

New Mexico Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

February 26, 2016

1:30 PM to 3:00 PM

Scientific Laboratories Building

Albuquerque, NM

AGENDA

- I. Introductions and Review of Agenda
- II. Review of 12-4-15 Advisory Council Meeting Notes –
- III. Legislation
 - Senate Bill 262 (duplicates HB 277) Administration of Opioid Antagonists (Mike)
 - Senate Bill 263 - Opioid Prescription Monitoring (Brianna Harrand)
 - House Bill 159 – Chronic Pain Study (Not enacted – Naomi Greene)

Others:

 - Senate Memorial 104 – Study Opioid Abuse – Not enacted
 - Senate Memorial 101 – Study Mandatory Rehab for some offenders – Not Enacted
 - Senate Bill 191 (duplicates House Bill 241) Opioid Abuse Prevention & Assisted Treatment - Not enacted
 - Senate Bill 100 – Opioid Reversal Medication Training – Not enacted
- IV. Quarterly Prescription Measures – Jim Davis
- V. Discontinuing opioids after a non-fatal overdose – Steven Seifert –
- VI. New Proposed Opioid Guideline –
- VII. Action Items
- VIII. Next Meeting –

This Council meeting will be followed by a one-hour meeting to discuss standing orders.

Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

MEETING NOTES

DATE: February 26, 2016

TIME: 1:30 PM to 3:00 PM

LOCATION: Scientific Laboratories Building; 1101 Camino de Salud NE, Albuquerque, NM 87102

MEETING FACILITATOR: Michael Landen, DOH

COUNCIL MEMBERS PRESENT:

Michael Landen
Steve Jenkusky
Cheranne McCracken
Bill Barkman
Jennifer Weiss

ABSENT:

Frances Lovett
Jason Flores
Steven Seifert
Ernie Dole
Joanna Katzman
Robert Geist

OTHER PARTICIPANTS: Rollin Oden, Heather Stanton, Karen Cheman, Wayne Lindstrom, Shirley Scott, Maureen Wilks, Ralph McClish, Randy Marshall, Joel Meyers, Sondra Frank, Bill Wiese, Deborah Profant, Samee Connelly, Clare Romero, Luigi Garcia Saavedra, Naomi Greene, Jim Davis, Dominick Zurlo, Josh Swatek, Laura Tomedi, Cecilia Ruberto, Margery Davis, Dale Tinker, Ellen Interlandi, Rebecca Gering, Michael Zarob, Elaine Brightwater, Ann Green, Arlene Brown, Brianna Harrand, Toby Rosenblatt

I. Introductions and Review of Agenda

Correction: During the meeting we stated that SM 104 was passed, however, that is incorrect. SM 104, ultimately, did not pass. Without a memorial, there is no need to address it.

II. Review of 12/4/2015 Advisory Council Meeting Notes

2015 Advisory Council Recommendations to Legislature on 02/29/16.

III. Legislation

SB 263 – Opioid Prescription Monitoring (DOH bill). Enacted. Governor's office approval came after tentative January meeting date. Requires a PMP check before initial opioid prescription and every 3 months thereafter. Bill provides an exception for opioid prescriptions written for less than a 4 day supply. Council discussed ideas on how each licensing board should promulgate rules. Suggestion to set up meeting with all licensing boards to advance PMP rules collectively as a group. DOH offered to facilitate that meeting.

HB 277/SB 262 – Administration of Opioid Antagonists (DOH bill); Dominick Zurlo presented. Enacted. Expanding access to naloxone by allowing standing orders to be written by a licensed prescriber. Other provisions provide immunity. Under a standing order, anyone may store/possess/distribute without clinical licensure. Young men with Jennifer's program were very helpful in gaining support from legislators. Pharmacists with prescriptive authority for naloxone under the NMBOP protocol cannot

write standing orders for naloxone. The NMBOP protocol for pharmacists does not address standing orders. A licensed Pharmacist Clinician may write standing orders for naloxone.

HB 159 – Chronic Pain Survey; Naomi Greene presented. Not enacted. Appropriation of funds to DOH for chronic pain study. DOH is still interested. Suggestion to use Behavioral Risk Factor Surveillance System (BRFSS) module. Looking for funding. Wayne L will check if Centennial care health survey includes questions about chronic pain.

SM 104 – Study Opioid Abuse. Not Enacted. Memorial requesting that the Council convene a taskforce to study opioid use. The Council will not create such a taskforce at this time.

SB 191/HB 241 – Opioid Abuse Prevention & Assisted Treatment. Not enacted. DOH opioid safety on website. Medication Assisted Treatment (MAT) for department of corrections. Abuse Deterrent Opioids covered by insurance. MAT and ADOs are showing positive results. Pushback from many insurance payers. Suggestion to have panel of private payers present in meetings.

SB 100 – Opioid Reversal Medication Training. Not enacted. Mandates health care providers who prescribe, dispense, and distribute opioids be trained on use of naloxone.

IV. Quarterly Prescription Measures – Jim Davis

Presentation of various measures and characteristics of Controlled Substance prescribing and dispensing. Important to note that this data represents what is dispensed not what is actually consumed. Council will set measures aimed at tracking progress of overdose prevention and PMP utilization practices. Council also needs to set measures that can identify potential areas of concern.

V. New Proposed Opioid Guideline – Council presented short form of CDC Proposed 2016 Guidelines for Prescribing Opioids or Chronic Pain. Should the Council adopt these guidelines? Ernie D lead for group on guidelines

VI. Ideas for Future Council Meeting Topics: Insurance payers, benzodiazepines, buprenorphine for chronic pain, chronic pain, enforcing regulatory requirements, and medical cannabis for chronic pain.

