




STATE OF NEW HAMPSHIRE
 Board of Pharmacy
Prescription Drug Monitoring Program
 AUDIT FINDING Corrective Action Plan

June 2018 Meeting Status Report
Time Period: 04/27/18 – 05/24/18

 Update Status – In Process
 Update Status – Current Month Update
 Update Status – Completed

Completion Status:
 Open •
 Partial ••
 Substantial •••
 Full ••••

#	Observation Title	Recommendation	Action Item	Due Date	Primary Lead	Completion Status	Comments
1	Improve Focus on Outcome and Effectiveness Measures	Develop definitions, criteria, and thresholds to validate relevant indicators of PDMP effectiveness and incorporate them into administrative rule	Development of Advisory Council Committees (<i>strategic planning; policy & procedure; legislation & rules; data & evaluation</i>)	January 2018	Council	••••	The Council has developed four committees and they have begun to meet. Each committee has been given a breakdown of the action items/ recommendations outlined in the audit outlining whether the group is “primary” or “secondary” for working on them.
			Council draft definitions, criteria, thresholds outcomes to monitor in preparation of strategic planning process.	April MAY 2018 This date has been amended	Council	••••	APRIL: The policy and procedure committee has begun the review the draft definitions, criteria and thresholds by reviewing other states definitions, criteria and thresholds. Discussion will go before the Council to determine if actual language will be presented to the Board or to develop a process to use at the strategic planning process to go before the Board for approval. MAY: Due to challenges with weather and scheduling the sub-committees and advisory council was unable to meet in April as planned. Therefore the initial work completed by the sub-committee was not presented to the larger advisory council and

							<p>then brought to the Board in the April meetings. It is anticipated that the sub-committee will have to finalize its work in April/May and present draft recommendations out of committee since the Advisory Council will not be able to meet prior to the Board meeting in May (5/16/18) and then the full advisory council will then take up the recommendations with input from the board at their 5/21/18 meeting for a final draft to be brought to the July strategic planning session.</p> <p>JUNE: Two of the sub-committees met to develop definitions, criteria and thresholds on 5/1/2018 and the Data and Evaluation sub-committee met and reviewed the information and came up with recommendations for measuring them. This information was presented to the Board of Pharmacy on 5/16/18 and the entire Advisory Council on 5/21/18. The Advisory Council motioned and approved to recommend the 3 definitions that make up the clinical alert package to the Board at their 6/20/18 meeting and these will also be integrated into the Strategic Planning session (June 27-28, 2018).</p>
			Board approves draft definitions, criteria, thresholds outcomes to monitor in preparation of strategic planning process.	<p>April 2018 MAY JUNE 20 2018</p>	Board	...	<p>May: Due to challenges with weather and scheduling the sub-committees and advisory council was unable to meet in April as</p>

							<p>planned. Therefore the initial work completed by the sub-committee was not presented to the larger advisory council and then brought to the Board in the April meetings. It is anticipated that the sub-committee will have to finalize its work in April/May and present draft recommendations out of committee since the Advisory Council will not be able to meet prior to the Board meeting in May (5/16/18) and then the full advisory council will then take up the recommendations with input from the board at their 5/21/18 meeting for a final draft to be brought to the July strategic planning session.</p> <p>JUNE: The Advisory Council has approved to recommend the 3 definitions that make up the clinical alert package to the Board at their 6/20/18 meeting and these will also be integrated into the Strategic Planning session (June 27-28, 2018).</p>
1	Improve Focus on Outcome and Effectiveness Measures	Implement and refine an evidence-based approach to assess validated PDMP outcomes; develop, implement, and refine a system to empirically demonstrate PDMP outcomes related	Secure funding for strategic planning session	Mar 2018	Staff	••••	Fiscal Committee on 3/16/18 and Governor and Council on 3/21/18 approved the use of general funds to contract with a consultant to assist with putting on a strategic planning session was approved.

		<p>to each validated outcome</p> <p>Include components related to monitoring and assessing PDMP effectiveness relative to each validated outcome in its strategy and plans, including a timeline with milestones spanning initial development through final validation and implementation to help mature the program</p>	<p>Hold a facilitated strategic planning session (all stakeholders)</p>	<p>May 2018</p> <p>June 2018</p>	<p>ALL</p>	<p>•••</p>	<p>Work has begun to draft an RFP to solicit a consultant/contractor to hold a facilitated strategic planning session (2 day) in early June 2018.</p> <p><u>MAY</u>: The RFP has been drafted and expected to be released 4/30/18.</p> <p><u>JUNE</u>: The program did not receive any responses to the RFP. We will be receiving technical assistance from PDMP Training and Technical Assistance Center of Brandeis. Pat Knue and Jim Giglio through the TA grant they receive from the Bureau of Justice Administration (BJA) can offer this assistance to states. They will be co-facilitating with PDMP manager. The location for the 2-day strategic planning event (June 27-28, 2018) will be held at the Dept of Transportation on 7 Hazen Drive, Concord, NH.</p>
			<p><u>Strategic Plan Drafted</u></p> <p>Include an evidence based approach to assess PDMP outcomes</p>	<p>July 2018</p>	<p>ALL</p>	<p>•••</p>	<p>Will be using tools provided by the PEW Charitable Foundation designed for PDMP strategic planning.</p>
<p>1</p>	<p>Improve Focus on Outcome and Effectiveness Measures</p>	<p>Clarify how the PDMP can be reasonably expected to affect validated outcomes, and when outcomes and effects will be expected</p>	<p><u>Administrative rule changes defined</u></p> <p>Incorporate defined definitions, criteria and thresholds into Administrative Rules</p>	<p>Sept 2018</p>	<p>Board</p>	<p>•</p>	

			<u>Monitoring & Assessing Effectiveness – Annual Report</u> -(could be quarterly with increased staffing capacity)	Nov 2018 (annual)	Staff/ Board	••	<p>Completed an annual report and presented it to the HHS Oversight Committee and provided copies to the Governor, Speaker of the House, Senate President and other interested legislators.</p> <p>Held a meeting with other state level data analyst on 3/12/18 to discuss how PDMP data can be shared and integrated with other state data (e.g. ME data, ER overdose data, treatment data etc) to develop predictive analytics</p> <p>Provided quarterly data with Audit report that shows a comparison of Rx dispensed in NH from Jan-Mar in 2016 vs. 2017. Also see comparison of Top Ten controlled substances dispensed during the quarter of Jan-Mar 2016 vs. 2017.</p>
			<u>Policy & Procedure development</u> Monitoring and assessing effectiveness to include a timeline of when outcomes and effects will be expected	Sept 2018	Council	••	<p>This has been identified as a primary activity for the Policy & Procedure sub-committee. This was reviewed & discussed at their meetings on 2/28/18 and 3/19/18.</p> <p><u>MAY:</u> Program manager has been doing an extensive literature review on assessing effectiveness of PDMPs. Program manager has reached out to other state PDMP on guidance for how they are measuring effectiveness, all of which to include in discussions with advisory council, the Board and strategic planning process.</p>

