New Hampshire Opioid Prescribing Advisory Council (OPAC) Monthly Meeting Minutes

Meeting Date:

June 8, 2020, 9-11 AM

Action Items:

Description	Owner	Status	Target Due Date	Status/ Resolution
Quorum	Dave Mara	Open	06/08/20	
OPAC Membership- New members	Dave Mara	Open	06/08/20	

Key Decisions:

Decision to be made	Assigned to	Due date	Final Decision	Date of Decision	Who finally made the decision
Approval of January meeting minutes	Council	06/08/20	Minutes Approved	06/08/20	Council: 9:17 AM Motion to accept minutes (Michael Auerbach), second by (Kathy Bizarro-Thunberg). Motion passed by acclamation.

Agenda:

- Welcome and call to order
- Vote to approve minutes from January 2020 meeting
- Review of action items
- Updates: Pending Legislation
- Updates: Transition Progress
- · Closing remarks and adjourn

Call to Order

Dave Mara called the meeting to order at 9:07 AM and did a roll call.

Review of action items

At 9:11 AM, Mara moved the meeting to a discussion of quorum as the MITRE and CMS contracts are coming to an end. He asked the new members to introduce themselves and noted that they were appointed by the Governor. Dr. Molly Rossignol introduced herself saying she works as a Family Physician and works in Addiction Medicine. Rossignol is representing the New Hampshire Healthy Families. Dr. Dave Nagel introduced himself as a Physical Medicine Specialist and Pain Management Specialist and advocates for people with chronic pain.

Administrative Details and Logistics

Mara asked committee members to review the January meeting minutes. He then asked if there were any changes or additions. Hearing none, at 9:17 AM he asked for a motion to approve the minutes; Michael Auerbach moved and Kathy Bizarro-Thunberg seconded; Ben Jean abstained and Dave Mara ran through a roll call for 91-A purposes. The motion passed unanimously and the minutes were approved.

Topic Updates: Pending Legislation

Mara moved the meeting to a discussion of pending legislation relevant to the OPAC's mission. He noted that the Drug Overdose Fatality Review Commission legislation passed through the committee in the Senate and a couple more members were added to the list. Mara explained that due to COVID-19 and the disruption that caused in legislation, the legislature will be combining a lot of bills into one large bill and the fatality bill will be included in that. Mara says this will be unprecedented in New Hampshire and will grant access to records necessary to look at overdoses and then asked for any questions. Nagel said one problem is that there is the possibility of being denied access. Nagel asked if this takes into account the people that die from an overdose that is suicide-related as opposed to accidental overdoses and referenced VA data that indicates 30% of drug overdoses are suicides. Mara responded saying Medical Examiner's data includes intention. Nagel said that he does not want data to be misrepresented publicly if it does not note suicides by overdose. Mara said that the commission will look at overdose deaths and if someone did use painkillers to commit suicide, the commission would be looking at background details to investigate how it happens and why. Dr. David Strang asked if the commission would have access to PDMP data, Mara said yes, and Strang replied that he wanted the bill number to bring before the PDMP board to check there is no conflict with existing laws. Bizarro-Thunburg noted in the chat that this legislation is now included in a larger piece of legislation that has a hearing on Wednesday, June 10, 2020. The legislation is HB1639 and Chris Teixeira noted that the drug legislation piece that was being discussed was on page 29 of the document. Mara asked if there was any other legislation that affects OPAC to discuss. Lucy Hodder added that telehealth bills are also important, but those have more to do with MAT than OPAC.

Topic Updates: Transition Progress

To address where the OPAC goes from here and what to do with the current framework, Mara asked that Chris Teixeira and Andrew Chalsma lead a discussion of the transition from MITRE to DHHS. Teixeira said the OPAC started meeting nearly monthly starting in January of 2019, where the group discussed what MITRE and CMS were working on with the state. They crafted an interactive dashboard for how to define opioid prescriptions and explored what are the advantages and disadvantages of using the All Payers Claims database. MITRE presented their work and summarized this into a report to give to the Council. Mara confirmed with Teixeira it would be possible to give the new members access to the MITRE report. Teixera continued explaining in saying the Holistic Analytic Environment is where data is housed with a user and login. This year they have been trying to transition this to DHHS. Anne Wood added that from a CMS view they wanted to add worked-on data in a bubble and open this analysis to be more tailored to the State of NH. Nagel asked what the data will be used for or public is it at this point. He noted that he recognizes the importance, but sees danger in this and asked if there is there filter for pain management and MAT prescribers because they would be expected to write a lot of scripts. Teixeira explained that, yes, they took into account specialty and environment, populous of patients, where they are, etc. Chalsma continued giving an update on the transition to DHHS saying what MITRE developed is something on open source software and NH uses Oracle, an expensive system. They have spent time trying to get information on details and documentation, but his team has been pulled away from him for COVID. They have done background work, but haven't implemented pieces of the system, but the knowledge is there to install and they have tools and techniques to do similar work. All-Payers is useful for a broad picture, but not as useful for Medicaid, so they will start pulling in the Medicaid perspective. Mara then asked how Chalsma feels about the prospect of being able to plug in stimulants. Chalsma responded that parts of the MITRE model will be applicable and in instances of cycling between providers it could be pretty applicable and said it seems like plugging in different types of drugs is possible. Teixeira added that stimulants isn't as easily comparable in the algorithm, but prescriber cycling is easy to adapt.