VII. Next Meeting –

March 25, 2016, 1:30 PM to 3:00 PM

Roadrunner Food Bank - 5840 Office Blvd. NE, Albuquerque, NM 87109

Meeting in board room.

New Mexico Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

March 25, 2016

1:30 PM to 3:00 PM

Roadrunner Food Bank
5840 Office Blvd. NE
Albuquerque, NM 87109

AGENDA

- I. Introductions and Review of Agenda
- II. Review of February 26, 2016 Advisory Council Meeting Notes
- III. Chronic Pain
 - a. Senator Craig Brandt
 - b. Sheila Pugach
- IV. CDC Guidelines
- V. Updates
 - a. Licensing Boards Meeting
 - b. Standing Orders
- VI. Action Items –
- VII. Next Meeting –

Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

MEETING NOTES

DATE: March 25, 2016

TIME: 1:30PM to 3:00PM

LOCATION: Road Runner Food Bank; Albuquerque, NM

MEETING FACILITATOR: Michael Landen, DOH

COUNCIL MEMBERS PRESENT:

Michael Landen

Cheranne McCracken

Frances Lovett

Steven Seifert

Ernie Dole

ABSENT:

Steve Jenkusky

Jason Flores

Bill Barkman

Jennifer Weiss

Joanna Katzman

Robert Geist

QUORUM: NO

OTHER PARTICIPANTS: Elaine Brightwater, Maureen Wilks, Shelley Bagwell, Irene Ortiz, Dale Tinker, Linda Siegle, Janet Simon, Sandra Adondakis, Ralph McClish, Sheila Pugach, Craig Brandt, Clare Romero, Michael Zarob, Rollin Oden, Harris Silver, Sondra Frank, Shirley Scott, Evonne Gantz, Laura Tomedi, Ellen Interlandi, Robert Rhyne, Bill Wiese, Paul Balderamos, Danelle Callan, Mikiko Takeda, Frank Koronkiewicz, Naomi Greene, Lynda Ann Green, Jim Davis, Brianna Harrant, Toby Rosenblatt

- I. Introductions and Review of Agenda
- II. Review of February 26, 2016 Advisory Council Meeting Notes
Meeting Notes Approved
- III. Chronic Pain
 - a. Senator Craig Brandt
 - b. Sheila Pugach

Balancing abuse deterrence with patient needs. Chronic pain patients are facing great challenges and barriers to receiving the care and medications that they need. When trying to renew/refill a stable and regular medication regimen for pain today, the process is time consuming, cumbersome, and disheartening. Pain patients often have to worry about receiving their medication in a timely manner, finding pharmacies that stock their medication, and traveling great distances to receive their medication. Most pain patients cannot face these challenges on their own and must find someone to help them. Patients should not have to worry about getting the medication they need or rationing their medication to avoid getting sick. Most pain patients are in these situations

through no fault of their own. Pain patients shouldn't be categorized and treated in the same manner as people who are misusing or abusing their medications. Something must be done to combat the overdose and abuse problem because people are dying. Something to consider is that many pain patients face a profound negative impact on quality of life; the suffering of which can lead them to contemplate death and suicide. In an attempt to prevent overdose and abuse, we cannot fail to serve and meet the needs of our pain patients. Addressing opioid abuse is important and necessary but we need to consider chronic pain patients and what impact our interventions will have on their quality of life.

IV. CDC Guideline

The approved guideline is very similar to the draft. Whether we agree or disagree with the recommendations, the CDC Guideline is a significant document and the Council will need to weigh in on it. Ernie Dole will head a group to perform an evidence-based review of the new CDC guidelines. Anyone is welcome to participate. Send an email to Brianna Harrand if interested in participating in that review.

V. Updates

a. Standing Orders - Brianna

Gov. Martinez signed SB 262/HB 277 on March 4th. Mike Landen signed a statewide standing order for pharmacists to dispense naloxone on March 18th. Pharmacists do not need to complete pharmacist's prescriptive authority for naloxone training in order to dispense naloxone under this standing order, however, training is still being offered by New Mexico Pharmacists Association (NMPHA) and is still strongly encouraged. NMPHA will likely offer additional Continuing Education regarding naloxone education as well. Current challenge is working with pharmacies on implementation of standing orders. The law enforcement standing order is in process and other standing orders are as well. It is important to note that any licensed prescriber can write a standing order. NMDOH is happy to work with anyone needing assistance with standing orders. Contact Brianna Harrand for questions regarding standing orders. NMDOH will also produce "how-to" documents for pharmacists, law enforcement, community programs, etc.

b. Licensing Boards Meeting

Licensing board representatives met to work on consensus language to promulgate rules required to address the Prescription Monitoring Program bill, SB 263. The primary focus is working on the changes needed for the PMP. If time permits, work on upgrades to chronic pain management rules. Process ongoing. Next licensing board meeting in April 25, 2016 at 2:00pm at the New Mexico Medical Board.

VI. Next Advisory Council Meeting –

APRIL 29, 2016

1:30 PM to 3:00 PM, SCIENTIFIC LABORATORIES BUILDING

1101 CAMINO DE SALUD NE, ALBUQUERQUE, NM 87102

New Mexico Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

Friday, April 29, 2016

1:30 PM to 3:00 PM

Scientific Laboratories Building

Albuquerque, NM

AGENDA

- I. Introductions and Review of Agenda
- II. Review of March 25, 2016 Advisory Council Meeting Notes
- III. Benzodiazepines Best Practices – Steve Jenkusky
- IV. Overdose Death Data with Benzodiazepines (BZD) - Jim Davis
 - a. Overdose Deaths: Associated PMP Data
 - b. Overdose Deaths: Concurrent Opioid and BZD Rx
- V. Benzodiazepine Council Recommendations - Mike Landen
 - a. Recommendation: PMP check before BZD Rx
 - b. Recommendation: Avoid Concurrent Opioid and BZD Prescribing
- VI. CDC Guideline for Prescribing Opioids for Chronic Pain - Ernie Dole
- VII. PMP Licensing Board Rules Update – Mike Landen
- VIII. Naloxone Standing Orders Update - Brianna Harrand
- IX. Action Items –
- X. Next Meeting –

Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

MEETING NOTES

DATE: April 29, 2016

TIME: 1:30PM to 3:00PM

LOCATION: SLD, 1101 Camino de Salud NE; Albuquerque, NM

MEETING FACILITATOR: Michael Landen, DOH

COUNCIL MEMBERS PRESENT:

Michael Landen Steven Seifert
Steve Jenkusky Ernie Dole
Cheranne McCracken Jennifer Weiss
Frances Lovett Joanna Katzman
Jason Flores

ABSENT:

Bill Barkman
Robert Geist

QUORUM: YES

OTHER PARTICIPANTS: Tammy Butler, Jacob Prieto, Brandon Warrick, Elaine Brightwater, Ann Green, Ralph McClish, Shelley Bagwell, Bill Wiese, Tom Banner, Mikiko Takeda, Richard Stark, Danelle Callan, Robert Rhyne, Shirley Scott, Maureen Wilks, Cecilia Ruberto, Victoria Wagner, Linda Siegle, Randy Marshall, Karen Nunez, Sandra Adondakis, Frank Koronkiewicz, Ann Brown, Shelly Moeller, Kathryn Lowerre, Evonne Gantz, Jim Davis, Luigi GarciaSaavedra, Naomi Greene, Dominick Zurlo, Joshua Swatek, Brianna Harrand, Toby Rosenblatt

- I. Introductions and Review of Agenda
- II. Review of March 25, 2016 Advisory Council Meeting Notes
Meeting Notes Approved
- III. Benzodiazepine Best Practices - Steve Jenkusky
Benzodiazepine (BZD) pharmacology and clinical use. BZDs enhance the activity of the inhibitory neurotransmitter, GABA at the GABA receptor, resulting in sedative, anxiolytic, anticonvulsant, and muscle relaxant properties. BZDs can be categorized based on their duration of action and are used to treat a variety of conditions, such as generalized anxiety disorder, panic disorder, insomnia, alcohol withdrawal, and seizures/epilepsy. In addition, they are commonly used for procedural sedation. BZDs can cause psychological and physical dependence. Risk for psychological dependence is increased with quick onset, short-acting BZDs (e.g. alprazolam). While BZDs are used to treat many health conditions, there are often alternative first line treatment modalities that carry less risk for misuse and dependence (e.g. CBT, SSRIs, buspirone, beta-blockers, alpha₂ agonists).
- IV. Overdose Death Data with Benzodiazepines (BZD) - Jim Davis
Benzodiazepines play a major role in prescription drug overdose death. They potentiate the central nervous system depressant effects of opioids and alcohol. Alprazolam is a very potent, quick onset, short-acting BZD and is the number one BZD involved in overdose death. Risk of overdose increases substantially for individuals with >90 days overlapping opioids and BZD prescriptions (Relative Risk=40). There are approximately 30,000 people in NM on full-time BZDs.
- V. Benzodiazepine Council Recommendations - Mike Landen

- a. Recommendation: Prior to initially prescribing or dispensing benzodiazepines, practitioners should review a patient's history of controlled substance prescriptions, using the Prescription Monitoring Program (PMP). During continuous use of benzodiazepines, practitioners should continue to periodically review patient PMP reports a minimum of once every three months. - Did not vote; need to consider reworking some of the language within the recommendation. Some suggestions included adding a 4 day exception and expanding it to other controlled substances or all controlled substances. (NO VOTE TAKEN)
- b. Recommendation: Practitioners should avoid prescribing opioid pain medications and benzodiazepines concurrently whenever possible. - PASSED (8 YES; 1 NO).

VI. CDC Guideline for Prescribing Opioids for Chronic Pain - Ernie Dole
Council members read proposed response to CDC Guideline written by the Guideline review workgroup.
Vote on making response a Council recommendation - PASSED (9 YES; 0 NO).

VII. PMP Licensing Board Rules Update - Mike Landen
All licensing boards (Nursing, Medical, Osteopathic, Pharmacy, Podiatry, Midwifery, Optometry, and Dental) were represented during the March and April meetings. Licensing boards are considering expanding PMP requirements to all Controlled Substances in Schedule II, III, and IV. NMDOH will present updated language at the May meeting and comparison of the CDC Guideline to APS Guideline.

VIII. Naloxone Standing Orders Update - Brianna Harrand
The Pharmacy, Law Enforcement, and Public Health Office Standing Orders have been signed. The department is working with pharmacy chains and independents to implement the standing order. Working with pharmacy chains from a top-down approach to reach more pharmacists. The department is also working with Law Enforcement agencies to implement the naloxone standing order. While NMDOH has issued statewide standing orders in these areas, any licensed prescriber can write a standing order for their organization, clinic, staff, etc. Brianna Harrand at DOH can provide technical assistance for drafting naloxone standing orders.