2	Improve Assessment and Measurement of Plausible Outcomes and Effectiveness Measures	<p>Formally establish reducing opportunities for doctor shopping of schedule II through IV controlled drugs as a PDMP outcome</p> <p>select relevant and measureable indicators of patient care and treatment and overprescribing related to schedule II through IV controlled drugs</p> <p>Develop and implement standard educational materials for prescribers and dispensers on indicators of doctor shopping, and when and how to report potential doctor shopping to Board staff or law enforcement</p>	<p>Strategic Plan Drafted</p> <p>Include training providers and dispensers as stakeholders when developing training materials on definitions, criteria and thresholds as well as timeline for when & how trainings will be delivered.</p> <p>Include for providers and dispensers on indicators of doctor shopping, and when and how to report potential doctor shopping to Board staff or law enforcement</p> <p>Review “better care/patient treatment” language with regards to outcomes and evaluation</p>	July 2018	ALL	•	
2	Improve Assessment and Measurement of Plausible Outcomes and Effectiveness Measures	<p>Qualify overprescribing-related and doctor shopping-related outcomes, such as limiting them to opioids specifically, so the PDMP is not expected to achieve unreasonable outcomes</p>	<p><u>Define statute changes to legislature</u></p> <p>Formally establish reducing doctor shopping opportunities as an outcome</p> <p>Change “better care/patient treatment” language w/regards to outcomes and evaluation if necessary</p>	July 2018	Board	•••	<p>This was reviewed & discussed at Policy & Procedure sub-committee meetings on 2/28/18 and 3/19/18.</p> <p>Staff proposed draft changes to sub-committee to review and then present to the Advisory Council to present to the Board for the April Meeting.</p> <p><u>MAY</u>: April advisory council meeting was cancelled due to bad weather.</p> <p><u>JUNE</u>: The Adv. Council and BOP is no longer using the terminology of “doctor shopping”. The rationale for this</p>

							<p>is because not all patients who see multiple providers are necessarily “doctor shopping”. The Clinical Alert that would provide information and education to a provider that they have a patient who has reached a defined threshold of “multiple prescribers or multiple pharmacies” is simply that an alert for them to review their patients controlled history report. If there are concerns, to then discuss those findings with the patient. If no concerns then something to monitor if necessary. There likely may not be a need for statute change as initially proposed by the audit, since the intent of the alert is quite different as the interpretation of the finding. This will be further reviewed by all stakeholders at the strategic planning session.</p>
			Administrative rule changes defined based on legislative changes.	Sept 2018	Board	•	SEE ABOVE
2	Improve Assessment and Measurement of Plausible Outcomes and Effectiveness Measures	Develop, implement, and refine routine reporting mechanisms through which prescribers and dispensers can report potential doctor shopping or overprescribing to Board staff for further investigation	<u>Policy & Procedure development</u> Reporting mechanisms for practitioners to report possible doctor shopping or over prescribing to Board staff for further investigation	Sept 2018	Council	••	<p>This was reviewed & discussed at Policy & Procedure sub-committee meetings on 2/28/18 and 3/19/18. Brief report at the March Advisory Council meeting – formal recommendation to be presented at the April Advisory Council meeting.</p> <p><u>MAY</u>: April advisory council meeting was cancelled due to bad weather.</p>

3	<p>Improve Assessment and Measurement of Somewhat Plausible Outcomes and Effectiveness Measures</p>	<p>Rationalize opinions and evidence to select relevant and measureable indicators of practitioner-patient relationships involving controlled drugs, patient morbidity related to controlled drugs, abuse and opportunities for abuse of controlled drugs, and opportunities for diversion of controlled drugs, including fraudulent prescribing and forged or altered prescriptions, for schedules II through IV controlled drugs</p> <p>Qualify outcomes related to patient morbidity, abuse and opportunities for abuse, the type of deaths, and opportunities for diversion related to schedule II through IV controlled drugs, such as limiting to opioids specifically, so the PDMP is not expected to achieve unreasonable outcomes</p> <p>Determine whether available data from other State agencies is amenable, or could be amenable, to assessing PDMP effectiveness on patient morbidity, abuse and opportunities for abuse, the type of deaths, opportunities for</p>	<p>Strategic Plan Drafted</p> <p>Qualify outcomes related to patient morbidity, abuse and opportunities for abuse, the type of deaths, and opportunities for diversion related to schedule II through IV controlled drugs</p> <p>Determine whether available data from other State agencies is amenable, or could be amenable, to assessing PDMP effectiveness on patient morbidity, abuse and opportunities for abuse, the type of deaths, opportunities for fraudulent prescribing, or opportunities for filling forged and altered prescriptions related to schedule II through IV controlled drugs</p> <p>If deemed necessary/useful for evaluation through strategic planning, identify relevant State agencies and develop agreements with them to obtain necessary data on a routine basis</p> <p>Review whether a mechanism to solicit patient feedback on changes in practitioner-patient relationships is feasible and cost effective</p>	July 2018	ALL	•	
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		<p>fraudulent prescribing, or opportunities for filling forged and altered prescriptions related to schedule II through IV controlled drugs</p> <p>Determine whether a mechanism to solicit patient feedback on changes in practitioner-patient relationships is feasible and cost effective</p>					
3	<p>Improve Assessment and Measurement of Somewhat Plausible Outcomes and Effectiveness Measures</p>	<p>Determine whether a mechanism to solicit patient feedback on changes in practitioner-patient relationships is feasible and cost effective</p> <p>Determine whether available data from other State agencies is amenable, or could be amenable, to assessing PDMP effectiveness on patient morbidity, abuse and opportunities for abuse, the type of deaths, opportunities for fraudulent prescribing, or opportunities for filling forged and altered prescriptions related to schedule II through IV controlled drugs</p>	<p><u>Define statute changes</u></p> <p>Limit outcome for practitioner-patient relationship to perspective of registered prescriber/dispensers</p> <p>If necessary, qualify data from other agencies for evaluation of PDMP outcomes</p>	July 2018	ALL	•	
			<p><u>Administrative rule changes defined</u></p> <p>Regulatory Boards will provide ¼ reports on data results provided (e.g. disciplinary action on licensees)</p> <p>Medical Examiner Office will provide ¼ reports on data results provided (e.g. morbidity outcomes)</p> <p>Law Enforcement will provide reports on data results provided on patient investigations</p>	Sept 2018	Board	•	

3	Improve Assessment and Measurement of Somewhat Plausible Outcomes and Effectiveness Measures	Develop a process to connect survey results with analysis of PDMP data and data from other State agencies, where necessary	<u>Policy and procedure development</u> Receiving input back from regulatory boards, medical examiner office and law enforcement on a defined schedule the outcome of the data/reports provided by the PDMP.	Sept 2018	Council	•	
4	Refine or Eliminate Less Plausible Outcomes and Effectiveness Measures	Eliminate the statutory outcomes of patient mortality and the number of drug deaths,	Council draft definitions, criteria, thresholds outcomes to monitor in preparation of strategic planning process.	April 2018 May 2018	Council	••••	<p>The policy and procedure committee has begun the review if the draft definitions, criteria and thresholds by reviewing other states definitions, criteria and thresholds. Discussion will go before the Council to determine if actual language will be presented to the Board or to develop a process to use at the strategic planning process to go before the Board for approval.</p> <p><u>MAY</u>: Did not meet in the last month due to weather challenges.</p> <p><u>JUNE</u>: Two of the sub-committees met to develop definitions, criteria and thresholds on 5/1/2018 and the Data and Evaluation sub-committee met and reviewed the information and came up with recommendations for measuring them. This information was presented to the Board of Pharmacy on 5/16/18 and the entire Advisory Council on 5/21/18. The Advisory Council motioned and approved to recommend the 3 definitions that make up the</p>

							clinical alert package to the Board at their 6/20/18 meeting and these will also be integrated into the Strategic Planning session (June 27-28, 2018).
			Board approves draft definitions, criteria, thresholds outcomes to monitor in preparation of strategic planning process.	April 2018 May 2018	Board	•••	Due to challenges with whether and scheduling the sub-committees and advisory council was unable to meet in April as planned. It is anticipated that the sub-committee will have to finalize its work in April/May and present draft recommendations out of to the Board meeting in May (5/16/18) and then the full advisory council will then take up the recommendations with input from the board at their 5/21/18 meeting for a final draft to be brought to the July strategic planning session. JUNE: The Advisory Council has approved to recommend the 3 definitions that make up the clinical alert package to the Board at their 6/20/18 meeting and these will also be integrated into the Strategic Planning session (June 27-28, 2018).
4	Refine or Eliminate Less Plausible Outcomes and Effectiveness Measures	Eliminate the statutory outcomes of patient mortality and the number of drug deaths, Limit outcomes related to diversion of schedule II through IV controlled drugs to more plausible outcomes and practical measures	Strategic Plan Drafted Based on definitions, criteria and thresholds defined, review statutory language related to outcomes to patient mortality and # of drug deaths and whether PDMP has direct and measurable impact on those and adjust as necessary to more plausible outcomes and practical measures	July 2018	ALL	•	