Chalsma noted that he is working on a way to tie up loose ends and got permission to make a sandbox scheme in Oracle. Lucy Hodder asked Chalsma if he needs any help from OPAC and Chalsma said that, like Anne said, they'll be looking for commentary from this group.

Closing Remarks and Adjournment

Bizarro-Thunberg sent in the chat that the bill referenced earlier is now in HB1639 and is scheduled for a hearing on 6/10 at 8:35AM and there is a process for registering in Zoom, which brought the discussion back to the legislation briefly. She sent the link to the larger bill, HB1639, in the chat

Mara moved the meeting to discuss the timeline. Teixeira said they are wrapping things up in August and noted that DHHS has access to death certificates. Chalsma said he has data all in one place and has richer analytic capabilities in the department, but can't pull back data to MITRE

Mara then mentioned that Karen couldn't make it for analytics discussion previously planned, so he asked the group to look at the bill and to voice support. Mara noted that the Governor's website was redone, so the OPAC link does not come up anymore, so he is looking into that. Also he wants to add OPAC's report to the webpage. Rossignol added that she had accessed OPAC from info with backslash opioid and Mara said that we need the webpage to be more visible.

Dave called for a motion to adjourn; Jim Potter moved and Alex Casale seconded; the motion passed unanimously. The meeting adjourned at 10:08 AM.

Next Meeting Date, Time, and Location:

Next virtual meeting scheduled for July 13, 9-11 AM.

Council Members:

In Attendance	Name	Email
	David Mara, Esq NH Governor's Advisor on Addiction and Behavioral Health	David.Mara@nh.gov
	Michael P. Auerbach NH Dental Society	mauerbach@nhds.org
	Jonathan Ballard, MD, MPH, MPhil NH Department of Health and Human Services	jonathan.ballard@dhhs.nh.gov
	Richard J. Barth, Jr., MD Dartmouth-Hitchcock Medical Center	Richard.J.Barth@hitchcock.org
	Kathy A. Bizarro-Thunberg, MBA, FACHE NH Hospital Association	kbizarro@nhha.org
	Michael Bullek NH Board of Pharmacy	michael.bullek@oplc.nh.gov
	Alex Casale NH Judicial Branch	Acasale@courts.state.nh.us
	Andrew Chalsma	andrew.chalsma@dhhs.nh.gov

In Attendance	Name	Email
	NH Department of Health and Human Services	
	Maryann Cooper, PharmD NH Pharmacists Association	maryann.cooper@mcphs.edu
	Sean Gill, Senior Assistant Attorney General, designee of NH Attorney General Gordon MacDonald	Sean.Gill@doj.nh.gov
	William Goodman, MD, MPH, FCCP Catholic Medical Center	william.goodman@cmc-nh.org
	Helen E. Hanks, MM NH Department of Corrections	Helen.Hanks@doc.nh.gov
	Lucy Hodder, Esq UNH School of Law	Lucy.Hodder@unh.edu
	Maureen Mustard, designee of Tyler Brannen, NH Insurance Department	Maureen.Mustard@ins.nh.gov tyler.brannen@ins.nh.gov
	Robert Quinn Commissioner, NH Department of Safety	Robert.Quinn@dos.nh.gov
	James G. Potter NH Medical Society	James.Potter@nhms.org
	Michelle R. Ricco Jonas, MA, CPM NH Prescription Drug Monitoring Program	Michelle.riccojonas@oplc.nh.gov
	Jay Schnitzer, MD, PhD VP, Chief Technology Officer MITRE	jschnitzer@mitre.org
	David Strang, MD NH PDMP Advisory Council	davidstrangmd@yahoo.com
	Jennifer A. Weigand NH Healthy Families/Centene	jennifer.a.weigand@centene.com

Persons appearing before the Council:

Chris Teixeira, MITRE cteixeira@mitre.org
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Additional names/numbers: Ben Jean, A Lavelle, Andy Taylor, Anne Wood CMS, Ben Jean, Brian Anderson, C Bishop, Jean Marc Edier MITRE, Jennifer Burrowes, Julianna Bernardi, Kacey Oreal, Larraine Brandt MITRE, Matt Boyas MITRE, Michael Rodriguez, Nancy Haney, Peter Sylvester, Molly Rossignol, 15714515841, 16037036253, 16038566631, 17819562156, D Stapleton, Matt Boyas, Peter Sylvester, David Nagel