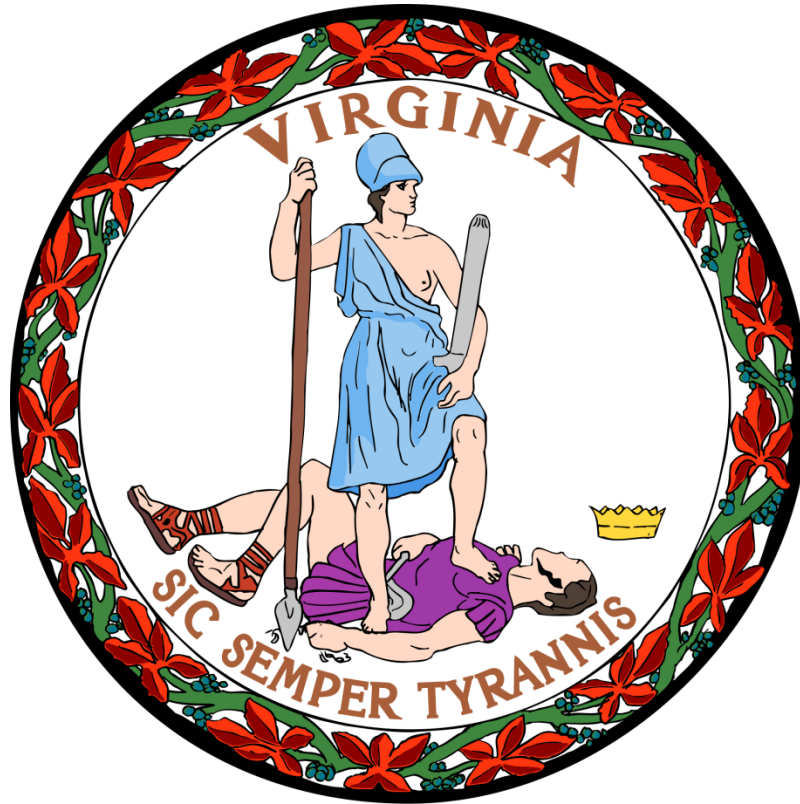




Governor's Task Force on Prescription Drug & Heroin Abuse



Data & Monitoring Workgroup Recommendations

May 12, 2015



Data & Monitoring Workgroup Completed Recommendation

House Bill 1841 (Del. Herring) – Code § 54.1-2522.1 amended to:

- Require all prescribers and pharmacists to be registered with the PMP (provisions effective January 1, 2016)
- Require prescribers to request info from the PMP before prescribing benzodiazepine or an opiate anticipated at the onset of treatment to last more than 90 days (eliminates treatment agreement requirement)



Data & Monitoring Workgroup Completed Recommendation

House Bill 1810 (Del. Herring) – Code § 54.1-2523 amended to:

- Clarify 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 Status of Accepted Recommendation

Accepted Recommendation:

Amend Code § 54.1-2521 to enable the PMP to determine in what specialty the prescriber is practicing by requiring the reporting of:

- prescriber National Provider Identifier (NPI) for prescriptions for human patients; and
- “species code”

Status Update:

- Regulatory process is being initiated to implement this recommendation



Data & Monitoring Workgroup Status of Accepted Recommendation

Accepted Recommendation:

Add Morphine Equivalent Doses per Day (MEDD) Score to PMP reports

Status Update:

- Quality assurance testing has been completed by PMP
- Vendor working to add explanatory statement to accompany MEDD score prior to implementation
- To be completed by July 1, 2015





Data & Monitoring Workgroup Status of Accepted Recommendation

Accepted Recommendation:

Develop clinically oriented criteria for unsolicited reports to prescribers on specific patients

Status Update:

- PMP will be reviewing with Advisory Panel to recommend criteria to DHP Director
- PMP is also exploring issue with its vendor



Data & Monitoring Workgroup

Status of Accepted Recommendation

Accepted Recommendation:

Develop individual prescriber feedback reports

Status Update:

- NPI and species code will be added to PMP through regulatory process
- PMP reviewing issue with vendor and IT support to determine intermediate solutions



Data & Monitoring Workgroup Status of Accepted Recommendation

Accepted Recommendation:

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

Status Update:

- Workgroup Subcommittee created
- Long Term Recommendation being made as a result of Subcommittee's discussions



Data & Monitoring Workgroup Long Term Recommendation

Creation of Ongoing Data Committee

- Comprised of analysts from applicable SPSHS and SHHR agencies
- Study data to better understand the ways in which criminal justice and health-related issues intersect
- Designed to improve government responses to crises, as well as identifying and responding to concerns before they become crises
- Analysts would share appropriate (de-identified) data, meet regularly, and provide an annual trends report to the SPSHS and SHHR
- Preliminary focus – mitigating harm from prescription drug and heroin abuse



Data & Monitoring Workgroup Legislative Recommendations

Expand PMP Access – Team Healthcare

- Amend Subsection C of § 54.1-2523 to permit clinical (non-dispensing) pharmacists and consulting physicians (not necessarily the prescriber) involved in “care team” access to PMP information on the patient

Mandate PMP Reporting Within 24 Hours

- Amend §54.1-2521 to shorten the timeframe in which dispensers must report to PMP (currently, within 7 days per regulation) to within 24 hours of dispensing



Data & Monitoring Workgroup Legislative Recommendations

Allow PMP Reports in Medical Records

- Amend § 54.1-2525 to clarify that PMP reports may be placed in the medical record

Expand Mandatory Requests to PMP

- Amend § 54.1-2522.1 to expand mandatory requests to include the initial prescribing of an opiate or benzodiazepine and periodic reports thereafter, not to exceed 90 days, with limited exemptions





Data & Monitoring Workgroup Legislative Recommendations

Permit Unsolicited Reports on Prescribers and Dispensers to Law Enforcement and Licensing Boards

- Amend § 54.1-2523.1 to authorize unsolicited reports on outlier prescribing and dispensing
- PMP should provide notice to prescribers and dispensers when their records meet criteria
- Notice should include information regarding the specified criteria and advise that, if outlier prescribing or dispensing continues for a certain period of time, information may be forwarded for investigation to law enforcement or licensing board





Data & Monitoring Workgroup Recommendation for Further Review and Consideration

Continuing Oversight for Task Force Recommendations

- Recommend the identification and/or authorization of a group or entity to provide oversight on the implementation of Task Force recommendations





Data & Monitoring Workgroup Recommendation for Further Review and Consideration

Mandatory Continuing Education

- Recommend that licensing boards mandate continuing education on issues related to prescription drug abuse
- Refer to Education Workgroup





Data & Monitoring Workgroup Recommendation for Further Review and Consideration

Special Consideration

- Recommend that pregnant women and children need special consideration and coordination of responses (by schools, law enforcement, treatment providers and healthcare providers) to effectively address their substance abuse issues
- Refer to Treatment Workgroup





Data & Monitoring Workgroup Recommendations

Questions & Comments?



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Abuse