IX. Next Advisory Council Meeting – Invite a panel of MCOs.

June 3, 2016

1:30 PM to 3:00 PM

NEW MEXICO HOSPITAL ASSOCIATION

7471 PAN AMERICAN FRWY

ALBUQUERQUE, NM 87109

New Mexico Prescription Drug Misuse and Overdose Prevention and Pain Management

Advisory Council

June 3, 2016

1:30 PM to 3:00 PM

New Mexico Hospital Association

Albuquerque, NM

AGENDA

- I. Introductions and Review of Agenda
- II. Review of April 29, 2016 Advisory Council Meeting Notes –
- III. Managed Care Organizations (MCOs): Overdose Prevention and Pain Management
 - a. Frank Koronkiewicz, PharmD - Molina Health Care
 - b. Robert Buser, MD - Molina Health Care
 - c. Marcello Maviglia, MD - Molina Health Care
 - d. Luanne Cunico, PharmD - Presbyterian Health Plan
 - e. Frieda Siminski, PharmD - New Mexico Health Connections
 - f. Frank Roland, PharmD - Blue Cross Blue Shield
 - g. Wayne Lindstrom, PhD - Behavioral Health Services Division
- IV. Council Recommendations for MCOs - Mike Landen
- V. Quarterly Prescription Measures - Laura Tomedi
- VI. Naloxone and PMP Update - Mike Landen
- VII. Action Items –
- VIII. Next Meeting –

Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

MEETING MINUTES

DATE: June 3, 2016

TIME: 1:30PM to 3:00PM

LOCATION: New Mexico Hospital Association; Albuquerque

MEETING FACILITATOR: Michael Landen, DOH

COUNCIL MEMBERS PRESENT:

Michael Landen

Steve Jenkusky

Cheranne McCracken

Bill Barkman

Frances Lovett

Ernie Dole

Jennifer Weiss

Joanna Katzman

ABSENT:

Jason Flores

Steven Seifert

Robert Geist

QUORUM: YES

OTHER PARTICIPANTS: Ralph McClish, Bernie Lieving, Wayne Lindstrom, Deborah Profant, Chad Valdez, Frank Roland, Michael Zarob, Brandon Anderson, Elaine Brightwater, Robert Buser, Jacob Prieto, Frank Koronkiewicz, Robert Rhyne, Danelle Callan, Mikiko Takeda Yamada, Sandra Adonakis, Cecilia Ruberto, Carole Hemmelgarn, Brandon Warrick, Toby Rosenblatt, Evonne Gantz, Chris Trujillo, Laura Tomedi, Brianna Harrand, Kathryn Lowerre, Arlene Brown, Randy Marshall, Annie Jung, Dale Tinker

I. Introductions and Review of Agenda

II. Review of April 29, 2016 Advisory Council Meeting Notes

Meeting Notes Approved

III. Managed Care Organizations (MCOs): Overdose Prevention and Pain Management

a. Robert Buser, MD - UnitedHealthcare (UHC)

Naloxone kit is covered on UHC and NARCAN® NasalSpray will be added to formularies on July 1, 2017. Providers can bill \$300.00 for buprenorphine/naloxone inductions. There is currently no morphine milligram equivalent (MME) ceiling for opioid prescriptions. There are plan limitations on the quantity of tablets dispensed. There are plan limitations for quantity of methadone tablets dispensed. UHC has a narcotic claims based drug utilization review (DUR) and letters are regularly sent to providers who have patients exceeding threshold criteria for high-risk prescribing. When patients no longer exceed threshold criteria, the intervention is considered a success. *(Dr. Buser also provided UHC handouts available to voting members of the Advisory Council only)*

b. Frank Roland, PharmD - Blue Cross Blue Shield (BCBS)

Naloxone kits and NARCAN® NasalSpray are covered without prior authorization (PA). Brand Suboxone® and generic buprenorphine are covered. There are pharmacy lock-in restrictions for certain patients. It is more difficult to implement provider lock-in restrictions. Case managers

are available to assist patients in finding treatment and support for substance use disorder. There are no plan restrictions for overlapping benzodiazepine (BZD) and opioid prescriptions. BCBS currently implements a daily dose limit of 240 MME. There are no plan limitations or restrictions on alprazolam or methadone. There are limitations on duplicate BZD prescriptions and overlapping opioid and buprenorphine prescriptions. Similar to UHC, BCBS implements a Guided Health Program that aims to identify areas of potential abuse. Programs look for combinations of opioids, BZDs, and carisoprodol.

c. Wayne Lindstrom, PhD - Medicaid, Health Services Division (HSD)

MCOs all manage Medicaid differently within certain guidelines set by HSD. Medicaid is currently facing \$417 million cut in expenditures. Payment for naloxone education provided by pharmacist will possibly be cut. *(Wayne provided a handout - please see attached document)*

d. Chad Valdez, PharmD - Presbyterian Healthcare Services (PHS)

Naloxone kit is covered. NARCAN® Nasal Spray and Evzio® are not covered. Naloxone products are only covered for the insured member. PHS covers up to 3 doses per day of buprenorphine with no PA. Patients have access to case management for assistance in finding providers who can treat opioid use disorder. Vivitrol® (naltrexone injection) is covered with PA. PHS does implement six month pharmacy lock-in restrictions for patients. PHS plans have a 120 MME limit for each individual prescription. They are currently working on a combined opioid MME limit for individuals on multiple opioids. There are no plan limitations or restrictions for overlapping BZD and opioid prescriptions. Methadone prescriptions for chronic pain require PA.

e. Frank Koronkiewicz, PharmD; Marcello Maviglia, MD; Adan Carriaga - Molina Health Care

Naloxone kit and education provided by pharmacist is covered. NARCAN® Nasal Spray and Evzio® are not covered. Molina sends fax blasts to all pharmacies for information on how to bill for naloxone kits. Most common mistake is that pharmacists enter the billing quantity in units instead of volume (mL). Two syringes of naloxone is 4 mL. Prescriptions for naloxone processed under the covered member's name are allowed even if the covered member is not the ultimate user of the naloxone kit. Molina regularly uses claims data to identify providers who can prescribe buprenorphine for opioid use disorder. The list of buprenorphine providers is shared with case managers and care coordinators to assist in helping members locate providers. There is currently no MME ceiling limitation for opioid prescriptions. No plan limitations or restrictions on alprazolam or overlapping BZD and opioid prescriptions. Has DUR programs very similar to other MCOs. Molina is committed to helping members interested in recovery. Monthly trainings with all care coordinators are required, including behavioral health training. Recovery model approach.

