP reports
- PMP will conduct quality assurance testing prior to full implementation
- Resources explaining the MEDD Score will be made available
- Anticipated implementation on or before July 1



Data & Monitoring Workgroup Recommendation Update

Recomm. #5 – Unsolicited Reports

- Presentation on Kaiser Permanente prescriber feedback reporting
 - “Triad” reports
- Discussion of possible unsolicited reports:
 - Clinically oriented criteria (e.g., patients on Triad (carisoprodol, opiates and benzodiazepine))
 - Indiscriminate prescribing or dispensing (e.g., geographic region)



Data & Monitoring Workgroup Recommendation Update

Recomm. #6 – Prescriber Feedback Reports

- Presentation on Kaiser Permanente prescriber feedback reporting
 - Drug utilization
 - Drug seeking behavior
- PMP is exploring this type of reporting, but is currently unable to ascertain prescriber specialty (Recommendation #2 would have amended § 54.1-2521 to require NPI number and species code, which would provide specialty info to PMP)



Data & Monitoring Workgroup Recommendation Update

Recommendation #7 – Data Sharing

- Reviewed information on **RxStat**, a data sharing project from New York City in which public safety and public health have collaborated to generate information to assist the City's response to prescription opioid and other drug misuse
- Preliminary discussion to identify available data and sources of data in Virginia, as well as possible ways to publish and the need for analysis of the data



Data & Monitoring Workgroup: New Opportunities

1. Referral to Treatment Workgroup:

- Assist persons in regional/local jails with re-entry by addressing substance abuse and/or mental health issues during incarceration in order to break the cycle of substance abuse within this population

2. Potential Legislative proposals:

- Expand access to PMP information to clinical (non-dispensing) pharmacists and consulting physicians (not necessarily the prescriber) involved in “care team” of the patient
- Shorten timeframe in which dispensers must report to PMP (currently, within 7 days)



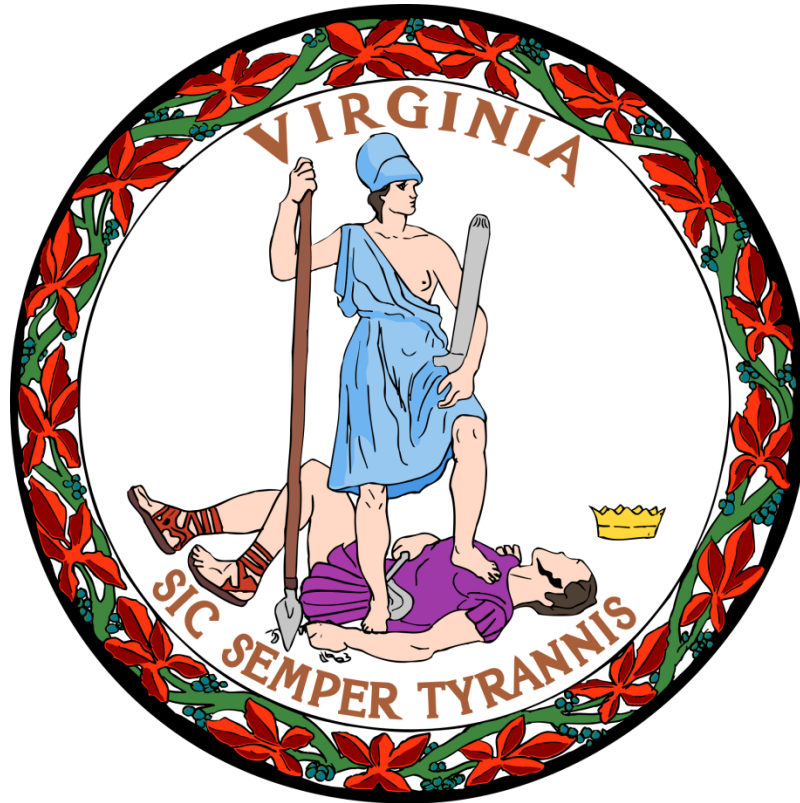
Data & Monitoring Workgroup Recommendations

Questions & Comments?



Governor's Task Force on
Prescription Drug & Heroin
Abuse

Governor's Heroin & Prescription Drug Taskforce



Data and Monitoring Workgroup

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