

SUBJECT: Mississippi Prescription Monitoring Program (MPMP)
Advisory Committee Meeting

DATE: September 22, 2015

LOCATION: MS Board of Pharmacy, 6360 I-55 North, Suite 400, Jackson, MS, 39211

MPMP Membership

Maximum Membership: The membership of the PMP Advisory Committee shall be limited to twenty (20) Active Members representing users of the program.

Active Membership: The Active Membership consists of a representative from the following entities:

PRESENT

1. Chair	Mississippi State Department of Health- Executive Director or his/her designee	Meg Pearson, Pharm D
2. Vice Chair	Mississippi Board of Nursing-Executive Director or member of the board	Dr. Lynn Langley, Executive Director
3. Recording Secretary	Mississippi Division of Medicaid- Executive Director or his/her designee	Terri Kirby, BS Pharm
4.	Mississippi Board of Pharmacy –Executive Director or member of board	Frank Gammill
5.	Mississippi Bureau of Narcotics, Executive Director or designee	
6.	Mississippi State Medical Association- a member who is registered to use the MPMP	Dr. Tom Joiner
7.	Mississippi State Board of Medical Licensure- Executive Director or member of board	
8.	The Special Agent in Charge for the Mississippi Field Office of the United States Drug Enforcement Administration or his/her designee	
9.	The Attorney General of the state of Mississippi or her/his designee	Blake Bee
10.	Mississippi Independent Pharmacists Association- a member who is a registered user of the MPMP	
11.	Mississippi Pharmacy Association-a member who is a registered user of the MPMP	James Beau Cox
12.	Mississippi Nurses Association- a member who is a registered user of the MPMP	
13.	Mississippi Academy of Physician Assistants – a member	
14.	Mississippi State Board of Dental Examiners- Executive Director or a member of the board	Karen Wilson, Deputy Director
15.	Mississippi Dental Association-a member who is a registered user of the MPMP	

Guests:

Dr. Ben Banahan (University of MS-Center for Pharmaceutical Marketing and Management –CPMM-, MS Medicaid Evidence-Based Drug Utilization Review Initiative (MS-DUR), Shannon Hardwick (Clinical Director-MS-DUR), Tony Mastro (Media Liaison-Department of Mental Health), Thia Walker (Epidemiologist-DMH), Charlene Barnett (Project Director-DMH), Jennifer Price (MSBDE), Dana Crenshaw (MSBOP-PMP Director), Signe Shackelford (Senior Policy Analyst-Center for MS Health Policy), Steve Parker (BOP), Griffin Collum (Pharmacy Student-UM), David Roberts (MSMA)

Opening Remarks:

The meeting was called to order at 10:09 a.m. by Dr. Meg Pearson, Chairperson. Voting to accept the minutes from the previous meeting in April did not occur. Dr. Pearson stated that 10 members are needed for a quorum.

PMP Reports**Objective-To provide PMP usage trend reports for PMP Advisory Committee review and comment; timeframe October 2012 – August 2015**

Dana Crenshaw presented PMP statistics and reported that PMP usage has increased. In addition, all pharmacists have to register by the end of the year. PMP use by nurse practitioners has increased dramatically.

Use by registration category- through August 2015

MDs- 5,859

Pharmacists- 2,314

Nurse Practitioners- 1,961 (total # NPs is 2,900)

Dr. Joiner stated that there are 7,000 to 8,000 licensed doctors. Mr. Gammill stated that doctors with no DEA number are not required to register with the PMP.

Number of patient inquiries by practitioners, by dispenser, by state agency, by BOP

MDs-289,000

Pharmacists- 141,000

NPs - 176,000

Delegates- 67,000 (total # Delegates is 434)

Ms. Crenshaw noted that the V.A. doesn't report. They are supposed to sign up to report by the end of the year.

Dosage units, top 10 drugs

Top Drug By Ingredient

Start Date: 1/1/15 12:00 AM
End Date: 9/17/15 12:00 AM

Rows to Return: 10

Rank	Primary Ingredient	Rx Count	Total Quantity	Each Quantity	Gram Quantity	mL Quantity	Unspecified Quantity	Days' Supply
1	hydrocodone	1,368,639	80,900,165.03	23,059,109.00	39,124.00	3,601,188.00	54,200,714.03	21,555,671
2	alprazolam	407,538	23,942,742.10	7,426,215.00	0.00	90.00	16,516,347.10	11,257,045
3	tramadol	396,094	26,338,036.56	8,066,075.06	297.00	132.00	18,271,442.50	7,717,015
4	oxycodone	372,645	24,676,028.00	7,629,946.00	0.00	15,427.00	17,030,655.00	7,101,445
5	amphetamine	366,746	15,903,823.63	6,033,849.00	0.00	70,995.00	9,798,949.63	11,029,432
6	zolpidem	310,936	9,781,805.10	2,988,400.00	0.00	0.00	6,793,375.10	9,769,264
7	clonazepam	252,808	14,066,140.00	4,300,626.00	0.00	49.00	9,765,285.00	7,572,948
8	codeine	213,338	23,384,399.22	2,600,453.00	940.00	5,871,729.00	14,911,277.22	1,835,252
9	buprenorphine	155,343	2,969,947.00	838,070.00	12.00	0.00	2,131,865.00	1,707,013
10	methylphenidate	143,978	6,709,068.00	2,075,489.00	390.00	425,035.00	4,208,154.00	4,347,059