			<u>Define statute changes</u> Eliminate PDMP statutory outcome language associated to patient mortality and #of drug deaths	July 2018	ALL	•	
			Administrative rule changes defined as determined by legislative changes.	Sept 2018	Board	•	
5	Formalize a Risk Based PDMP Strategy and Plans	Assess the current contracts and Board strategic needs before potential vendor migration must occur to ensure the terms and conditions of each contract fully support attaining PDMP outcomes Revalidate the data analytics contract with amended dates for deliverables reflecting anticipated completion of tasks	<u>Begin Contract Extension with vendor (2yr 5months)</u> Refine data analysis and assess terms and conditions of contract extension to full support PDMP outcomes.	April 2018	Staff	••	This will require additional funds May: Review of current contract has taken place; enhancement options are currently under review.
5	Formalize a Risk Based PDMP Strategy and Plans	Formalize a risk-based strategy, with milestones, targets, goals, performance measures, and objectives Include key stakeholders throughout the process	Secure funding for strategic planning session	March 2018	Staff	••••	Fiscal Committee on 3/16/18 and Governor and Council on 3/21/18 approved the use of general funds to contract with a consultant to assist with putting on a strategic planning session was approved.
			Reporting functions identified with vendor	Feb-April 2018	ALL	••••	Vendor provided a presentation to stakeholders on 1/22/18 that included current capabilities and enhanced capabilities of the system. Vendor provided examples of the enhancements and costs for implementation and annual

							<p>maintenance. Vendor also shared enhancements to the system that could be adapted to the program that would be of no cost if the purpose met the strategic needs of the NH program. This list along with the paid enhancements will be reviewed in the strategic planning process. Vendor was also asked to identify the reports that other states use to identify “effectiveness” of the program.</p>
			Hold a facilitated strategic planning session (all stakeholders)	May 2018 June 2018	ALL	•	Given the timing of the RFP release and getting it through Governor and Council this date needed to be amended to June 2018.
5	Formalize a Risk Based PDMP Strategy and Plans	Evaluate the strategy’s near-term and long-term effectiveness by reviewing and updating the strategy routinely	<u>Strategic Plan Drafted</u> Evaluation of near & long term effectiveness will be built into plan timeline	July 2018	ALL	•	
			Implement Strategic Plan	Nov 2018	ALL	•	Partial implantation with current staffing. Will need additional staffing for full implantation.
			Obtain additional personnel and software (PDMP analyst & 2 pharm techs)	July 2019	ALL	••••	Fiscal Committee on 3/16/18 and Governor and Council on 3/21/18 approved the use of general funds to contract with a consultant to assist with putting on a strategic planning session was approved.
6	Create a Performance Measurement System	Develop and establish a performance measurement system with defined goals, objectives, targets, and measures to efficiently and effectively evaluate	<u>Strategic Plan Drafted</u> Establish a performance measurement system (goals, objectives, and measures)	July 2018	ALL	•	
			Establish operations & effectiveness at the process,				

		<p>Board operations and PDMP effectiveness at the process, output, and outcome levels;</p> <p>Collaborate with other statewide entities to incorporate multiple data resources into Council and Board analyses and assessments of PDMP processes, outputs, and outcomes;</p> <p>Develop performance measures and routinely administer comprehensive surveys related to statutorily-specified areas for monitoring and evaluation, as well as relevant outputs and processes;</p> <p>Include performance measurement in the development of its strategy and plans.</p>	<p>output and outcome levels Inclusion of performance measures in the development of strategies/plans</p> <p>Identification of other statewide data sources to assist with analysis and assessment Inclusion of PDMP data with other statewide data sources for analysis and assessment</p> <p>Establish a plan for survey development within monitoring and evaluation section of plan.</p>				
7	Establish Criteria and Thresholds	Criteria and thresholds defining abuse, misuse, diversion, and violation of professional standards	<u>Development of Advisory Council Committees</u> <i>(strategic planning; policy & procedure; legislation & rules; data & evaluation)</i>	January 2018	Council	••••	Committees have been formed, duties defined and members. All committees have met during this reporting period and have scheduled meetings going forward.
			Council draft definitions, criteria, thresholds outcomes to monitor in preparation of strategic planning process.	April 2018 MAY 2018	Council	•••	The policy and procedure committee has begun the review if the draft definitions, criteria and thresholds by reviewing other states definitions, criteria and thresholds. Discussion will go before the Council to

							<p>determine if actual language will be presented to the Board or to develop a process to use at the strategic planning process to go before the Board for approval.</p> <p><u>MAY</u>: Due to challenges with whether and scheduling the sub-committees and advisory council was unable to meet in April as planned. It is anticipated that the sub-committee will have to finalize its work in April/May and present draft recommendations out of to the Board meeting in May (5/16/18) and then the full advisory council will then take up the recommendations with input from the board at their 5/21/18 meeting for a final draft to be brought to the July strategic planning session.</p> <p><u>JUNE</u>: Two of the sub-committees met to develop definitions, criteria and thresholds on 5/1/2018 and the Data and Evaluation sub-committee met and reviewed the information and came up with recommendations for measuring them. This information was presented to the Board of Pharmacy on 5/16/18 and the entire Advisory Council on 5/21/18. The Advisory Council motioned and approved to recommend the 3 definitions that make up the clinical alert package to the Board at their 6/20/18 meeting and these will also be integrated</p>
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							into the Strategic Planning session (June 27-28, 2018).
			Board approves draft definitions, criteria, thresholds outcomes to monitor in preparation of strategic planning process.	April 2018 May 2018 June 2018	Board	•	As mentioned – this date had to change because of scheduling challenges for meetings due to weather. JUNE: The Advisory Council has approved to recommend the 3 definitions that make up the clinical alert package to the Board at their 6/20/18 meeting and these will also be integrated into the Strategic Planning session (June 27-28, 2018).
7	Establish Criteria and Thresholds	Issuing unsolicited reports to practitioners and their regulating	Strategic Plan Drafted Identification of timing for unsolicited reports to practitioners	July 2018	ALL	•	
7	Establish Criteria and Thresholds	Provide regulatory boards necessary reports and instructions to ensure recommendations for further investigation are received timely	<u>Administrative Rule changes defined</u> concerning reporting functions; reporting cycles; content and form and criteria	Sept 2018	Board	•	
			<u>Policy & Procedure development</u> Unsolicited reports to practitioners and criteria of when regulatory boards will be notified.	Sept 2018	Council	•	
8	Establish a System to Address Possible Doctor Shopping	Promulgate administrative rules to structure and regulate the system it expects to use to address potential doctor shopping threshold (based on State statutory threshold???)	<u>Council draft definitions, criteria, thresholds outcomes to monitor in preparation of strategic planning process.</u> (To include better	April 2018 May 2018	Council	•	Will seek legislative or rule language to clarify for the purpose of identifying patients who may be “doctor shopping” in the PDMP to be different than that of State statutory language. As the State metric is too low,