Questions for MCO panel from meeting participants:

- **Will Probuphine® (buprenorphine implant) be covered?** Because of HSD's letter of direction regarding buprenorphine products, it will likely be covered.
- **Other naloxone products, such as Evzio® Autoinjector and NARCAN® Nasal Spray, are much easier to use than the naloxone kit. Will those products be added to formularies?** UHC and BCBS will add NARCAN® Nasal Spray to formularies on July 1, 2017. No plans for coverage of Evzio® due to cost.
- **Do drug utilization review (DUR) programs send letters to licensing boards?** After six months of no provider response or action, letters get forwarded to licensing boards.
- **Do DUR programs send letters to patients about high-risk prescriptions?** Currently, none of the MCOs send letters to patients notifying them of high-risk prescriptions they may be taking. Possible plans to implement patient letters in the future.

- **Is naloxone covered on MCOs' commercial plans?** BCBS and PHS cover naloxone on commercial and centennial plans. Molina only covers naloxone on centennial plans.
- **Is Vivitrol® (naltrexone injection) covered on MCOs' commercial plans?** BCBS and PHS cover Vivitrol® on commercial plans with PA. Molina does not cover Vivitrol® on commercial plans.
- **Is there a maximum duration limitation on buprenorphine products?** There are only quantity limit restrictions on buprenorphine (maximum of 3 doses per day; up to 24 mg). None of the MCOs have time limit or maximum duration limitations on buprenorphine products. Some plans will cover 32 mg of buprenorphine per day with PA. The PA will last for 6 months. Ideally, patients are expected to taper from 32 mg to 24 mg in those 6 months. Buprenorphine at 24 mg per day is covered indefinitely.

IV. Council Recommendations for MCOs - Mike Landen

Recommendations for MCOs are put on hold due to time constraints. DOH will draft recommendations and present at July meeting.

V. Quarterly Prescription Measures - Laura Tomedi

Number of patients on high dose opioids (≥ 100 MME/day) decreasing each quarter. Number of patients on high dose opioids plus BZDs is also decreasing. Naloxone Medicaid claims from outpatient pharmacies are increasing. There were 288 Medicaid claims for naloxone in all of 2015. There are already 285 Medicaid claims for naloxone in the first quarter of 2016. Laura compared number of naloxone Medicaid claims to number of patients receiving high dose opioids or high dose opioids plus BZDs. NMDOH will send out a survey asking Advisory Council members to identify key measures that should be reported.

VI. Naloxone and PMP Update - Mike Landen and Brianna Harrand

PMP Update - Mike Landen. All licensing boards met for the final time in May to draft common language for new PMP rules. The process was productive and useful for all boards. Each individual board will now update their rules before January 1, 2017.

Naloxone Update - Brianna Harrand. Working with pharmacies statewide to implement standing order for naloxone. All Walgreens and CVS stores are reported to be dispensing naloxone. DOH also working with law enforcement agencies to implement the statewide standing order for law enforcement. Any licensed prescriber can write standing orders. May contact Brianna if technical assistance is needed in drafting standing orders.

VII. Action Items -

- VIII. Next Advisory Council Meeting** – Presentation of 2015 preliminary overdose death data, top quarterly prescription measures, and recommendations to MCOs.

~~July 22, 2016~~

~~1:30 PM to 3:00 PM, SCIENTIFIC LABORATORY BUILDING, 1101 CAMINO DE SALUD NE,
ALBUQUERQUE, NM 87102~~

Rescheduled: AUGUST 12, 2016, 1:30 PM to 3:00 PM, SCIENTIFIC LABORATORY BUILDING, 1101 CAMINO DE SALUD NE, ALBUQUERQUE, NM 87102

New Mexico Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

August 12, 2016
1:30 PM to 3:00 PM
Scientific Laboratories Building
Albuquerque, NM

AGENDA

- I. Introductions and Review of Agenda
- II. Review of June 3, 2016 Advisory Council Meeting Minutes – Mike Landen
- III. Council Recommendations for MCOs – Mike Landen
 - a. Vote on recommendations
- IV. Prescribing & Prevention Measures Survey Results – Brianna Harrand
- V. 2015 New Mexico Drug Overdose Death – Jim Davis
- VI. Evaluation and NM’s Prescription Drug Overdose Prevention Program – Kathryn Lowerre
- VII. Inter-professional Reporting – Mike Landen
- VIII. Turquoise Lodge Update – Mike Landen
- IX. Advisory Council Meeting Notices – Mike Landen
- X. Next Steps
- XI. Next Meeting

Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

MEETING MINUTES

DATE: August 12, 2016

TIME: 1:30PM to 3:00PM

LOCATION: Scientific Laboratories Building; Albuquerque

MEETING FACILITATOR: Michael Landen, DOH

COUNCIL MEMBERS PRESENT:

Michael Landen Ernie Dole
Steve Jenkusky Jennifer Weiss
Cheranne McCracken Joanna Katzman
Steven Seifert

ABSENT:

Jason Flores
Robert Geist
Frances Lovett
Bill Barkman

QUORUM: YES

OTHER PARTICIPANTS: Ralph McClish, Karen Cheman, Luigi GarciaSaavedra, Lynda Ann Green, Paul Balderamos, Arlene Brown, Naomi Greene, Bill Weise, Dale Tinker, Bernie Lieving, Mikiko Takeda Yamada, Elaine Brightwater, Karen Nunez, Sheila Pugach, Maureen Wilks, Ellen Interlandi, Brandon Warrick, Shirley Scott, Gabriella Romero, Heather McMurry, Janet Snow, Michael Pridham, Irene Ortiz, Joel Meyers, Jennifer Ortega, Mark Clark, Rich Stark, Aimee Ashley, Jim Davis, Laura Tomedi, Lori Peterson, Robert Rhyne, Danelle Callan, Harris Silver, Toby Rosenblatt, Katheryn Lowerre, Christopher Trujillo, Frank Koronkiewicz, Brianna Harrand

I. **Introductions and Review of Agenda**

II. **Review of June 3, 2016 Advisory Council Meeting Minutes**

Meeting Minutes Approved

III. **Council Recommendations for MCOs - Mike Landen**

- a. Vote on recommendations for managed care organizations that were discussed at the June 3, 2016 Council meeting.

