ILPMP Advisory Committee Meeting

Meeting Minutes

March 20, 2019

**Opening**

The regular meeting of the ILPMP Advisory Committee was called to order at 12:00 noon on March 20, 2019 by Sarah Pointer, Pharm D.

**Participating Members**

William Campbell DO, Kenneth Candido MD, Raechel Ferry-Rooney APRN, Scott Glaser MD, Garry Moreland, RPH, Olivia Rudolphi Veterinarian, Elizabeth Salisbury-Afshar MD, and Mindy Sanders PA, all of whom joined the meeting by phone, with Sarah Pointer Pharm D.

**Non-Participating Members**

Julie Adkins NP, Helga Brake Pharm D, Cara Brock Pharm D, Shami Goyal MD, Chris Herndon Pharm D, David Liebovitz MD, Christina Morettin OD, and Edward Rentschler DDS.

**New Member Introductions**

New members, with the passing of SB2952, were asked to introduce themselves, with a brief overview of their credentials and how their work experiences relate to the PMP.

**New Business**

An introductory packet of information on current ILPMP Advisory Committee members, terms, bylaws, PMP staff contact information, and a broad overview of the PMP will be distributed to all new members. The PMP was introduced as a grant funded program.

The 2019 annual required trainings are available and will be distributed to all members.

The passing of SB2952 requires the Advisory Committee to select terms for each member. A random number generator was used and assignments have been made.

**Approval of Agenda**

The agenda was unanimously approved as distributed.

**Approval of Minutes**

The minutes of the previous meeting were approved as distributed, after adding Elizabeth Salisbury-Afshar to the roll call, by Kenneth Candido. William Campbell did second that motion.

**Advisory Committee Charges**

An explanation of the charges was covered, to inform members of the expectations as a member of the committee. Charges include review of the following: the ILCS Act and recommending changes to the GA, current drug schedules to manage the Administrative Rules, Clinical guidelines to prescribing and dispensing of controlled substances, and a semi-annual review of the website to ensure the most current and accurate information is available to prescribers and users. They were asked to share any relevant articles they may encounter with the group, by email, or at the new link on the website.

**Technical update**

Beta testing continues. In addition to articles and studies of interest, the new link will provide a member/contact information list, Administrative Rules, Bylaws, guidelines for controlled substances, and presentations of interest. Members were asked for other suggestions/feedback. A view and explanation of the new link, including a detailed description of the MyPMP, was presented by IT. There are certain limitations to be aware of, such as buprenorphine statistics. Members were encouraged to look up their individual patients and provide feedback with comments, errors, suggestions, and/or concerns. They were also invited to take the survey that will appear within the next week, to locate and correct any errors before going live.

**Peer Review**

Due to the changes in membership of the peer review committee in SB2952, the February 2019 meeting was re-scheduled for May 9, 2019. The new list was viewed and 2 Advisory members volunteered to fill the 2 final vacant positions: Julie Adkins - APN and William Campbell – physician. Sarah will send out information to the new Peer Review members on the current process/procedure, before the MAY meeting. Data will be sent for review, to all Peer Review members.

**Legislation**

HB163 was passed by the House and predicted to move quickly through the Senate. This bill amends the ICSA by providing that the information required under the PMP be transmitted by the close of the day it was dispensed, rather than by close of the following day.

HB0411 amends the ICSA with a requirement, rather than the option, of prescribers to document each initial and refill C-II narcotic prescription. It requires the PMP to issue unsolicited reports to prescribers and dispensers, to inform them of potential medication/doctor shopping. This also changes the MPE from 3-3-1 to 2-2-1. PMP is currently opposing this change in the threshold. This leniency could potentially lead to false positives in the number of doctor shoppers. Members were asked for their opinion of the 5-5-6 threshold that the CDC recommends.

SB1665 excludes licensed veterinarians from PMP reporting requirements. Supportive comments were that the only prescriptions written by veterinarians reported to the PMP are the ones filled in retail, and that veterinarians write for less than ½ - 1% of all opioid prescriptions nationally. Veterinarians are not HIPAA trained, which would be required if they also need to report the owner’s prescription history. Veterinarians are not required to report in most other states. Currently, the PMP is opposing it. Changes in the language are expected, which may affect our final support or opposition.

**Open Discussion**

An offer of upcoming presentations may include DPH on the Opioid Alternative Pilot Program or UIC with an update on the results of the Academic Detailing Program. A request was made for other suggestions in future presentations.

Concerns were raised over the lack of treatment programs for patients with high MME’s who look for doctors when their current doctors have stopped prescribing. There is concern over risk tolerance and lack of specific guidelines when treating this type of patient.

Members were asked to email Sarah with anything they would like added to the Introductory packet she’s preparing to send.

**Adjournment**

The motion to adjourn the meeting was made by Kenneth Candido, with a second motion by Mindy Sanders.

Meeting minutes were submitted by Lynette Thompson and approved by Sarah Pointer, PharmD.