			<p>care/patient treatment, over prescribing and doctor shopping threshold)</p> <p>(Consider qualifying overprescribing & doctor shopping specifically to opioids only)</p>				<p>unmanageable from an analytic perspective and to align it more closely with other state PDMP and Federal reporting “doctor shopping” metrics.</p> <p>JUNE: The Adv. Council and BOP is no longer using the terminology of “doctor shopping”. The rationale for this is because not all patients who see multiple providers are necessarily “doctor shopping”. The Clinical Alert that would provide information and education to a provider that they have a patient who has reached a defined threshold of “multiple prescribers or multiple pharmacies” is simply that an alert for them to review their patients controlled history report. If there are concerns, to then discuss those findings with the patient. If no concerns then something to monitor if necessary. There likely may not be a need for statute change as initially proposed by the audit, since the intent of the alert is quite different as the interpretation of the finding. This will be further reviewed by all stakeholders at the strategic planning session.</p>
			<p>Pharmacy Board approves draft definition, criteria, and threshold outcomes in preparation of strategic planning process.</p>	<p>April 2018</p> <p>May 2018</p> <p>June 2018</p>	<p>Board</p>	<p>•</p>	<p>As mentioned – this date had to change because of scheduling challenges for meetings due to weather.</p>

							<p>JUNE: The program did not receive any responses to the RFP. We will be receiving technical assistance from PDMP Training and Technical Assistance Center of Brandeis. Pat Knue and Jim Giglio through the TA grant they receive from the Bureau of Justice Administration (BJA) can offer this assistance to states. They will be co-facilitating with PDMP manager. The location for the 2-day strategic planning event (June 27-28, 2018) will be held at the Dept of Transportation on 7 Hazen Drive, Concord, NH.</p>
			Provide training materials on definitions, criteria and thresholds and notifications for providers and dispensers	June 2018 Sept 2018	Staff	••	<p>JUNE: Training will be on hold until final selection of alerts has been selected and date for dispatch through database has been set up with vendor.</p>
8	<p>Establish a System to Address Possible Doctor Shopping</p>	<p>Timely notify practitioners who may be involved in prescribing for a doctor shopper;</p> <p>Timely provide reports to regulatory boards on practitioners identified as being involved in possible doctor shopping</p>	Review with vendor database capabilities to capture data for outcome/eval	Feb-Apr 2018	Staff	••••	<p>Appriss has provided training to staff in February on the Tableau and Jasper systems, which are the systems to produce data reports. Some of these reports are considered “can reports” and are fairly easy to produce canned reports; however population level data analysis through the Jasper system or within the Tableau system requires more analytical experience.</p> <p>The staff from the Institute of Health Policy and Practice set up data reports that can be modified for future annual reports based on the data slides selected for the 2018 report.</p>

							<p>For a more enhanced data experience – NH could purchase the vendor’s advanced analytics package. This would allow easier access to population level reports.</p> <p>The cost for this enhancement would be \$75,000 for set up + \$30,000 (first year) and then \$30,000 annually.</p> <p>This enhancement will be evaluated with others during the strategic planning session in June for final decision making for the contract extension.</p>
			Review with vendor system notification capabilities to providers re: patients who meet “doctor shopping” threshold	Feb-Apr 2018	Staff	••••	<p>Appriss confirmed that NH currently has the capability to notify providers re: patients who meet a defined threshold for seeing “X” number of prescribers and “Y” number of pharmacies.</p> <p>Once the Advisory Council has finalized a proposal for the Board and the Board has approved, this will be brought into the strategic plan process to finalize the frequency of the reports to providers, as well to include educational/resource materials to accompany the reports.</p>
			Review with vendor system capabilities to provide a report to regulatory boards on practitioners identified as being involved in possible “doctor shopping”	Feb-Apr 2018	Staff	••••	<p>Capabilities for the vendor/system to provide a report to PDMP admin to report to regulatory boards on practitioners who have remained involved with patients seeing multiple providers over a set period of time has been</p>

							discussed. This will likely be an additional cost and would be prioritized within strategic plan and part of contract extension negotiations.
			Initiate doctor shopping notifications to practitioners	July 2018	Staff	•	
8	Establish a System to Address Possible Doctor Shopping	Include in its strategy and plans a component related to doctor shopping threshold revisions, rule promulgation, policy and procedure development, reporting, and outcomes tracking	<u>Define statute changes to legislature</u> Formally establish reducing doctor shopping opportunities as an outcome with Program defined threshold.	July 2018	Board	•	
			<u>Administrative rule changes defined</u> (specifically around regulation of the system based on “program defined threshold” vs. State’s statutory threshold	Sept 2018	Board	•	
			<u>Policy & Procedure development</u> Law Enforcement access to PDMP data when there is potential doctor shopping or forgery	Sept 2018	Council	•	This will require legislative change.

9	Improve Knowledge and Internal Information Management	<p>Establish, refine, and use concrete, observable, and objective measures that clearly represent PDMP performance and are uninfluenced by external factors to describe relevant inputs, processes, outputs, and outcomes that are directly linked to validated outputs and outcomes framed in State law and in the Board's strategy;</p> <p>Standardize periodic reporting cycles, and the format and content of reports between the Board, the Council, and other regulatory boards to: 1) ensure each receives necessary information to permit regulatory boards to enforce PDMP requirements, 2) permit the Council to collect performance information, and 3) allow the Board to evaluate PDMP operations and outcomes</p>	Secure funding for strategic planning session	March 2018	Staff	••••	Fiscal Committee on 3/16/18 and Governor and Council on 3/21/18 approved the use of general funds to contract with a consultant to assist with putting on a strategic planning session was approved.
			Hold a facilitated strategic planning session (all stakeholders)	June 2018	ALL	•••	<p>Updated the date to hold the meeting to June 2018 as we will time to procure a consultant through an RFP process.</p> <p>RFP has been drafted and expected release date is 4/30/18. We are projecting to hold the strategic planning session the last week in June 2018.</p> <p><u>JUNE:</u> The program did not receive any responses to the RFP. We will be receiving technical assistance from PDMP Training and Technical Assistance Center of Brandeis. Pat Knue and Jim Giglio through the TA grant they receive from the Bureau of Justice Administration (BJA) can offer this assistance to states. They will be co-facilitating with PDMP manager. The location for the 2-day strategic planning event (June 27-28, 2018) will be held at the Dept of Transportation on 7 Hazen Drive, Concord, NH.</p>

			<p>Strategic Plan Drafted Establish objective measures directly linked to outputs and outcomes</p> <p>Establish periodic reporting cycles and format for reporting to the Board, the Council and Regulatory Boards</p> <p>Information management – see observation #5</p>	July 2018	ALL	••	<p>The Evaluation Sub-committee met and reviewed the primary activities assigned to them.</p> <p>Discussion during the meeting held 3/14/18 looked at how PDMP data could partner with other state data (e.g. medical examiner office, public health, treatment enrollment, ER – overdose admissions etc.) to produce predictive analytics that could show areas of the State in greater need of prevention, intervention and/or treatment services.</p> <p>This group will also look at the legislative requirements for reporting and based on outcomes defined from the strategic plan develop evaluation measures.</p>
9	Improve Knowledge and Internal Information Management	Adopt the system in rule	<p><u>Administrative rule changes defined</u> Adopt defined reporting system from strategic plan in rule</p>	Sept 2018	Board	•	
9	Improve Knowledge and Internal Information Management	Include in its strategy and plans a component addressing information management	<p><u>Policy and procedure development</u> Standardization of reports to Board, Council and other regulatory boards</p>	Sept 2018	Council	•	
10	Improve External Reporting and Communications	Improve sharing of non-confidential PDMP-related performance and outcome data to provide greater transparency for the Legislature, stakeholders, and the public	<p>Strategic Plan Drafted Establish strategy and plans for external reporting and communications</p>	July 2018	ALL	•	
10	Improve External Reporting and Communications	Develop policy and procedure designed to	<p><u>Policy and procedure development</u></p>	Sept 2018	Council	•	

