

**NH PDMP Advisory Council Meeting  
May 21, 2018  
OPLC/NH Board of Pharmacy**

**Meeting Minutes**

**Advisory Council Members Present:**

David Strang, MD, Chair, NH Medical Society (NHMS)  
Stephen Crawford, DVM, Board of Veterinary Medicine (BOVM)  
David DePiero, NH Hospital Association (NHHA)  
Kate Frey, New Futures  
Sean Gill, NH Attorney General's Office, Dept. of Justice (DOJ)  
Joseph Harding, NH Dept. of Health and Human Services (DHHS)  
Eric Hirschfeld, D.D.S, NH Dental Society (via phone)  
Kitty Kidder, APRN Vice Chair, NH Board of Nursing (BON)  
Andy McKibbin, DMD, NH Board of Dental Examiners  
Bradley Osgood, NH Police Chiefs' Association  
Jonathan Stewart, Community Health Institute (CHI)

**Advisory Council Members Absent:**

Gil Fanciullo, MD, NH Board of Medicine (BOM)  
Michael Viggiano, RPh, State Pharmacy Associations  
Candace White-Bouchard, NH Board of Pharmacy (BOP)

**Also Attending:**

Michelle Ricco Jonas, Manager, NH PDMP  
Joanie Foss, Administrative Assistant, NH PDMP  
Charles Albee, DMD, NH Board of Dental Examiners  
Kathy Bizarro-Thunberg, NH Hospital Association  
Sheri Walsh, Director, OPLC Health Professions

The meeting began at 3:06 p.m.

• **Introductions**

A roll call of the Council members was made. Those in the public gallery were introduced.

• **Review & Approve Minutes**

March 19, 2017: Motion to accept by D. DePiero. Second by K. Frey. All in favor.  
There are no minutes from the April 16<sup>th</sup> meeting as this meeting was cancelled due to a lack of quorum.

• **Introduction of Sheri Walsh – Health Profession Director (OPLC)**

S. Walsh introduced herself and explained her new position at OPLC. She was welcomed by the A.C. members in her new role.

- **PDMP Performance Audit Plan (M. Ricco Jonas)**

M. Ricco Jonas gave a brief review of the Summary & Data report (handouts were provided). She also handed out the latest Audit Report, which includes data through April 26th. NOTE: Dates stricken with red lines, means deadlines were changed to May. D. Strang voiced a concern with the large increase in numbers in the stimulant column from the initial reporting period to the next. He requested that Appriss look into these numbers and report to the A.C. on their accuracy. M. Ricco Jonas agreed. It was also mentioned that hydrocodone changed schedules from Schedule III to II in 2016.

- **New Business**

1. Definitions, Criteria, Thresholds and Measurements

M. Ricco Jonas reviewed recommendations from several of the sub-committees after both joint and individual meetings. These included:

**High Current Daily Dose of Opioids (MME [Morphine Milligram Equivalents])**

Comments:

D. Strang is concerned about alert fatigue. As most patients in this category will likely be receiving opiates for treatment of chronic pain, he suggests that Appriss program this so that alerts go out twice a year, concurrent with the requirement to query the PDMP twice per year when prescribing opiates for chronic pain. M. Ricco Jonas will check into this.

J. Harding suggested that we consider color-coding “Alerts.”

M. Ricco Jonas stated this particular alert would go out if a patient were receiving over 100 MME/day during *any* time in a 90-day period. D. Strang stated he thought it was 100 MME/day *every* day during this 90-day period. If the former, K. Bizarro-Thunberg fears providers could be getting alerts every day. She suggests that we define what the alert trigger truly is.

K. Kidder asked if patients with terminal disease receiving high doses of opiates would be included in this alert. M. Ricco Jonas will ask Appriss about the diagnosis code and how they handle terminal disease patients within the alert system.

**Concurrent Benzodiazepine and Opioid Prescriptions**

Comments:

D. Strang stated that the BOP Commissioners (at last weeks BOP meeting) requested a specific number of benzodiazepine *doses* to trigger this alert, rather than a number of *days’ supply* (as a days’ supply could vary widely). They suggested we consider 5 or more doses. D. DePiero felt this sounded like a good place to start.

D. Strang requested that we ask Appriss what their trigger point is to activate this alert. M. Ricco Jonas will inquire and ask if we can request a specific number.

K. Kidder asked when a provider gets an alert, do they need to respond to that alert? M. Ricco Jonas stated no. D. Strang suggested that we consider requiring such a response, so that a future audit could not claim we have no idea if the State's providers are even viewing these alerts. This could be a simple button on the PDMP website to click indicating "I have received this alert/notification." This should not be accessible by a delegate though, only the provider should be able to respond to this. He also suggested that we use these alerts as an educational opportunity/tool.

### **Multiple Prescribers or Pharmacies**

Comments:

Per D. Strang, Commissioner Pervanas stated (at last weeks BOP meeting) that she was concerned someone may be going to multiple pharmacies within the same chain on the same day and therefore, we should consider different pharmacies within the same chain as separate pharmacies. Representatives from the chain pharmacies stated at this meeting, that this activity was very easy to detect with the current industry software and was therefore not a concern. The BOP Commissioners therefore were comfortable with using different pharmacies within the same chain as one pharmacy.

