

**NH PDMP Advisory Council Meeting  
June 20, 2016  
OPLC/NH Board of Pharmacy**

**Meeting Minutes**

**Advisory Council Members Present:**

David Strang, MD, Chair, NH Medical Society  
Charles Albee, DMD, NH Board of Dental Examiners  
Sarah Blodgett, NH Board of Medicine (BOM) (4:13 pm)  
David DePiero, NH Hospital Association (NHHA)  
Michael Dupuis, NH Board of Pharmacy (BOP)  
Karin Eckel, NH Attorney General's Office  
Tony Guerino, DVM, NH Board of Veterinary Medicine  
Joseph Harding, NH Dept. of Health and Human Services (DHHS)  
Eric Hirschfeld, MS, MAGD, NH Dental Society (via phone)  
Denise Nies, RN, Executive Director, NH Board of Nursing (BON)  
Jonathan Stewart, Community Health Institute (CHI)  
Michael Viggiano, RPh, State Pharmacy Associations

**Advisory Council Members Absent:**

Richard Crate, NH Police Chiefs' Association  
Kate Frey, New Futures

**Also Attending:**

Michelle Ricco Jonas, Manager, NH PDMP  
Joanie Foss, Admin Assistant, NH PDMP  
Jim Giglio, TTAC (via phone)  
Patrick Knue, TTAC (via phone)  
Jim Potter, NH Medical Society (via phone)

The meeting began at 3:07 pm.

Introductions were made and a special welcome was given to Joanie Foss, the new Administrative Assistant to the PDMP, who is attending her first Advisory Council meeting.

**1. Review & Approve Minutes**

- April 18, 2016 – Motion by C. Albee. Second by M. Viggiano.  
All in favor without change
  
- May 16, 2016 – Motion by C. Albee. Second by K. Eckel  
All in favor without change

**2. Sub Committee Reports**

• **Finance: (M. Ricco Jonas)**

Proposed collaborative work with the Institute of Health Policy and Practice (IHPP) at the University of New Hampshire (UNH) was reviewed. They have agreed to “self fund” their work with the PDMP. This is welcome news and will

free up \$50,000 that was earmarked for PDMP evaluation.

IHPP would work to identify data available through the PDMP, define the reporting and informational needs of PDMP staff and stakeholders, draft reporting templates, and review the reporting templates with PDMP staff and its data vendor (HID). Specifically, IHPP would work with PDMP staff to accomplish the following based on de-identified data:

- 1) Acquire a data dictionary and related documentation about the PDMP, including report templates from other state PDMPs (month 1)
- 2) Assist and coordinate the sharing of formatted report templates to incorporate benchmark reporting on Schedule II dispensing by time and county, with possible reporting to and inclusion in the NH Drug Monitoring Initiative report (month 2-6)  
Discussion ensued about why only Schedule II drugs and not IIIs and IVs as well to identify trends. There are opioids in all three schedules and benzodiazepines (highly abused as well) are mostly found in Schedule IV. M. Ricco Jonas would consider reports on all three schedules.
- 3) With guidance from the PDMP staff, solicit feedback from PDMP-identified stakeholders to better understand the needs for the information and analysis of the PDMP data. Enhance provider information and compliance. Include guidance from multidisciplinary action groups such as the State Epidemiological Outcomes Workgroup, Governor's Commission on Alcohol and Drug Abuse Prevention, Intervention and Treatment, and the NH Board of Medicine Advisory Council (months 1-3)
- 4) Draft reporting templates specifically focused on the informational needs and development of the PDMP annual report due September 2016 (months 2-3)
- 5) Work with the administrative staff at the PDMP and data vendor (HID) to implement data analysis and reporting (months 4-9)
- 6) Review and revise reporting templates based on user feedback, vendor input and PDMP needs (months 9-12)
- 7) Identify a distribution process for additional reports from the PDMP (months 11-12)

M. Ricco Jonas discussed the need to set up an MOU/contract with IHPP and will be connecting with the Board of Pharmacy counsel to discuss what needs to be done to accomplish this.