		ensure compliance with external reporting requirements	External reporting requirements				
11	Clarify and Improve Board Enforcement	<p>Include in its strategy and plans components related to monitoring and enforcing compliance with PDMP requirements</p> <p>Develop standard educational materials for regulatory board members on the PDMP generally, as well as individual boards' monitoring and enforcement responsibilities and authorities;</p> <p>Provide initial and ongoing training and education to regulatory boards</p>	<p>Strategic Plan Drafted</p> <p>Establish strategy components related to monitoring and enforcement compliance with PDMP requirement</p> <p>Development of standard educational materials for regulatory boards</p> <p>-General PDMP information</p> <p>-Boards monitoring and enforcement responsibilities</p> <p>Determine timeline for initial training and schedule for ongoing or as needed trainings</p>	July 2018	ALL	•••	<p>Pending</p> <p>Developing training for boards – need to determine whether to offer a live training for the boards and/or provide materials for personal use.</p> <p>Staff has been working to update information on website and other regulatory board sites as it relates to the NH PDMP. Staff is updating the programs FAQ sheet and has ensured both guidance documents for requesters and submitters are available on the NH PDMP web page.</p> <p>Meeting was scheduled to discuss Regulatory enforcement responsibilities for 3/21/18; however there were meeting conflicts that came up with regulatory board staff, so this meeting is being rescheduled.</p>
			<p><u>Policy and procedure development</u></p> <p>Oversight and enforcement requirements</p>	Sept 2018	Staff	•	Pending
			<p>Pharmacy board commissioner manual content and update</p>			••••	Completed
			<p>Advisory council manual content and update</p>			••	In Process

			Dissemination of investigative information to board investigators			•••	Process in Place
			PDMP as part of inspection process			••••	Completed
			Flowchart of investigative process for Board and Council			••	For Board Review
11	Clarify and Improve Board Enforcement	Seek clarification from its Department of Justice (DOJ) attorney on the classification of Board compliance inspectors and their ability to access PDMP information	Written clarification from DOJ attorney on Board compliance inspectors access to PDMP information	April 2018 May 2018	Board	••	Verbal clarification has been received. Awaiting clarification to be followed up in writing.
13	Improve Integration with Other Responsible Regulatory Boards	Develop, implement, and refine oversight mechanisms to ensure the other regulatory boards follow up on PDMP-generated reports of potential noncompliance; develop, implement, and refine routine reporting mechanisms through which the other Regulatory boards can provide the Council and Board basic data on investigation and disciplinary outcomes based on PDMP-generated reports of potential noncompliance	Strategic Plan Drafted Establish oversight mechanisms to ensure the other regulatory boards follow up on PDMP-generated reports of potential noncompliance Establish routine reporting mechanisms through which the other regulatory boards can provide the Council and Board basic data on investigation and disciplinary outcomes based on PDMP-generated reports of potential noncompliance	July 2018	ALL	••	Meeting was scheduled to discuss Regulatory enforcement responsibilities for 3/21/18; however there were meeting conflicts that came up with regulatory board staff, so this meeting is being rescheduled. This meeting will also discuss the process/mechanisms for the boards to report outcomes back to the PDMP.
13	Improve Integration with Other Responsible Regulatory Boards	Adopt the oversight and reporting mechanisms in administrative rule	<u>Administrative rule changes defined</u> Adopt the oversight and	Sept 2018	Board	•	

			reporting mechanisms in rule				
13	Improve Integration with Other Responsible Regulatory Boards	Establish procedures to ensure effective communication between Council members and represented stakeholders	<u>Policy and procedure development</u> Advisory council reporting functions to boards and stakeholders Pharmacy board enforcement in relation to regulatory boards Pharmacy board enforcement in relation to dispensers Pharmacy board enforcement in relation to prescribers Feedback mechanism from regulatory board on reports	Sept 2018	Council	•• •• •• •• ••	<p>Pending – AC chair currently presents to the board every other month. P&P will define frequency and content.</p> <p>Pending – Pharmacy does not have enforcement over other regulatory boards but will develop a policy to work collaboratively through mutual rules.</p> <p>Pending- Board will establish in rules and develop a P & P</p> <p>Pending – initial conversations have begun; rescheduling of meeting will continue this discussion to inform the P&P.</p>
14	Clarify and Improve Law Enforcement Access to the PDMP	Seek clarification on its investigative and enforcement authority related to crimes stemming from patient misconduct so there is only one interpretation as to which entities are responsible for enforcement of potential patient-related misconduct and pursue necessary legislative changes	Written clarification from DOJ attorney on Board investigative and enforcement authority related to crimes stemming from patient misconduct so there is only one interpretation as to which entities are responsible for enforcement of potential patient-related misconduct and pursue necessary legislative changes if needed.	April 2018 May 2018	Board	••	<p>Discussions held with State Police Narcotics unit on looking at a joint rules review.</p> <p>Awaiting written clarification from Board legal counsel.</p>
14	Clarify and Improve Law Enforcement Access to the PDMP	Develop, implement, and refine routine reporting mechanisms through which law enforcement	<u>Strategic Plan Drafted</u> Establish oversight mechanisms to ensure that law enforcement and	July 2018	ALL	•	

		<p>officials can provide the Council and Board basic data on investigative outcomes based on PDMP information to support comprehensive PDMP performance and outcome measurement reporting;</p> <p>Develop standard educational materials for law enforcement officials on accessing PDMP information, identify which law enforcement officials should receive training, develop a timeline for providing training and educational materials to law enforcement officials, and provide ongoing training and education</p>	<p>medical examiner office provide basic data on investigative outcomes based on PDMP information to support comprehensive PDMP performance and outcome measurement reporting</p> <p>Include training law enforcement as a stakeholder when developing training materials, as well as timeline for when & how trainings will be delivered.</p>				
14	Clarify and Improve Law Enforcement Access to the PDMP	<p>Include in its annual report information on the effectiveness of the law enforcement community's use of PDMP information and its effects on PDMP outcomes</p>	<p><u>Monitoring & Assessing Effectiveness – Annual Report</u></p> <p>Include effectiveness of the law enforcement community and medical examiner's use of PDMP information</p>	Nov 2018/ annually	Staff	•	Annual Report -2017 showed how many times reports were generated for law enforcement and the medical examiner office in SFY 2016 and SFY 2017.
14	Clarify and Improve Law Enforcement Access to the PDMP	<p>Adopt administrative rules implementing the Board's enforcement authority</p>	<p><u>Administrative rule changes defined</u></p> <p>Board's enforcement ability (define as defined by legal council</p>	Sept 2018	Board	•	The Board will pursue clarification from Department of Justice as to enforcement authority related to crimes stemming from patient misconduct. If necessary will pursue legislative change.
			<p><u>Policy and procedure development</u></p> <p>Law enforcement access</p> <p>Law enforcement training</p>	Sept 2018	Council	•	

