Controlled Substances Advisory Committee

Date: Wednesday, January 27, 2016 from 2:00-5:00 PM

Location: Attorney General's Office, 1031 W 4th Ave, Library, Anchorage, AK 99501

Chairperson: Robert Henderson (LAW)

Member in Leonard (Skip) Coile (public member)

Attendance: Major Dennis Casanovas (DPS)

C.J. Kim (Board of Pharmacy)

Dr. Alexander Von Hafften (public member)

Sandra Aspen (telephonic)

Dr. Lawrence Stinson (public member)

Public in

Attendance: Brian Howes (CED)

Secretary: Shiloh Werner

Handouts

PDMP White Paper

Letter to Governor Walker Re CSAC recommended modifications to the PDMP

<u>Agenda</u>

PDMP White Paper

❖ Letter to Governor Walker Re CSAC recommended modifications to the PDMP

APPROVAL OF MINUTES

Minutes from the meeting held on January 6, 2016 approved unanimously by the Committee, pending the verification of whether there are 4-5 per day or 30-60 calls per week for the Anchorage Detox facility.

WHITE PAPER

"INCREASING THE EFFECTIVENESS OF ALASKA'S PRESCRIPTION DRUG MONITORING PROGRAM" (ALASKA'S PDMP)

Is the White Paper Ready?

Mr. Henderson proposes to the committee that in the event the White Paper is approved, it is provided to the Governor – noting that its contents are advisory only. Mr. Howes notes that there are two other bills on the table for this legislative session of a similar nature so it would be advantageous to get the committee's White Paper out.

Mr. Henderson relates information from the Alaska State Medical Association (ASMA) in regards to the committee's PDMP proposals which were provided by Dr. Butler. Dr. Butler reports that ASMA is concerned with the mandatory registration. Dr. Von Hafften offers that including mandatory registration

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with the annual licensing process would be an efficient way to incorporate the change. Other issues, such as sending unsolicited letters and delegated users, are important aspects of the proposal which may assuage the concerns of some of the stakeholders. He also suggests that if the committee approaches this right, ASMA may find benefits in which they are willing to cooperate to achieve.

Discussion moves to the process of mandatory registration. Mr. Howes reports that there has been some talk of using MyAlaska, an online application tool, to facilitate registration. As for delegated accounts, Mr. Coile brings up the issue of traveling nurses. There is a large amount of traveling nurses in Alaska. How do we ensure they are registered? Ms. Aspen responds that registration is required for nurse practitioners every four years. However, after being in practice every eight years nurse practitioners no longer face renewal. Mr. Howes adds that nurse practitioners must be approved by the Board of Nursing in order to dispense prescription drugs. Dr. Stinson wonders what would be the best way to get nurse practitioners registered in the PDMP? Ms. Aspen responds that it should be part of the nurse licensing process when getting board certified. She believes the Board of Nursing would be very open to this addition to the registration process.

Mr. Henderson returns the discussion to the White Paper. Do we want to incorporate the things currently being discussed into the current White Paper? Or do we want to finalize the White Paper, with the recognition that further discussion will be likely. Mr. Kim adds that the things currently being discussed are the nuts and bolts to be figured out once the White Paper is put in the works. Mr. Henderson agrees that these things will be part of a lot of continuing discussion. Mr. Howes points out that the mandatory use aspect may put an "anchor" on the whole thing. Mandatory *registration* he does not believe will result in much resistance. It is the mandatory *use* that could cause resistance if people feel they are being told "how to practice". Mr. Coile reminds the committee that our goal is to stop overdose deaths from occurring. Mr. Henderson agrees and adds that data across the country has shown that instituting processes such mandatory use in prescription drug monitoring programs leads to a decrease in overdose deaths. Delegated accounts, mandatory registration, mandatory use — these things are all part of the rollout process and would not have to occur all at once, but rather one after the other. This will allow providers time to get familiar with the changes and incorporate them into their practices. Ms. Aspen adds that the Board of Nursing would be on board for providing this type of oversight.

Edits to the White Paper

Mr. Henderson opens the discussion up to any edits to the White Paper.

Dr. Von Hafften: Page 7. Reference to the American Medical Association Task Force to reduce opioid abuse. He would like to see confirmation that our phrasing is consistent with the State Medical Association. The committee agrees to seek that confirmation.

Mr. Coile: Page 6. Should we recommend a diversion program? Do we ask those players to be involved in the PDMP? Ms. Aspen notes that if he is referring to diversion programs for the providers themselves this is something the board would be responsible for. In regards to involving those players in the PDMP, Mr. Henderson notes that currently Law Enforcement must use search warrants to gain access to PDMP data. That is how we balance the privacy of the data. If we have a diversion unit included in the White Paper it has the potential to undermine or delay what we are trying to achieve. Mr. Casanovas agrees and adds that mandatory use and registration should be our main goal, and then down the road we can discuss whether additional access is appropriate. Law enforcement currently has an avenue via search warrants to get this information. Other concerns can be addressed downstream. Mr. Howes adds that

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the data gathered from mandatory registration and use will benefit law enforcement because patterns and problems can be identified by providers and brought to their attention.

Dr. Kim: Typographical change, Page 5 Re: 'dispensing practitioner' and 'location of pharmacy'.

Mr. Casanovas: Page 4, Number 10, Item 1. Does Federal Schedule 1 medications belong there when we know they have no medical purpose? Mr. Henderson responds that it was written to mirror the statute. Dr. Von Hafften wonders if we should add some sort of clarification to it? Mr. Henderson suggests adding a footnote concerning Federal Schedule 1. The committee members are in agreement. A footnote will be added for clarification. Mr. Casanovas' last suggestion is to add the date to the White Paper cover to ensure we are working with and providing the most current version.

Motion to approve and send out the White Paper with the discussed edits unanimously approved by the committee.

LETTER TO GOVERNOR WALKER RE: WHITE PAPER

After review, the committee unanimously approves the letter to Governor Walker concerning the nine proposed modifications to Alaska's PDMP as contained in the White Paper.

ASSIGNMENTS

- Dr. Von Hafften will contact Mr. Hogan for clarification regarding the phrasing contained on page 7 of the White Paper with the State Medical Association.
- ❖ Proposed edits will be made to the White Paper and then provided to Governor Walker.

Next Meeting: Mr. Henderson will send out a scheduling email in April.

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