- This collaboration with IHPP will be useful in informing the legislature of the capacity the program may need, to get more data out of the PDMP.

M. Ricco Jonas will send out the most recent report from the State Police (IAC report) to the Advisory Council. This will contain information about opiate deaths, ED admissions, treatment, etc.

- **Implementation**

- a. **General Update (M. Ricco Jonas)**

- **HID System/Contract Amendment**

- The contract amendment is set to go before G&C (Governor & Council) on 6/29/16. This will include daily data uploads (veterinary offices exempted) and interstate operability. These changes will go into effect Sept. 1.
- When reviewing enhancements with the Governor's office, there was a question as to whether the notation field (where a provider can enter comments about a patient) is allowed by HIPAA. D. Strang commented that if allowed, the information entered *must* be factual and not opinion. Discussion ensued. The consensus of the A.C. is to get legal guidance on this. The AGs office is already looking into this issue.

○ **Registration**

- The queue is completely cleared and is now being checked and cleared daily. Registrations are generally activated within 24 hours.
- Areas that are still being worked on with HID include "pre-fix fix," password change, letterhead change (now that BOP has been absorbed into OPLC), liability wording change, DEA requirement for registration, and testing any changes with the PDMP staff *before* these system changes go live.

○ **Interstate Operability/MOU**

- The Board of Pharmacy signed the MOU today and the AGs office is finalizing the process. Goes to G&C June 29<sup>th</sup> and if approved, will then be sent to NABP.

○ **Reports and Staffing**

- Joanie Foss has been hired as the Administrative Assistant. She started work on June 10<sup>th</sup> and has been a tremendous addition/asset already.
- Letters from the first "X/Y report" have been sent out (a copy was distributed to the A.C.). Twenty patients and approximately 126 prescribers received emails/letters. We did not send out letters to pharmacies for this first run.

There was one patient profile that was of particular concern, given the combination of medications (opioids, benzodiazepines and sleeping pills) from 16 prescribers and 5 dispensers. The Boards of Medicine, Nursing and

Pharmacy were all notified with a copy of the report, with inappropriate information redacted as necessary.

- “Top Prescriber” reports are being produced monthly.
- Global Audit: A report listing the # of prescribers, # of recipient (patient) queries and # registered with the PDMP in the first quarter of 2016 was reviewed. This also included a breakdown of Schedule II, III and IV substances dispensed during this quarter.
- Top Controlled Substances (Jan-Mar 2016): A report for the top 5 controlled substances dispensed in the first quarter of 2016 was reviewed. This included the number of prescriptions, total quantity dispensed and total days supply.
- Reports to the Medical Examiner’s Office: Over 50 reports have been completed thus far.
- Dispenser Waivers: We are processing waivers from dispensers who state they do not dispense controlled substances. We have received approximately 40 requests and have approved 8 thus far. Letters to those 8 have gone out. Requests for more information have gone out to those dispensers that did not provide the required evidence that they did not dispense controlled substances in the last 6 months.

- **PDMP Rules: (M. Ricco Jonas)**

- a. M. Ricco Jonas will be meeting with Atty. Bob Lamberti in 4 days (June 24) to complete the Rules revision. She plans to have some draft language for the Advisory Council to review at their July meeting, followed by a final draft for the Board of Pharmacy in August.
- b. SB 522 was passed by the legislature and is being signed by the Governor today. This includes a \$130,000 appropriation in State FY17 for the required improvements to the PDMP.

- **Evaluation: (J. Stewart)**

The Survey Monkey is complete and ready to go out to prescribers through the PDMP system. D. Strang was asked to complete the survey and feels it is very focused and to the point. He has made only one or two suggestions for improvement. The regulatory boards can put out a notification to participate and/or could also send out the survey link to their licensees. J. Stewart plans to ask only prescribers to respond at this time.

