Opioid Pain Prescribing Regulations

- Boards of Medicine & Dentistry regs adopted
- Consider non-pharmacologic and non-opioid tx
- Acute pain: 7 day supply or less
- Surgical pain: 14 day supply or less
- Chronic Pain: MME limits; naloxone coprescribing; PMP every 3 months
- Limit co-prescribing of benzodiazepines, etc
- Veterinary Medicine Regulations in review

Buprenorphine Prescribing Regulations

- Buprenorphine Medication Assisted Treatment (MAT) of Addiction
- Abuse of monoproduct (Subutex)
- Use of monoproduct limited to:
 - Pregnancy
 - Converting from methadone
 - Non-tablet form
 - BOM considering small % allowance for intolerance

Decreasing the Pipeline of Addiction

- Opioid crisis directly related to prescribing
 - 80% heroin addicts began with prescription opioids
 - Pain regulations decrease amount prescribed (7 days acute pain)
- July 1 PMP check 7 day prescription (was 14)
 - SB 1232 (Dunnavant) HB 1885 (Hugo)
 - Avoid PMP hassle with shorter prescription
- Fewer patients become dependent or addicted
- Fewer pills in medicine cabinets = less diversion
- Fewer Virginians enter the Pipeline of Addiction

Other Initiatives

- Opioid Curriculum Workgroup (Secretary Hazel)
 - Schools of Medicine, Osteopathy, Pharmacy,
 Dentistry, Physician Assistants and Nursing
- e-Prescribing Workgroup (Secretary Hazel)
- Integration of the PMP into EMRs
 - \$3M Purdue Pharma Grant
 - \$250K Budget Amendment (pending CMS match)