**ILPMP Advisory Committee**

Meeting Minutes

March 14, 2023

**Opening**

The meeting was called to order at 12:00 p.m.

**Roll Call**

Roll call was completed, and a quorum was established. All Members Present: William Campbell, DO; Dr. David Liebovitz, MD; Helga Brake, Pharm D; Chris Herndon, Pharm D; Garry Moreland, RPh; Ed Segal, DDS; Raechel Ferry-Rooney, APRN; Mindy Sanders, PA; Ricki Loar, APRN; and Erica Ittner, OD; Ankur Dave, MD; Scott Glaser, MD; Shami Goyal, MD; and Kenneth Candido, MD.; Tran Tran, Pharm D, BCPS.

**Introduction of New Committee Member**

Dr. Liebovitz introduced Tran Tran, Pharm D., BCPS as the newest committee member of the ILPMP. Dr. Tran is replacing Cara Brock as the one of the pharmacist positions on the committee.

**Approval of Minutes**

The committee approved the minutes from the December 13, 2022 meeting.

**Reminders**

Dr. Pointer reminded the committee that they should complete their 2023 Mandatory Training as soon as possible.

**Legislative Updates: Dr. Sarah Pointer**

* SB 2364: Clarifies Electronic Health Record integration by defining integration requirements and provides for exemptions as deemed appropriate by the Department. Also clarifies requirements on what data fields need to be reported and the removal of outdated methods of reporting.
* HB 2039: Creates the Access to Public Health Data Act. It allows for faster access to data by local health departments for the purposes of preventing or controlling disease, injury, or disability.
* SB 0285: Amends the Illinois Controlled Substances Act. It provides that the Department of Human Services shall not require electronic health records systems, pharmacies, or other providers to utilize a particular entity or system for integration with the Prescription Monitoring Program.

**PMPnow Update: Jackie DeNardo**

* $25 million in grant funding has been secured since 2018. This money has helped pay for connections.
* No fees have been charged for connecting locations by the ILPMP.
* Total PMPnow queries for 2022 were 105,615,206.
* There is a total of 1,516 organizational connections. Within that, there is a total of 14,081 individual locations.
* There are a total of 104 vendor connections.
* From August 2022 to the present there are 71,107 distinct users.
* 24/7/365 Chat Support is available.
* Healthcare entity connections have grown from just 10 in 2016 to 1,479 in 2022.
* Public Act 101-666 (2022) led to a jump in number of connected EHRs but unfortunately led to a drop in queries, losses of provider & delegate access, a potential loss of data, and costs to healthcare entities on the vendor side.
* EHR focus moving forward includes continuing outreach for Opioid Treatment Programs, revisiting Medicare/Medicaid providers, completing new EHR/EMR Vendor and Certified Health IT Modules integrations, and collaborating with sister agencies to develop lists of healthcare entities.
* Pharmacy focus moving forward includes Walmart go-live rollout, TDS go-live, and continuing pharmacy outreach.
* PMPnow connection types include Urgent Care, Physician Practices, Optometry, Podiatry, FQHC, Pharmacies, Home Care, Health Systems, Hospice, Ambulatory Surgery, Behavioral Health, Opioid Treatment, Dental Offices, Hospitals, Health Departments, Long Term Care, and Telehealth.
* There are two connection views. The original view is a flat, basic data file that does not have a patient pick list for potential matches and only shows prescriptions. The new interactive view includes additional data sets from the website including medical marijuana and EMS naloxone administration, patient pick lists, drug classifications, and a link to the Illinois Helpline.

Questions/Comments:

* Dr. Liebovitz was concerned about the drop in the volume of users. He had heard from an organization that the vendor mandated working with yet another 3rd party that had more restrictive access requirements). Dr. Liebovitz asked if we had next steps to address this. Dr. Pointer shared that ILPMP has brought these concerns to ILDHS Executive Staff and Legislation. Conversations are taking place and making these teams aware of the data being seen.
* Dr. Liebovitz also inquired about the ability of all members of clinical teams to acquire access. Dr. Pointer recommended the committee include this in their attestation form as a concern the committee wants to be brought forward.
* Garry Moreland inquired about the Walmart connection – how was this accomplished? Was it related to an outside vendor that came on? Jackie DeNardo will speak to Jennifer Erickson about this and reply to Garry.
* Dr. Helga Brake asked what the disincentive to moving to the “interactive view” is. Jackie DeNardo said it could be related to a lack of resources and time to put into developing the new view as well as the extra cost that could be involved by their vendor associated with the change.

**Naloxone Change to OTC: Dr. Sarah Pointer**

* FDA is considering approving Naloxone OTC. The decision could occur as soon as March 29th.
* Narcan would become the first formulation to obtain both Rx and OTC status successfully.

**Peer Review Committee Updates: Dr. Sarah Pointer**

* 34 prescribers were identified for co-prescribing benzodiazepines and opiates to 15 or more patients for 3 consecutive months during a 6-month period (July-Dec 2022) and were sent Request for Information letters. As of March 13th, 22 of those prescribers have responded.
* Academic Detailing will be provided by our partners at UIC.
* Cumulative Reference Score our partners at SIUE are working toward validation for implementation.

**IT Update: Amna Farooq**

* LogiCoy vendor contract is extended through December 2023.
* Web updates include developing a new feature for MyPMP for Pharmacies.
* Data updates include making queries more efficient, improving database structure for better performance, updating missing information (NPI and SOI CS license information), OTP integration, and adding new data reports on stimulants & Gabapentin analysis.
* The data trends of the multiple provider episodes show an upward trend in the last quarter of 2022.
* The data trends of patients who have been prescribed both an opioid and benzodiazepine also show an upward trend in the last quarter of 2022.

**Addressing Data Trends:**

* Dr. Pointer asked the committee how we should address these upward data trends mentioned above. ILPMP is creating proactive notifications for prescribers as well as developing a letter that would include the trends we are seeing along with risk mitigation tools.
* The letter was sent to the committee for feedback 3/3/23. The committee provided additional feedback which will be incorporated in the next letter revision.

**Open Discussion**

None

**Adjournment**

The meeting adjourned at 1:30 p.m.

Minutes submitted by: Tonya Miller