The use of hydrocodone is trending down. The MBOP has required pharmacies to report at the highest Automated Society of Automations and Pharmacy (ASAP) level of 3.0. Appriss uses 4.2 (has more fields) and BOP will require pharmacies to use 4.2 by the end of the year.

Update on Projects

Media campaign materials and other Department of Mental Health (DMH) activities

Tony Mastro reported that the DMH has distributed media materials to 11 counties under the MS Prevention Partnership. However, much of their focus has been on The Oxford House, a house in northeast Jackson run by people in recovery.

Mr. Mastro stated that Dr. Geri Avery has left the DMH and he is leaving at the end of the month as the grant has run out. The MS Partnership Project ends 9/30/16, but PMP materials are still being disseminated.

A new grant of 1.6 million/year starts October 2015 and is in the planning stages now with the focus being on under- age drinking and prescription drug abuse in ages 12-25 with an emphasis on college-aged young adults.

Pharmacy/pharmacists training by Mississippi Bureau of Narcotics (MBN) and Board of Pharmacy (BOP)

Steve Parker reported that four training seminars were completed with the MBN and the BOP in Biloxi, Hattiesburg, Ridgeland and Oxford. These seminars were directed toward pharmacists and their staff and included prescription drug abuse, burglaries and robberies with the approach being prevention. In addition, Mr. Parker stated that it's not just professionals who need training, it's the public.

Frank Gammill stated that they've been primarily offering to educate physicians and nurses. Dr. Joiner mentioned that the MS State Medical Association has several forums which are great places for speakers.

Dr. Langley stated that the BOP's class presented to advanced practice R.N.s was well received.

Dr. Joiner shared a few key burglary and robbery education points; (1) give the robbers what they want (2) use gun safes to lock up drugs at night (3) require a list of all employees from roofing and electrical crews who do work for the pharmacy (4) contact the MBN immediately-before evidence is disturbed.

Southern Remedy radio program

Dr. Pearson stated that she and Ms. Kirby were guests on MS Public Broadcasting's Southern Remedy radio show on June 29th. General medication safety and the PMP were topics of discussion with many callers participating in the question and answer slot of the program.

Review of PMP Advisory Committee Policies and Procedures

Dr. Pearson stated that the policies and procedures of the PMP Advisory Committee were developed in 2012 and may need to be revised. Dr. Joiner stated the importance of consistent meeting attendance by the committee members. Dr. Pearson stated that if the members' designees are sent to the PMP meetings they should notify the committee.

Steve Parker offered to send formal letters to agency designees.

Dr. Langley recommended that a member of the MS Nurse Practitioner's Association be included in committee membership.

Dr. Pearson stated that election of officers occurs during the spring meetings on even years.

Mr. Mastro recommended adding the Bureau of Alcohol and Drug Services within the DMH as an associate member (Section 3.3, pg. 2).

Ms. Crenshaw recommended adding the Dental Board (Section 4.2).

Mr. Bee stated that committee policy can't be done without a quorum so attendance crucial in order to conduct business.

Other Business

Dr. Pearson stated that Dr. Langley and Ms. Crenshaw attended a national meeting last week. The meeting emphasized Medically Assisted Treatment or MAT, and she shared that their takeaway was that this is where the Health and Human Services money goes. However, Harold Rogers spoke as well and made it clear that 'MAT is not the only way'. He also stated that every state should have mandatory PMP use.

Dr. Langley stated the number one objective should be education of prescribers.

Terri Kirby stated that Appriss is charging Medicaid to obtain the PMP data of Medicaid beneficiaries. The cost is being added to Medicaid's DUR vendor's contract. Medicaid is in the process of finalizing a memorandum of understanding (MOU) between itself and the BOP. This MOU grants authority for Appriss to share MS

Medicaid beneficiary data directly with MS-DUR. Appriss is charging a \$5,000.00 start-up fee and subsequent monthly payments of \$400.00 to obtain this data.

Mr. Gammill stated the BOPY applied for the Harold Rogers Grant and awaiting October or November decision.

Dana stated that MS is sharing data with 10 states now, and all Border States except for Alabama.

Setting of next PMP Advisory Committee Meeting

The next PMP Advisory Committee Meeting is scheduled for April 27, 2016, from 10 a.m. to 12 p.m. at the Board of Pharmacy.

The meeting was adjourned at 11:42 a.m.