- Vendor Capabilities

Comments:

M. Ricco Jonas stated that these alert capabilities are going to be integrated into the strategic planning process. The above 3 alerts are offered in a single package by Appriss at a cost of \$7,500 to start and then \$5,000/year thereafter. She would like the A.C. to make a recommendation on this package to the BOP. J. Stewart motioned to recommend they accept this package. Second by A. McKibbin. All in favor with E. Hirschfeld abstaining.

M. Ricco Jonas reviewed "NarxCare," also offered by Appriss. Although this package has many more capabilities, it is extremely expensive (6 figures annually and therefore beyond our budget capabilities). She recommended that we defer any action on this as something similar may be offered by the Federal government in the future at no cost.

K. Bizarro-Thunberg asked if there is any flexibility in definitions. M. Ricco Jonas indicated there was.

- Other Alerts

M. Ricco Jonas also reviewed several slides re: Data on Clinical Alerts. She plans to send these slides to the A.C. members.

Comments:

D. Strang asked that she define "MAT" or Medication Assisted Therapy. This refers to medication prescribed or filled with a DEA number that starts with an "X" (e.g. Suboxone). M. Ricco Jonas plans to add "Opioid Use Disorder" to these PDMP entries.

D. Strang asked S. Crawford if he knew what type of animal would be receiving over 100 MME daily. S. Crawford did not know. M. Ricco Jonas will check with the BOVM.

D. Strang asked if the State's licensing boards were using the information that the PDMP was providing to them? M. Ricco Jonas indicated they were.

2. Recommendation from AC to BOP Regarding Reasonable Prescribing Limits (D. Strang)  
G. Merchant (BOP President) has requested that the A.C. make a recommendation that the BOP could send out to providers on prescribing thresholds, as some pharmacies are now uncomfortable filling a Rx above certain levels for (apparent) acute pain. This is generating phone calls from the pharmacist to the provider. Some of these calls are going unanswered, with the result being a refusal to fill the Rx. Some of these calls have been contentious. It was mentioned that, in some cases, insurance companies might be putting limits on the quantity dispensed. Sometimes the pharmacist may be hesitant to fill, because they are aware that a specific prescriber has bad habits. K. Kidder stated she had concerns about the A.C. recommending certain specific prescribing limits.

D. Strang stated this was a preliminary discussion at the request of G. Merchant and suggested continuing this at the June A.C. meeting. He would also like to get input from M. Viggiano who represents the retail pharmacies. It was felt that discussion between the BOP and the State licensing boards needs to take place as well.

3. Practitioner Survey (J. Stewart)

J. Stewart mentioned the past two surveys. He plans to send out another prescriber and dispenser survey, the information to be used in the strategic planning process. Both surveys will be sent out in the same year, not in opposite years as before.

- **Old Business**

1. SB 573 Update (M. Ricco Jonas)

This legislation passed. Upon signature of the Governor, the funds will be appropriated and training with the Medical Examiner's (M.E.) office will be set up by M. Ricco Jonas.

The M.E. office will be able to do interstate querying with the following states: VT, ME and CT (but no delegates permitted). Delaware will agree if we agree to delegate access. We are checking on whether we can permit delegate access for other states.

MA and NJ do not allow their Medical Examiner to query. We have not heard back yet from RI and NY.

2. Printing and Storing Update (M. Ricco Jonas)

ME, MA, CT, RI and NJ allow NH practitioners to print and store interstate data in their patients' charts. VT allows printing for viewing only, **BUT NO STORAGE** in a patient's chart. We are still awaiting a response from NY and DE.

3. Strategic Plan Update (M. Ricco Jonas)

The Strategic Planning Session will take place on Wed. & Thurs., June 27 & 28, 2018. Invitations are being finalized and they will go out by the end of the day tomorrow. There were no responses to the RFP, so the meeting will be held at the Department of

Transportation (7 Hazen Drive, Concord). P. Knue and J. Giglio from TTAC will be helping M. Ricco Jonas to setup and run the 2-day session.

M. Ricco Jonas has a list of attendees. She requests to be notified if there is a group or individual that we think should be invited.

A draft agenda should be completed this week. M. Ricco Jonas will send this out to the A.C. members for review and comment.

- **Items of Interest**

NE HIDTA – Emerging Threat Initiative meeting was held on May 16, 2018 in Maynard, MA. M. Ricco Jonas gave a brief review of this meeting and who was in attendance. Stimulants are a new focus of concern. John Eddy, one of the attendees, has offered to look at our plan.

D. Strang mentioned a televised program recently aired on NH PBS called “First Do No Harm.” It profiled the opiate addiction epidemic and the perceived role of the pharmaceutical industry in this. He found it to be an excellent show and urged the A.C. members to watch it. A repeat broadcast can be found on both the NH PBS and NH Explorer channels

M. Ricco Jonas asked D. Strang if he wanted to cancel the June 18th A.C. meeting due to the upcoming Strategic Planning Session. D. Strang thought it best to hold this meeting as scheduled due to the number of Audit items that still need to be completed.

M. Ricco Jonas stated that she hoped to have our new analyst on board in July.

- **Next Meeting**

Date/Time: June 18, 2018; 3:00 p.m.

Location: Office of Professional Licensure and Certification

- **Strategic Planning Session**

Date/Time: June 27-28, 2018; 8:00 a.m. – 4:00 p.m.

Location: Department of Transportation, 7 Hazen Drive, Concord, NH

- **Adjournment**

Motion to adjourn at 4:58 p.m. by D. DePiero. Second by A. McKibbin. All in favor.

Respectfully submitted,



David E. Strang, MD  
Chairman