Recommendation	Council Response
<u>Naloxone Access</u>	
1. Provide coverage for at least two naloxone products at the member's lowest-tier copay.	Approved
2. Provide coverage for naloxone products dispensed even if the insured member is not the ultimate user of the naloxone product.	Approved
3. Reimburse pharmacies for overdose prevention and naloxone administration education provided by pharmacist.	Approved
<u>High Morphine Milligram Equivalents</u>	

1. Create prior authorization requirements for new start patients titrated above 90 MME/day to include: benefit/justification of dose increase, overdose risk assessment, overdose prevention education, co-prescription of naloxone. Does not apply to hospice or palliative care.	No vote taken
<u>Methadone Restriction</u>	
1. Create methadone for chronic pain prior authorization requirements to include: necessity of use rationale, overdose risk assessment, overdose prevention education, co-prescription of naloxone.	Revise to include “for initiation of treatment of chronic pain”
<u>Alprazolam Restriction</u>	
1. Create alprazolam prior authorization requirements for new start patients receiving more than 2 week supply.	Approved
<u>Overlapping Benzodiazepine and Opioid Restriction</u>	
1. Create prior authorization or plan limitations for concurrent use of benzodiazepine and opioid prescriptions. *For initial new start patients only. Patients already on concurrent therapy should be safely tapered to avoid serious risks associated with benzodiazepine withdrawal.	Revise so that individuals on current BZD therapy are not denied opioids for emergency treatment of pain
<u>Increase Access to Medication Assisted Treatment (MAT)</u>	
1. Provide coverage for all combination buprenorphine/naloxone products and buprenorphine monoproducts for treatment of opioid use disorder or opioid withdrawal management.	Approved
2. Provide coverage for extended-release injectable naltrexone for patients enrolled in psychosocial treatment services.	Approved

IV. **Prescribing and Prevention Measures Survey Results - Brianna Harrand**

Survey was sent to all voting council members and meeting participants to choose prescribing and prevention measures to report on. Council member top choices are **bolded** in this list below.

The following measures received the most votes:

- a. **Number of patients with multiple prescribers and pharmacies: 4 or more prescribers or 4 or more pharmacies in 3 months.**
- b. **Number of patients receiving opioids.**
- c. **Number of patients with concurrent opioids and benzodiazepines (≥10 days overlap).**
- d. **Number of patients with high dose opioids (≥90 MME/day) plus benzodiazepines.**
- e. **Number of patients with overlapping prescriptions of opioids from different prescribers (≥10 days overlap).**
- f. Number of opioid prescriptions filled.
- g. **Number of patients with overlapping prescriptions of benzodiazepines from different prescribers (≥10 days total overlap).**
- h. Number of high dose (≥90 MME/day) opioid prescriptions excluding buprenorphine/naloxone.
- i. Number of patients with high dose opioids (≥90 MME/day).

*Council member top choices are **bolded**.

- V. **2015 New Mexico Drug Overdose Death - Jim Davis**
Preliminary findings indicate that the 2015 NM drug overdose death rate may be lower than 2014 NM drug overdose death rate.

- VI. **Evaluation and NM's Prescription Drug Overdose Prevention Program - Kathryn Lowerre**
NMDOH received federal funding from the Centers for Disease Control and Prevention (CDC) in 2015 for prescription drug overdose prevention. States awarded funding under this grant are required to evaluate state policies. NMDOH will evaluate the naloxone law (SB 262/HB 277 2016) and the PMP law (SB 263 2016).

- VII. **Inter-professional Reporting - Mike Landen**
Eileen Brightwater requested that the council discuss inter-professional reporting to licensing boards. Questions about how licensing boards investigate complaints regarding unprofessional conduct or injudicious prescribing practices. Meeting participants requested that DOH facilitate a meeting with the licensing boards to discuss this further.

- VIII. **Turquoise Lodge Update - Mike Landen**
Shauna Harley from Turquoise Lodge provided an update on the recent closure of the Turquoise Lodge Adolescent Treatment Program.

- IX. **Advisory Council Meeting Notices - Mike Landen**
Draft meeting resolution approved, Mike Landen to sign.

- X. **Action Items -**

- XI. **Next Advisory Council Meeting** – Presentation of 2015 preliminary overdose death data, top quarterly prescription measures, and recommendations to MCOs.