			Board investigative process for law enforcement				
15	Improve Registration Management	<p>Develop and implement a system to definitively establish the number of authorized prescribers, dispensers, and delegates who are required to register with the PDMP or not, and ensure individuals required to register are, while those not eligible are removed from the PDMP to accurately reflect the true PDMP registrant population;</p> <p>Formalize the process by which designees are approved for PDMP accounts and linked to master account holders</p> <p>Develop and implement a system to ensure registration compliance is enforced by other regulatory boards and compliance data are reported to the Board</p>	<p>Strategic Plan Drafted</p> <p>Develop and implement a system to definitively establish the number of authorized prescribers, dispensers, who are required to register with the PDMP or not, and ensure individuals required to register are, while those not eligible are removed from the PDMP to accurately reflect the true PDMP registrant population</p> <p>Develop and implement a system to ensure changes to the number of authorized prescribers or licensees are reported timely, delegates are registered and de-registered timely, and undelegated use of the PDMP is identified and violations sanctioned</p> <p>Develop and implement a system to ensure registration compliance is enforced by other regulatory boards and compliance data are reported to the Board</p> <p>Formalize the process by which designees are approved for PDMP accounts and linked to master account holders</p>	July 2018	ALL	••	<p>Staff with the assistance of DoIT has worked with vendor to set up an automated registration process.</p> <p>When finalized DoIT will send daily licensing files to the vendor who will check based on approved criteria any licensee that registers with the NH PDMP. If they meet all the criteria; they will be automatically registered with the NH PDMP. If they do not meet all the required criteria they will be sent to NH State Administration to review the registration and determine approval to the NH PDMP or not.</p> <p>It is hopeful that DoITs work with the regulatory boards efforts with MLO (online licensing) will begin to streamline those licensees who are practicing and dispensing in NH and have a DEA # associated with those licenses thus requiring them to register with the NH PDMP.</p> <p>The MLO licensing process does indirectly affect the PDMP in that the regulatory boards have to set up the appropriate fields to collect information like DEA # and State affiliation to determine the “denominator” of many actual licensees is required to register with the NH PDMP.</p>

15	Improve Registration Management	Amend or promulgate administrative rules as necessary	<u>Administrative rule changes defined</u> Amend or promulgate administrative rules as necessary	Sept 2018	Board	•	
			<u>Policy and procedure development</u> DEA # registration process for regulatory boards Enforcement of DEA notifications to PDMP Waiver management Delegate management Delegate approval process	Sept 2018	Board	•• •• ••	Meeting with DoIT, OPLC and PDMP have been held to discuss next steps. Not all boards are doing renewals on MLO – this need to get prioritize by OPLC. Uniformed rule language around collection of DEA # and PDMP registration needs to be defined and then enacted. Both need to happen to create a unified policy/process that all boards follow to determined who of their licensees must register with the NH PDMP. Discussed Delegate management and approval process with vendor and they have provided a process that will need to go before the Council and Board for Approval and then formalize the process into a policy.
16	Improve Management of PDMP Utilization	Collaborate with the Council to define utilization outputs and outcomes, establish long-term goals and objectives, and near-term targets for the PDMP to help achieve its statutory purpose	Through its membership on the Council it will collaborate in the development of the definitions, criteria, and thresholds outcomes to monitor and then as a full Board review and approve.	April 2018 May 2018	Board	••	The sub-committee has reported to the Advisory Council in March. The Board of Pharmacy representative was present at the meeting. Due to meeting challenges caused by poor weather these items did not make it to the April Board meeting. Expected to be presented at the May Board meeting. <u>JUNE</u> : Two of the sub-committees met to develop

							<p>definitions, criteria and thresholds on 5/1/2018 and the Data and Evaluation sub-committee met and reviewed the information and came up with recommendations for measuring them. This information was presented to the Board of Pharmacy on 5/16/18 and the entire Advisory Council on 5/21/18. The Advisory Council motioned and approved to recommend the 3 definitions that make up the clinical alert package to the Board at their 6/20/18 meeting and these will also be integrated into the Strategic Planning session (June 27-28, 2018).</p>
16	<p>Improve Management of PDMP Utilization</p>	<p>Limit the definition of “query” to actual queries of patient histories and disaggregate instances of PDMP use not applicable to the final definition to help ensure accurate data are analyzed and reported;</p> <p>Devise and implement a system to obtain utilization data from regulatory boards, ensure regular surveys are administered to all PDMP registrants, and implement supplemental evaluation activities to corroborate PDMP data and accurately analyze and assess utilization;</p>	<p>Strategic Plan Drafted Review and define “query” to actual query of patients histories</p> <p>Identify a means to obtain utilization data, regular surveys of registrants and other supplemental activities to accurately analyze and assess utilization of PDMP</p> <p>Review dispenser extension rules to ensure accuracy of statute and identify a system to track compliance</p> <p>Identify a means to seek out prescribers who also identify as dispensers and are included in submission data</p>	July 2018	ALL	•	<p>The PDMP can provide information to regulatory boards with a monthly tally and YTD tally of how many patient queries a practitioner has completed. This is a very basic analysis given the current capacities of the system and staffing.</p> <p>It is a broader tally that will not include their delegate queries on their behalf. This tally would also not include whether the query was associated with the writing of an opioid for the management or treatment of pain. To do either of the aforementioned analysis would take increased analytical capacity to dive that deep into the system. The capacity needs would have to be evaluated to determine if the</p>

		Ensure prescribers who also identify as dispensers are included in submission data to accurately assess dispenser utilization	to accurately assess dispenser utilization (e.g. dispense from offices; veterinarians who run clinics/hospitals)				vendor could support this type of analysis or if it would require external software and staffing capacity to complete.
		Address dispenser extension rules to ensure they accurately reflect statute and begin tracking compliance as a form of measurement and adopt or revise other rules as required	<u>Administrative rule changes defined</u> Dispenser extension rules, if needed	Sept 2018	Board	•	
			<u>Policy and procedure development</u> Queries for boards, compliance, patients Utilization data- dissemination to boards Utilization enforcement- Prescribers Zero reporting Utilization enforcement- dispensers	Sept 2018	Board	•	
17	Improve Management of Data Quality and Timeliness	Determine what degree of quality PDMP data must achieve; Assess PDMP data quality and timeliness on an ongoing basis and enforce relevant requirements intended to achieve data quality and timeliness standards ensure disclosure of PDMP data are	<u>Strategic Plan Drafted</u> Data Quality and Timeliness Determine degree of quality PDMP data must achieve Determine mechanisms to check for quality and timeliness of data Determine how disclosure of PDMP data are appropriately qualified of limitations to all users	July 2018	ALL	••	The Data & Evaluation Subcommittee reviewed the activities involved with this finding at their 3/14/18 meeting.

		<p>appropriately qualified to convey limitations to all users, and until quality and timeliness are reasonably assured, PDMP data should likely be viewed to contain only <i>indicators</i> of potential issues or matters of concern, and not be viewed as definitive without corroborating, reliable, third-party evidence</p> <p>Assess structural limitations creating gaps in PDMP data and seek necessary legislative changes to create a sufficiently complete database to include dispensing activities that would reasonably improve the usefulness of the PDMP</p>	<p>Assess structural limitations creating gaps in PDMP data and seek necessary legislative changes, if necessary</p> <p>Assessment of database quality and proposed changes</p>				
17	Improve Management of Data Quality and Timeliness	<p>Develop, implement, and refine rules, policies, and procedures designed to achieve quality and timeliness standards including the contemplated quality control system, and broaden it to include other quality and timeliness requirements</p>	<p><u>Administrative rule changes defined</u> develop, implement, and refine rules designed to achieve quality and timeliness standards that include a quality control system:</p> <ul style="list-style-type: none"> -Error thresholds and management -Dispenser management -Develop rules for monitoring hospital ER dispensing -Violations and penalties for 	Sept 2018	Board	•	

