



WA PMP – House Bill 1427

9/20/17 – PMP Public Input Break-Out Group

PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND
HEALTHIER COMMUNITY



Prescription Review
Prescribe health Dispense safely

Introductions

- DOH Staff
- Stakeholders

Agenda

Prescription Monitoring Public Input	
11:45	Lunch (local area options for stakeholders)
1:00	Ground Rules for Providing Public Input
1:15	Identification of Issues
1:40	Prioritization of Issues
2:20	STRETCH BREAK
2:30	Explanation of Issues Matrix Topic for Consideration <ul style="list-style-type: none">• What issues are there?• How can we address these issues?• What concerns or possible impacts are there?• How might we mitigate these concerns?• What further information is needed?• What does this group recommend?
3:00	Rejoin main group
3:30	Adjourn

Guidelines for Participants

- Be punctual so we can start and finish on time
- This is a public meeting so anything shared has the potential to be part of public record
- Everyone will be given opportunity to provide input and feedback
- Different opinions are encouraged and needed to support robust decision-making
- Respectful of all parties
- No one will remain silent and later say they don't agree with the decision
- Final decisions for deliverables and rules will be made by the department

Methods for Collecting Input

- Our 7 meetings
- Use of the online comment form at:
 - www.doh.wa.gov/opioidprescribing
- Emails to:
 - opioidprescribing@doh.wa.gov or
 - prescriptionmonitoring@doh.wa.gov

Identification of Issues

- Assessing PMP data linked to morbidity and mortality data at DOH
- Data Access for Local Health Officer
- Data Access for Federal and Tribal Facilities and Provider Groups
- Data Access for EDIE
- Overdose notification from EDIE
- Data Access for Facilities, Entities, & Provider Groups
- Individual Prescriber Feedback Reports
- Data Access for WSHA CQIP
- Overdose Notification Letter
- Prescriber Report Metrics
- Others?

Assessing Overdose...

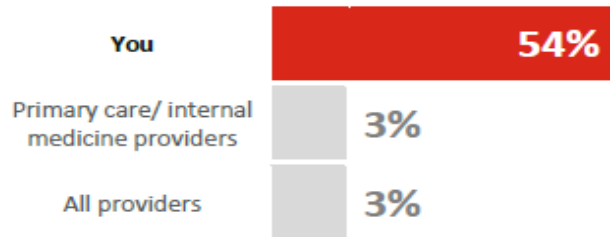
- Have linked PMP data to death data
 - Look at patterns most associated with deaths
- ED or Inpatient Hospital Data?
- Trauma Registry?
- Emergency Medical Services?
- Other?

Prescriber Feedback Reports

- DOH to send out vs. self service in PMP
- How many metrics?
- Resources?
- Frequency?
- Other?

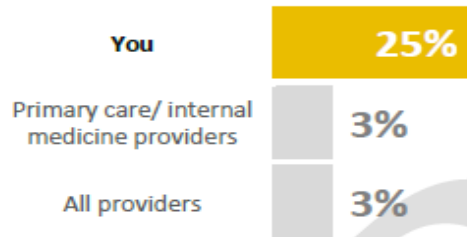
LNI Report Cards

Percentage of Claims Prescribed High-dose Opioids



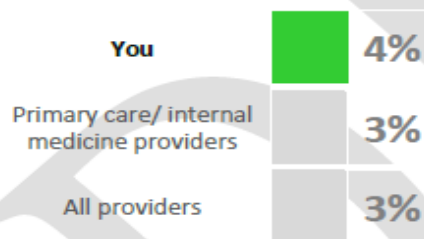
- Taper back down or discontinue if an opioid dose increase does not result in clinically meaningful improvement in function (CMIF).
- Avoid exceeding 90 mg/day MED, and for patients with one or more risk factors (e.g. tobacco users, mental health disorders), do not exceed 50 mg/day MED.

Percentage of Claims Prescribed Concurrent Opioids and Sedatives



- Avoid combining opioids with benzodiazepines, sedative-hypnotics, or carisoprodol.
- Taper off/discontinue above agents and consider non-scheduled alternatives if needed.

Percentage of Claims Prescribed Chronic Opioids



- Do not prescribe chronic opioids for non-specific pain.
- Track function and pain at each prescribing visit.
- Use validated assessment tools and best practices to monitor for adverse outcomes and compliance on treatment regimen (PMP, UDT).

Local Health Officer Access

- Master Accounts
- Delegate Accounts – public health nurses
- Other?

Federal & Tribal Access

- Via the health information exchange
- Security
- Other?

Overdose Notification

- Access via HIE
- Data security
- Data retention
- Other?

Facility/Group Prescribing Reports

- Mechanisms for providing list of providers to DOH?
- Authorized representative to receive reports?
- Do the reports mimic the individual prescriber feedback reports?
- Other?

Hospital Association Access

- Access via CQIP
- Data sharing agreement
 - Security of data
 - Data elements
 - Linking of data
 - Re-disclosure of data
- Other?

Prioritization of Issues

Wrap Up, Next Steps

- What happens next?
- Where can we find a summary of comments received?
- Next meeting details
- Thank you

PROGRAM CONTACTS

- **Program Staff:**

- Chris Baumgartner, Program Director
- Gary Garrety, Operations Manager
- Mariana Rosenthal, Supervising Epidemiologist
- Neal Traven, Epidemiologist
- Matt Reid, Program Coordinator
- Mary Roberts, Program Coordinator

- **Contact Info:**

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- Website: <http://www.doh.wa.gov/pmp>