SEPTEMBER 9, 2016

1:30 PM to 3:00 PM

SCIENTIFIC LABORATORY BUILDING

1101 CAMINO DE SALUD NE

ALBUQUERQUE, NM 87102

New Mexico Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

Sept 9, 2016
1:30 PM to 3:00 PM
Scientific Laboratories Building
Albuquerque, NM

AGENDA

- I. Introductions and Review of Agenda
- II. Review of August 12, 2016 Advisory Council Meeting Minutes – Mike Landen
- III. Council Recommendations for MCOs – Mike Landen
 - b. Follow-up vote
- IV. Quarterly Prescribing Measures - Jim Davis
- V. Changes in Drug Specific Overdose Death Rates - Jim Davis
- VI. Literature Review: Primary Prevention - Kathryn Lowerre
- VII. Summary of Licensing Boards and PMP Rules - Brianna Harrand
- VIII. Update on Federal Grants - Evonne Gantz & Laura Tomedi
- IX. Next Steps
- X. Next Meeting

Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council
MEETING MINUTES

DATE: September 9, 2016

TIME: 1:30PM to 3:00PM

LOCATION: Scientific Laboratories Building; Albuquerque

MEETING FACILITATOR: Michael Landen, DOH

COUNCIL MEMBERS PRESENT:

Michael Landen Steven Seifert
 Steve Jenkusky Ernie Dole
 Cheranne McCracken Joanna Katzman
 Frances Lovett Jennifer Weiss

ABSENT:

Jason Flores
 Robert Geist
 Bill Barkman

QUORUM: YES

OTHER PARTICIPANTS: Lynda Ann Green, Arlene Brown, Bernie Lieving, Toby Rosenblatt, Samantha Paredes, Chris Trujillo, Shirley Scott, Mark Clark, Theresa Cruz, Chad Valdez, Elaine Brightwater, Dale Tinker, Victoria Wagner, Irene Ortiz, Michael Zarob, Lori Peterson, Mikiko Takeda Yamada, Deb Profant, Luigi Garcia Saavedra, Jim Davis Naomi Greene, Evonne Gantz, Shelley Bagwell, Jerry Montoya, Ralph McClish, Maggie Hart Stebbins, Kathryn Lowerre, Robert Rhyne, Robert Buser, Sandra Adondakis, Laura Tomedi, Frank Koronkiewicz, Brianna Harrand

I. Introductions and Review of Agenda

Agenda approved

II. Review of August, 12 2016 Advisory Council Meeting Minutes

Meeting Minutes Approved

III. Council Recommendations for MCOs - Mike Landen

- a. Vote on follow-up recommendations for managed care organizations discussed at the August 12, 2016 Council meeting.

<u>Recommendation</u>	<u>Council Response</u>
<u>Methadone Restriction</u>	
1. Create prior authorization requirements when initially prescribing methadone for treatment of chronic pain to include: necessity of use rationale, overdose risk assessment, overdose prevention education, co-prescription of naloxone.	Approved
<u>Overlapping Benzodiazepine and Opioid Restriction</u>	
<u>Amended:</u> 1. Create prior authorization requirements when initiating benzodiazepine therapy for more than 2 months for patients currently on chronic opioid therapy. 2. Create prior authorization requirements when initiating opioid therapy for more than 7 days for patients currently on chronic benzodiazepine therapy. *Patients already on concurrent therapy should be safely tapered to avoid serious risks associated with benzodiazepine withdrawal.	Approved as amended. Change 14 days to 2 months.
<u>High Morphine Milligram Equivalents</u>	

1. Create prior authorization requirements for new start patients titrated above 90 MME/day to include: benefit/justification of dose increase, overdose risk assessment, overdose prevention education, co-prescription of naloxone.	No vote taken; suggestions requested
---	---

IV. Quarterly Prescribing Measures - Jim Davis

- Patients with overlapping opioids from different prescribers down 16% from 2015Q2.
- Patients with overlapping benzodiazepines from different prescribers down 14% from 2015Q2.
- Patients with multiple prescriber/pharmacy episodes down 21% from 2015Q2.
- Number of buprenorphine/naloxone patients up 9% from 2015Q3.
- Increase in naloxone Medicaid claims from outpatient pharmacies.

V. Changes in Drug Specific Overdose Death Rate - Jim Davis

- The cocaine overdose death rate has remained constant in NE region but dropped in all other regions.
- In the NW region, the methamphetamine overdose death rate is higher than the heroin overdose death rate.
- In the metro, prescription opioid overdose death rate has decreased, heroin overdose death rate has increased.
- In the metro, methamphetamine overdose death rate is increasing.

VI. Literature Review: Primary Prevention - Kathryn Lowerre

- FDA-mandated Risk Evaluation and Mitigation Strategy holds potential to improve the safe use of opioids for the treatment of chronic pain.
- North Carolina PDMP study using 2009-2011 data demonstrated positive relationship between PDMP utilization and number of prescriptions filled. Prescribers felt more confident prescribing after using reviewing patient's PDMP report.
- Texas and Florida studies found that pill mill Laws lead to decreased high risk prescribing but only for prescribers with higher levels of baseline opioid prescribing.
- Pennsylvania survey found community pharmacists may be uniquely positioned to screen and identify patients at risk for opioid overdose and misuse.

VII. Summary of Licensing Boards and PMP Rules - Brianna Harrand

- Dental, Osteopathy, and Optometry boards will review common language and PMP rules during scheduled September and October meetings.
- Medical, Nursing, Pharmacy, and Podiatry boards have drafted rules and utilized common language.
- Medical Board Rules Hearing - September 29, 2016 at 4:10pm at RLD Albuquerque Office
- Pharmacy Board Rules Hearing - October 20, 2016. Check RLD website for updated information.
- Podiatry Board Rules Hearing - December 2, 2016 at 1:30pm at RLD Albuquerque Office

VIII. Update on Federal Grants - Evonne Gantz and Laura Tomedi

NMDOH received two CDC grants: Supplemental funding for Prescription Drug Overdose Prevention for States grant and the Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality grant. The Behavioral Health Services Division in the Human Services Department received two SAMHSA grants: The Prescription Drug Opioid Overdose Prevention grant and the Strategic Prevention Framework Partnerships for Prescription Drugs grant.