			data quality				
			<u>Policy and procedure development</u> develop, implement, and refine policies, and procedures designed to achieve quality and timeliness standards that include a quality control system: - dispenser verification - monitoring of 48 hour dispensing - error thresholds - violations and penalties - information resubmission - data errors and duplications	Sept 2018	Council	•	
18	Improve Management of Security and Confidentiality	Develop, implement, and refine a system to routinely assess the adequacy of third-party controls over State data; Develop, implement, and refine a system to identify and monitor breaches of confidentiality by authorized and unauthorized users of the system, and track their resolution; Develop, implement, and refine a system to ensure ineligible users of the system are removed	<u>Strategic Plan Drafted</u> Data Security and Confidentiality Develop, implement, and refine a system to routinely assess the adequacy of third-party controls over State data Develop, implement, and refine a system to identify and monitor breaches of confidentiality by authorized and unauthorized users of the system, and track their resolution	July 2018	ALL	•	

		timely; Include in its strategy and plans components related to monitoring and assessing PDMP security and confidentiality	Develop, implement, and refine a system to ensure ineligible users of the system are removed timely develop in strategy components related to monitoring and assessing PDMP security and confidentiality				
18	Improve Management of Security and Confidentiality	Develop and adopt policies and procedures regarding the development of metadata and the de-identification, release, maintenance, and purging of PDMP data and information Ensure vendors are required to regularly provide public attestations on the adequacy of their confidentiality and security controls	<u>Policy and procedure development</u> develop and adopt policies and procedures regarding the development of metadata and the de-identification, release, maintenance, and purging of PDMP data and information -data management -release of data - purging of data -de-identified data Ensure vendors are required to regularly provide public attestations on the adequacy of their confidentiality and security controls -security breaches -de-identification of practitioners -de-identification of delegates -vendor confidentiality -vendor security controls	Sept 2018	Council	•	

STATE OF NEW HAMPSHIRE

Board of Pharmacy
Board of Pharmacy (PDMP)
 AUDIT FINDING Corrective Action Plan

APRIL 2018 Status Report
Time Period: 02/23/18 – 03/29/18

	Update Status – In Process
	Update Status – Current Month Update
	Update Status – Completed

Completion Status: Open •

Partial ••
 Substantial •••
 Full ••••

12	Improve Inspection Practices	Assess the inspection capabilities of the latest online licensing software before implementation to determine the course of action best meeting the needs of the inspection process and properly maintain whichever software the Board deems necessary; Collaborate with other regulatory boards receiving inspection services to establish a process to effectively and efficiently identify all practitioners subject to Board inspection authority Fully incorporate naturopaths into inspection policies and procedures, pursue agreement with the	Scheduling of inspections-MLO software	July 2018	Board Staff	•••	Staff has reverted back to old Access database as MLO software cannot meet requirements of risk based schedule.
			Integrate Naturopath into inspection practices	Jan 2020		••	Naturopath inspection development meeting held January 29, 2018 and March 19, 2018.
			Real time inspection information development	July 2020		••	This work will require additional staff and proper software system development
			Establish system to capture and report inspection activities	July 2020		••	Real time system will require software development. Current system updated.
			Inspection management	July 2020		•	Lean process ongoing for development of software for inspection processes
		Lean process software development with DoIT	July 2020	•••		Final meeting scheduled for May Lean process finished, next step discussion with DOIT	

		Naturopathic Board of Examiners establishing inspection protocols, determine if additional Legislative changes are needed to complete incorporation of naturopaths into inspection practices, and seek necessary Legislative changes	Develop practitioner specific inspection process	Jan 2019 July 2018		...	Ongoing development with Naturopath board Discussion with compliance will begin on practitioner specific inspection design inspection forms and policy updated for current inspection process Draft inspection form complete and will be presented to Board at June meeting. Inspections to begin July 2018
12	Improve Inspection Practices	Determine if additional Legislative changes are needed to complete incorporation of PDMP compliance into inspection practices, and seek necessary Legislative changes	<u>Define statute changes to legislature</u> Incorporation of PDMP compliance into inspection compliance practices, if necessary.	Sept 2018	Board	...	Legislative changes not defined. Inspection practices will be added to rules then reviewed by the Board Inspection and violation rules under final review by Board To be presented June 2018 meeting as PH 2100
12	Improve Inspection Practices	Fully incorporate PDMP compliance into inspection policies, procedures, and violation notices, and revise administrative rules as necessary	<u>Previous audit request- Policy and Procedure development</u> PDMP incorporated into normal inspection practices- PDMP violation notices- PDMP inspection processes -PDMP Report Cards Compliance inspection process-other boards	Sept 2017 Feb 2018 Feb 2018 Feb 2018 Feb 2018	Board	P & P final review Complete – on new inspection forms Violation rules to be presented June 2018 as PH 2200 Report cards mapped out – awaiting strategic planning for implementation Process of developing specific inspections in discussion PDMP incorporated into current inspection processes

			Compliance investigation process- other boards	July 2018		•••	Process in place for PDMP investigations. P&P in development
			Compliance investigation process-PDMP	July 2018		•••	May require statue change as previous statute change mandated pharmacy cover costs
			Policy on inspection costs and reimbursement-require legislation	July 2018		•••	Ready for boards approval
			Naturopaths inspection processes	January 2020		•••	Pending boards approval of process
			Naturopaths inspection policy and procedures	January 2020		•	
12	Improve Inspection Practices	Track and analyze resources dedicated to inspections and investigations for other boards to determine needed resources and the most equitable model to share PDMP costs	All audit recommendation from 2015 See observation #26 for updated list	Ongoing/ July 2018	Board	••	
			Establish tracking of inspection costs-pharmacy	July 2018		•••	Currently tracking costs associated with inspections for pharmacies. P & P developed
			Establish tracking of inspection costs-practitioners	July 2018		••	Tracking costs associated with inspections for practitioners will follow same process as pharmacy
			Establish tracking of investigation costs-PDMP	July 2018		•	
12	Improve Inspection Practices	Track and analyze resources dedicated to inspections and investigations for other boards to determine	<u>Policy and procedure development</u> Establish procedures to identify practitioners	July 2018	Board	•	

		needed resources and the most equitable model to share PDMP costs	Will require licensing changes of other boards Investigate development of DEA state registry-will require new legislation.	July 2018 July 2018			Will require additional staff for a State DEA registry
19	Clarify and Formalize Organizational Structure	Develop, implement, and refine policy and procedure to ensure the Council fulfills its statutory and regulatory obligations; Develop, implement, and refine policy and procedure to ensure ongoing surveillance of administrative rule validity, related requirements, and statutory changes to avoid future noncompliance; Timely remediate audit findings	Administrative Rules concerning organization and structure for board, board staff and advisory council Administrative rules and chart Lines of reporting between board and advisory council-appendix chart Administrative rules on Organization of Board and related components-appendix chart	Sept 2018	Board	•	

		Clarify the terms and conditions of its relationship, and the relationship of the Council, to the OPLC via formal agreement	<u>Policy and procedure development</u> Duties of board staff Reporting structure of board staff and related components Methods of operation Formal and informal procedures Role of advisory council and reporting structure	Sept 2018	Board	•	
20	Improve Compliance with Right-To-Know	Develop policy and procedure to ensure consistent and ongoing Board and Council	Address observation in administrative rules	July 2018	Board	• ...	Statute change required. For Board review June 2019

