

ILPMP Advisory Committee

Meeting Minutes

March 22, 2022

Opening

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

Roll Call

Roll call was completed, and a quorum was established. Members Present: William Campbell, DO; Kenneth Candido, MD; 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; and Erica Ittner, OD. Members Absent: Ankur Dave, MD; Scott Glaser, MD; Shami Goyal, MD; and Cara Brock, Pharm D.

Dr. Pointer informed the committee that member, Julie Adkins passed away in February and would be working with the Illinois Society of Advanced Practice Nurses to find a replacement. Dr. Erica Ittner, OD was introduced as the optometrist replacing Dr. Morettin.

Approval of Minutes

The committee approved the minutes from the August 31, 2021 meeting.

Changes to CDC Guidelines

Dr. Pointer introduced Eric Huff, Pharm D, MBA, as the new Clinical Project Manager for the ILPMP. Dr. Huff gave an overview of the proposed changes to the new CDC guidelines. Public comment is open for CDC's draft Clinical Practice Guideline for Prescribing Opioids until April 11, 2022.

Performance Audit Update

Dr. Pointer gave an update on the Performance Audit.

- The ILPMP must ensure all EHRs are fully interfaced with the ILPMP, as required. The ILPMP will develop changes to the statute & put the onus on the "licensed healthcare entity with an EHR system". Great work has been done to increase the number of connected organizations.
- Amanda Johnson, Outreach Coordinator, will reach out to committee members to see who would like to join a legislative sub-committee.
- ILPMP is working with IDFPR to ensure all prescribers possessing an Illinois Controlled Substance License are registered with ILPMP as required by Illinois Controlled Substance Act (ILCSA). We would like the committee to work with their associations to bring awareness. Communication and action steps are being looked at by legal in both departments. More details to follow.
- ILPMP must address the identified committee weaknesses. and ensure the rules align with the statute. The Advisory Committee charges outlined by the ILCSA should be completed, as required. The Peer Committee members, with the same profession as

prescribers or dispensers being reviewed, must prepare preliminary reports and/or make recommendations, prepare an annual report, and follow up on at-risk prescribers, as required by the ILCSA.

Legislative Update

Dr. Pointer provided an overview of the legislative updates.

- [Public Act 102-0490](#) - E-prescription mandate for CS II-V, exemption <25 prescriptions/year, effective 1/1/23
- [Public Act 102-0527](#) -OTP reporting to ILPMP, effective 8/20/21, ILPMP/SUPR collaboration
- [SB 3920](#) - PMP Omnibus Bill, awaiting floor action
- [SB 3024](#) Allows public health access to identifiable ILPMP data
- [HB 5491](#) Adds CLONAZOLAM as CS-IV, dead bill
- [SB 2535](#) Prescribers to notify patients of risk of addiction; Hospitals to dispense naloxone upon discharge to patient with overdose; Pharmacists to offer to dispense naloxone per standing order, awaiting committee action

Attestation Form Comments

Dr. Pointer thanked committee members for suggestions on attestation forms.

- Change to ILCSA: Replace “addict” with “person who uses substances”, “person who uses drugs”, or “person with substance abuse disorder”
- Change to Administrative Rules: In section 2080.240 Mid-Level Practitioners’ Reporting Amendment – working with the association to make changes to address concerns. Dr. Pointer will follow up with Raechel Ferry-Rooney with this information.

Peer Review Committee Update

Update from the most recent meeting: 22 requests for information letters were sent; 17 required no further action, 2 required additional information requested, and 3 were referred to IDFP for no response.

Outreach

Mrs. Johnson updated the committee about the communication pieces being sent via Constant Contact, including the quarterly newsletters, monthly updates and other important emails. She asked them to forward her any of their association contacts.

Website

Dr. Pointer discussed the website statistics and Mrs. Johnson notified the committee the website would be updated with the new recommendations from attestation form. She requested their help to ensure the website is accurate, per their statutory charges.

NASCSA Survey

NASCSA conducted a survey related to Gabapentin. Public Citizen filed a Citizen’s Petition requesting the drug be listed as a Schedule V Controlled Substance.

Raechel Ferry-Rooney and Dr. Candido advised against scheduling Gabapentin. Dr. Moreland recommended asking other states the benefit of collecting Gabapentin data. Dr. Herndon said he could share slides from American Pharmacist Association's presentation on Gabapentin misuse and would provide for dissemination.

Training Reminder

Annual training due May 1.

Adjournment

The meeting adjourned at 1:30 p.m. with plans to reconvene in fall.

Minutes submitted by: Tonya Miller