M. Ricco Jonas plans to share this survey with AG Foster and solicit his feedback. Planned roll out is Wednesday, June 22.

### 3. Old Business

None brought forward.

### 4. New Business

- Educational Webinars w/ HID
  - John Felton (HID) and M. Ricco Jonas will be offering “LIVE” trainings on Aug. 1<sup>st</sup>, 3<sup>rd</sup> and 5<sup>th</sup> at the NH DMV. They will be 1.5 – 2 hours in length. These will initially target prescribers for humans, then veterinarians and finally pharmacists. These trainings will be recorded by HID per our contract and then posted on the websites for the various licensing boards, to be viewed by those who are not able to attend the live trainings. (Note: Since this meeting, the dates and location for the live trainings were changed to Aug. 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> at the Nashua campus of the Dartmouth Hitchcock Medical Center.).
    - CEUs have to be pre-approved for website viewing.
    - Per Jim Potter, the Medical Society approves CEUs for the BOM.
      - Will need a course summary and objectives (typically 3 objectives is a required minimum).
    - T. Guerino will obtain information for M. Ricco Jonas regarding how to obtain CEU approval for veterinarians.
  - D. Nies brought up a question from a provider who has licenses to practice in multiple states, but only one DEA license.
    - This provider practices in both NH and another state, but their DEA is registered only to this other state. This provider stated they do not write for controlled substances in NH (but does so in this other state), and therefore wants to know if they even have to register with the NH PDMP and comply with the required education? This provider stated they called the office of the DEA and was told that attributing their DEA # that is assigned to the state in which they are working (e.g. MA or Nevada) to a license number from a state where they are not working (e.g. NH), would be illegal.
    - D. Strang stated this is not quite true. A DEA license can be moved from one state of licensure to another, simply by going to the DEA website and changing the state of registration. Although the DEA prefers a provider have a separate DEA for each

state in which they are licensed, it is not a mandate and one license can be used for multiple states, as long as the provider remembers to change it to the (other) state in which they are practicing, before writing controlled substance prescriptions. Because this change can be made at any time by simply going to the DEA website and submitting a form, he suggests any provider licensed in NH that has a DEA license (anywhere), should be required to register with the NH PDMP.

- The Board of Pharmacy has already weighed in on this issue and has ruled that if they have a license to practice in NH and a DEA (registered in any state), then they ***must*** register with the NH PDMP.
  - This issue has been sent to legal counsel for further review.
- J. Potter has requested some assurance from the Board of Pharmacy that the system can function at the increased capacity necessary to meet the mandated requirements (from the various licensing boards) on Sept. 1. M. Ricco Jonas indicated HID is confident they can handle this increased website traffic and discussed how this has gone in other states with similar mandates.

J. Potter also suggested organizing a BETA testing group to assess provider satisfaction with and needed improvements to PDMP usage. D. Strang asked him to conference with J. Stewart as he thought J. Stewart's survey (see above) might already serve this purpose without having to engage a separate BETA test group.

## 5. Items of Interest

- S. Blodgett is leaving OPLC as the Exec. Director of the Board of Medicine and has accepted a new position as Executive Director of the Judicial Council. Her last day is June 30<sup>th</sup>.
  - Dr. Michael Barr is the current President of the Board of Medicine. S. Blodgett will notify him about filling her seat on the Advisory Council (The Board of Medicine nominates her replacement)
- Upcoming Trainings/Meetings for PDMP Manager:
  - BJA National Grantee Meeting – August 17-19 (Washington, DC)
  - PMIX Executive Committee Meeting – Oct 4-5 (Minnesota)
  - NASCSA Conference – Oct 18-21 (New Orleans)
  - BJA Eastern Regional Meeting – Oct 25 -26 (Portland, ME)

## 6. Next Meeting:

Date/Time: July 18, 2016, 3:00pm

Location: Office of Professional Licensure and Certification

**Adjournment:**

Motion at 4:54 pm by M. Viggiano. Second by D. DePiero

All in favor