		<p>compliance with the Right-to-Know law;</p> <p>Ensure all members receive relevant information on their duties and responsibilities as public servants;</p> <p>Develop orientation materials for new members of both bodies, and include the <i>Memorandum, Financial Disclosure</i> statute, the Right-to-Know law, and other relevant administrative laws;</p> <p>Ensure at least key officers of both bodies regularly attend the DOJ administrative law pol</p> <p>Periodically review both bodies' compliance with law and policy Secure administrative, clerical, and business processing assistance from the OPLC as needed</p>	<p><u>Policy and procedure development</u></p> <p>Policy and procedure-orientation and manual-board</p> <p>Policy and procedure board minutes</p> <p>Policy and procedure advisory council minutes</p> <p>Policy and procedure right to know compliance-board</p> <p>Policy and procedure right to know compliance-advisory council</p> <p>Policy and procedure-orientation and manual-council member</p>	<p>Oct 2017</p> <p>May 2018</p> <p>May 2018</p> <p>May 2018</p> <p>May 2018</p>	Board	<p>••••</p> <p>•</p> <p>•</p> <p>•</p> <p>•</p> <p>•</p>	<p>COMPLETED Board manual complete FINISHED</p>
21	Ensure the Board Meets with a Quorum	<p>Comply with State law and only hold regular meetings with a quorum of eligible members physically present;</p> <p>Develop, implement, and refine policy and procedure to ensure Board meetings comply with State law and Board</p>	<p>Address observation in administrative rules</p> <p><u>Policy and procedure development</u> Policy and procedure meeting quorum-Board</p> <p>Policy and procedure board member eligibility.</p>	<p>July 2018</p> <p>May 2018</p>	Board	<p>•</p> <p>•</p>	

		members are eligible to serve; Review past Board meeting minutes for quorum issues and seek legal counsel to determine how to ratify prior Board actions taken in meetings without a quorum					
22	Ensure the Council with a Quorum	Develop, implement, and refine policies and procedures to ensure the Council complies with State law, and Council members are both eligible to serve and the Council only holds meetings with a quorum of eligible members physically present; Review past Council meeting minutes for quorum issues and seek legal counsel to determine how to ratify prior Council actions taken in meetings without a quorum	<u>Address observation in administrative rules</u> Council composition Council term limits	July 2018	Board	•	
			<u>Policy and procedure development</u> Policy and procedure Meeting quorum-advisory council	May 2018	Board	•	
			Policy and procedure council member eligibility- council	May 2018	Board	•	
23	Improve Compliance with the <i>Financial Disclosure Statute</i>	Board and Council members comply with the requirements of the <i>Financial Disclosure Statute</i> and timely complete annual statements; Board develop, implement, and refine policy and procedure to	Address observation in administrative rules	July 2018	Board	• ...	Statute change required for board review June 2018
			<u>Policy and procedure development</u> Policy and procedure- financial disclosure statements-board Policy and procedure- financial disclosure statements-council	May 2018	Board	•	This is now tracked by OPLC

		<p>ensure ongoing Board and Council member compliance, and periodically review Board and Council members' compliance;</p> <p>Board's president annually submit to the Secretary of State an organizational chart of all Board and Council members required to file statements</p>					
24	Improve Rulemaking	<p>Ensure rules reflect underpinning statutes and encompass all professions subject to PDMP requirements;</p>	<p><u>Address observation in administrative rules</u> Board review and update of administrative rules -all rules current</p>	Dec 2017	Board	••••	COMPLETED
		<p>Define relevant terms in rule;</p>	<p>Rule writing- PDMP maintenance of program</p>	July 2018		•	
		<p>Ensure all forms are properly adopted and cited in rule, accurately reflect rule-based requirements, and contain version or edition controls</p>	<p>Review of all forms for content and clarity for inclusion in rule-compliance/licensing</p>	July 2018		••••	Forms updated to current rules
		<p>Ensure any requirements intended to be binding upon anyone other than the Board are adopted in rule;</p> <p>Dispense with Zero Report requirements;</p> <p>Ensure form and rule deficiencies identified in prior audits are timely</p>	<p>Review of all forms for content and clarity for inclusion in rule-PDMP</p>	July 2018		••••	All forms address PDMP requirements
		<p>Ensure any requirements intended to be binding upon anyone other than the Board are adopted in rule;</p> <p>Dispense with Zero Report requirements;</p> <p>Ensure form and rule deficiencies identified in prior audits are timely</p>	<p><u>Policy and procedure development</u> Policy and procedure-form content and clarity procedure for updating</p> <p>Forms review and update in policy and procedure manual</p>	Sept 2018	Board	••	
						****	All forms updated to current rules and policies written for

		remedied; and Obtain necessary assistance from the OPLC to attain and maintain compliance with State law.	Policy and procedure for rules review				each inspection type
25	Improve Records Management	Includes Board and Council records, controls public and nonpublic records, and encompasses the complete record lifecycle; Develop and implement policy and procedure to ensure Board and Council records containing adequate and proper documentation of Board and Council policies, decisions, procedures, and transactions are created and maintained; Promulgate rules to implement elements of the program affecting individuals outside the Board; Ensure Board and Council records are available timely at the Board's office; Seek to collect historical Council records; Seek and obtain from the OPLC necessary assistance	Will be included in strategic plan draft (see observation #5)		Board	•	
			<u>Policy and procedure development</u> Policy and procedure on records maintenance Policy and procedure on records documentation Policy and procedure on records availability Policy and procedure on public vs non-public records Policy and procedure on records availability through right to know laws	Dec 2019	Board	•	

		<p>in developing and operating the records management system;</p> <p>Include a component addressing records management in its strategy and plan</p>						
26	<p>Prioritize and Timely Resolve Prior Audit Findings</p>	<p>Timely resolved and incorporate processes into its strategy and plans to ensure continuous monitoring and evaluation of the adequacy of its management controls;</p> <p>Review both new and prior observations in order to prioritize their importance, estimate the level of work required for the Board and the OPLC to adequately address them, and develop realistic plans and a schedule to make needed changes while considering the amount of routine work the Board and its staff faces;</p> <p>Formally and holistically integrate risk management into its strategy, plans, operations, policies, procedures, and other activities to help ensure risk is mitigated and objectives are met.</p>	<p><u>Policy and procedure development</u></p> <p>Updated June 2017, new policies identified and developed ongoing</p>					
			<p><u>2008 and 2015 Audits</u></p>					
			<p>Hold permit holders and inspected practitioners accountable to the rules</p>	June 2017	Board	••••	<p>This is ongoing for all practitioners as well as PDMP issues regardless of practice setting</p> <p>COMPLETED - Currently in place and utilized as part of MLO software</p> <p>COMPLETED</p> <p>Compliance updated and ON-GOING</p> <p>Risk based inspections in process. Requires more inspection time for updated process. Will require additional staffing Requires software upgrade in development</p> <p>Inspection forms updated and in use</p> <p>Inspection rules to rules writer for OPLC and ready for board review</p>	
			<p>Establish a process to track individual violations</p>	Oct 2017	Board	••••		
			<p>Review Board administrative rules</p>	Dec 2017	Board	••••		
			<p>Update compliance manual</p>	Dec 2017	Board	••••		
			<p>Consider risk base inspection schedule</p>	Jan 2018 (limited) Feb 2018	Board	••••		
<p>Ensure inspection forms reflect statutory and administrative rule requirements</p>	Feb 2018	Board	••••					
<p>Adopt rules for inspecting licenses</p>	April 2018	Board	•••					

			Violation form in administrative rule	June 2018	Board	•••	Violation notices and new rules updated and ready for board review
			File biennial report	July 2018	Board	•	Now an OPLC requirement
			Establish policy and procedure promoting out of state licensing	July 2019	Board	•	This will require legislative change. Previous attempts have been refused during legislative review
			Ensure out of state licensure inspected similarly to in state licenses	July 2019	Board	••	Reviewing NABP blueprint inspections for standardized process.
			Establish a system to capture and report inspection activity	July 2020	Board	••••	Requires software upgrade in development Lean process finished, move to next step of DOIT form development in MLO. Developed tracking system for pharmacist and pharmacies inspection activities
			Establish a policies and procedures for non-domestic pharmacy inspections	May 1, 2018(new process)	Board	•	COST PROHIBITIVE – NABP blueprint discussion.
			Establish performance goals and measurements Improve reliability of inspection data	July 2020	Board	•	Requires software upgrade in development