IX. Action Items -

X. Next Advisory Council Meeting –

OCTOBER 28, 2016

1:30 PM to 3:00 PM

SCIENTIFIC LABORATORIES BUILDING

1101 CAMINO DE SALUD NE

ALBUQUERQUE, NM 87102

New Mexico Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

November 18, 2016
1:30 PM to 3:00 PM
Scientific Laboratories Building
Albuquerque, NM

AGENDA

- I. Introductions and Review of Agenda
- II. Review of September 9, 2016 Advisory Council Meeting Minutes – Mike Landen
- III. NM Prescription Monitoring Program (PMP) – Board of Pharmacy
- IV. Report on Licensing Boards Meeting – Mike Landen
 - a. Intra-professional reporting
- V. Recommendations for MCOs – Mike Landen
 - a. High MME
 - b. Other recommendations
- VI. Council Recommendations - Mike Landen
 - a. Current 2016 approved recommendations
 - b. Additional proposed 2016 recommendations
- VII. Action Items -
- VIII. Next Meeting -

Prescription Drug Misuse and Overdose Prevention and Pain Management Advisory Council

MEETING MINUTES

DATE: November 18, 2016

TIME: 1:30PM TO 3:00PM

LOCATION: Scientific Laboratories Building, Albuquerque

MEETING FACILITATOR: Michael Landen, DOH

COUNCIL MEMBERS PRESENT:

Michael Landen	Steven Seifert
Lynda Ann Green	Clare Romero
Cheranne McCracken	Hank Beckerhoff
Bill Barkman	Ralph McClish
Frances Lovett	Joanna Katzman
	Jennifer Weiss

ABSENT:

Ernie Dole
Steve Jenkusky
Jason Flores
Robert Geist

QUORUM: YES

OTHER PARTICIPANTS: Arlene Brown, Jacob Prieto, Chris Trujillo, Mikiko Takeda, Naomi Greene, Michael Pridham, Elaine Brightwater, Mark Clark, Cristy Wade, Shelley Bagwell, Brooke Parish, Elizabeth Varnedoe, Leslie Dozzo, Sandra Adondakis, Bill Wiese, Brianna Harrand, Jim Davis, Joel Meyers, Jennifer Ortega, Nicole Perea, Linda Siegel, Evonne Gantz, Kathryn Lowerre, Frank Koronkiewicz, Danelle Callen, Robert Rhyne, Brandon Warrick, Chad Valdez, Louanne Cunico, Michael Zarob

I. Introductions and Review of Agenda

Agenda approved

II. Review of September 9, 2016 Advisory Council Meeting Minutes – Mike Landen

Minutes approved

III. NM Prescription Monitoring Program (PMP) – Cristy Wade and Shelley Bagwell

- The PMP changed to a new vendor called Appriss on 10/31/16.
- There are new features provided by Appriss such as, allowing users to reset their own passwords, manage their delegates, and enter multiple DEA numbers (e.g., providers that have a DEA and X number). There are also useful tools such as a daily MME calculator and the ability to run reports by DEA number.
- Providers with 20+ patients receiving controlled substances will be sent a quarterly prescriber feedback report that compares the last six months of their prescribing with peers in their same specialty.

IV. Recommendations for MCOs – Mike Landen

a. High MME

<u>Recommendation for MCOs</u>	<u>Council Response</u>
<u>High Morphine Milligram Equivalents</u>	

1. Create prior authorization requirements for new start patients titrated above 90 MME/day to include: benefit/justification of dose increase, overdose risk assessment, overdose prevention education, co-prescription of naloxone.	No vote taken. Potential for problems that could result in the patient not able to fill their prescription when patients change insurance plans, providers, regimens, etc.
---	---

b. Other Recommendations

No additional recommendations for MCOs were requested during this meeting.

V. Council Recommendations – Mike Landen

- a. Current 2016 approved recommendations
- b. Additional proposed 2016 recommendations

<u>Potential Council Recommendation</u>	<u>Discussion</u>	<u>Council Response</u>
Amend the Comprehensive Addiction and Recovery Act (CARA) of 2016 to include <i>Clinical Nurse Midwives, Clinical Nurse Specialists, and Pharmacist Clinicians</i> in the definition of “qualifying other practitioner.”	<ul style="list-style-type: none"> • NM has midlevel providers that are not physician assistants or nurse practitioners and would benefit from being included in being able to treat opioid use disorder (OUD) with buprenorphine. • The council should consider clinical nurse midwives, clinical nurse specialists, pharmacist clinicians, and clinical psychologists. • Patients with OUD need to be physically examined and clinical psychologists do not physically examine patients. Because of this, clinical psychologists were not included in this recommendation. 	APPROVED; Y-11, N-0, A-0
Licensing entities should promulgate rules requiring practitioners to limit an initial opioid prescription for acute pain to no more than a 10-day supply on a single prescription.	<ul style="list-style-type: none"> • Other states (NY, MA, ME, CT, AZ) have recently passed legislation limiting initial opioid prescriptions for acute pain to a 7-day supply or less. • May be more appropriate for licensing boards to address the need for this limitation instead of the legislature. • There was a very similar bill introduced in 2012 and it did not pass. • For NM, a 10-day limit may be more appropriate than a 7-day limit due to rural hardships. 	APPROVED; Y-10, N-1, A-0
Allow treatment of Opioid Use Disorder to be a statutory approved condition for medical cannabis use.	<ul style="list-style-type: none"> • Patients have testified to the benefit they received using cannabis to ease opioid withdrawal symptoms. • Need more information and review of the evidence before creating a formal recommendation. • Possible medical cannabis presentation in 2017. 	No vote taken

VI. Action Items

VII. Next Meeting: MARCH 24, 2017, 1:30PM – 3:00PM, SCIENTIFIC LABORATORIES BUILDING, 1101 CAMINO DE SALUD NE, ALBUQUERQUE, NM 87102