

ILPMP Advisory Committee Meeting

Meeting Minutes

June 21, 2017

Opening

The regular meeting of the ILPMP Advisory Committee Meeting was called to order at 12:00 on June 21, 2017 by Randy Malan R PH.

Participating Members

Randy Malan R.PH, Sarah Pointer Pharm D., Helga Brake Pharm D, Scott Glaser MD, Garry Moreland R.PH, Edward Rentschler DDS, Eldon Trame MD, and Mindy Nguyen OD, Jeff Alexander MD, and Mindy Sanders PA.

Non-Participating Members

Julie Adkins NP, Christopher Herndon R.PH, Darin Jordan MD.

Additional ILPMP Speakers:

Craig Berberet, Stan Murzynski, Edward Dowllar

Approval of Agenda

The agenda was unanimously approved as distributed.

Approval of Minutes

The minutes of the previous meeting were approved with the motion from Eldon Trame MD, 2nd by Mindy Nguyen O.D., unanimously approved.

Coroner and ME access to ILPMP data:

Discussed and concluded that the Coroners and Medical Examiners should have access to the ILPMP data to expedite their autopsy and conclusion regarding pending cases. Access should be granted to those in these positions that are licensed healthcare professionals. Where the coroner might not be the licensed healthcare provider, they have contractual agreements with healthcare providers. ILPMP IT suggested utilizing law enforcement process of submitting requests. Acceptable turnaround time for a detailed report of less than 1 week was agreed.

Motioned: Eldon Trame MD, 2nd Jeff Alexander MD. Unanimously passed.

Patient Letter:

Helga Brake Pharm D, has taken Scott Glaser's sample unsolicited patient letter and requested the Illinois Health and Hospital Association's Patient Family Advisory Committee determine the letter's understandability and expressed intent.

It was decided that the unsolicited patient letter would be tabled to allow Helga Brake Pharm D time to receive replies from the IHHA Patient Family Advisory Committee and provide a revised sample letter to be voted on the next Advisory Committee meeting. Scott Glaser MD made the motion. Helga Brake Pharm D 2nd. None Opposed.

Peer Review meeting summary.

Reviewed spreadsheets of prescribers that were broke out by licensure types, ie: physicians, apn, etc. Physicians were broke apart by the individual taxonomy. It was requested that the IT department modify the report to break out midlevel practitioner to differentiate between Physicians Assistants and APNs. Legislation is in progress that would allow APRNs to practice without a collaborative agreement. When reviewing the top 250 patients based on prescribers and dispensers, it was beneficial to have taxonomies. Natural progression of taxonomy patients were able to be excluded from potential unsolicited letters. This is why it is difficult to send unsolicited letters without a clinical rational.

ILPMP needs to check with DASA for a list from SAMSA, prescribers who are registered in the SAMSA Office Waiver program, so that Suboxone and Buprenorphine MMEs are removed from their total MME counts.

Technical Updates

Vendor Logicoy is used to facilitate the automated connections. In May, Logicoy received certification from Allscripts to use their automated connection API(Application Programming Interface). Logicoy is a potential option for writing interfaces if needed.

We have 19 Health Care Organizations using PMP automated connections, up from 11. These connections translate to hundreds of sites throughout the state. Automated

connections for the month of June 2017 were 394,000+, up from June 2016 at 224,670 and June 2015 at 5,760 requests coming from automated connections.

Preliminary discussions are being held with other state PMP groups to standardize a language to use for meaningful use with the office of the national coordinator.

Craig Berberet and Stan Murzynski recently attended and presented at the CDC meeting. Presented 4 times on meaningful use, EHR PMP automated connections, homegrown PMPs, and guideline recommendations into practice.

Open Issues

Legislation

House bill 2708 recently passed as an amendment to the Illinois Controlled Substance act which allows representatives from DCFS to access information from ILPMP.

Senate bill 1607 is on its third amendment and final language has not been made public.

New Topics of Discussion

Interventional Pain Data Registry is a program from the American Society of Interventional Pain Physicians, that may be able to assist with prescribers who work more extensively with pain management. They are developing a system, heavily reliant on interventional and may be beneficial to ILPMP in the future.

FDA has asked for a voluntary removal from the market for Opana ER. This may be the first time the FDA has taken steps to counteract any medication for abuse potential.

Surgeons explore new approaches of pain control article discusses some of the multimodal pain control methods and obstacles against them. Reimbursement is the main obstacle regarding alternate pain management.

Biomarkers Could Help Select Best Candidates for Spinal Cord Stimulation (SCS). Researchers are looking for alternate methods of pain control and SCS might be a solution, however, there are several challenges and obstacles.

Agenda for Next Meeting

Review modifications to the proposed patient letter as revised from Helga Brake Pharm D and IHHA Patient Family Advisory Committee.

Adjournment

Meeting was adjourned at 1:15 by Scott Glaser MD, Randy Malan R Ph 2nd, all in favor.
The next general meeting will be at 12:00 on September 20, 2017.

Minutes submitted by: Andrew Hollo

Approved by: [Name]