

## Colorado Consortium for Prescription Drug Abuse Prevention

PDMP Work Group Meeting

November 10, 2022 from 2:30 – 3:30 p.m. via Zoom

### **Present:**

Jason Hoppe, DO and Dmitry Kunin, DORA, Co-chairs

Justin Wipf, DORA

Erica Pike, Colorado Academy of Family Physicians

Nagy Ramzy, Pharmacist

Marjorie Zimdars-Orthman, Community Member

CDPHE: Barbara Gabella, Katie Sullivan

Consortium: Jose Esquibel, Gina Olberding, Shayna Micucci, Kristin Carpenter, Rosemarie MacDowell

**Absent:** See attached list.

Jason Hoppe, work group co-chair, called the meeting to order at 3:35 p.m.

A motion was made to approve the June 2022 work group meeting minutes with one minor correction noted and made. Motion approved.

### **New CDC Opioid Prescribing Guidelines:**

Perspective: Prescribing Opioids for Pain — The New CDC Clinical Practice Guideline

<https://www.nejm.org/doi/full/10.1056/NEJMp2211040>

<https://www.cdc.gov/opioids/healthcare-professionals/prescribing/guideline/index.html>

[https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s\\_cid=rr7103a1\\_w](https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s_cid=rr7103a1_w)

Jason briefly summarized the new CDC clinical guideline and encouraged work group members to review it in its entirety (link above):

- When prescribing initial opioid therapy for acute, subacute, or chronic pain, and periodically during opioid therapy for chronic pain, clinicians should review the patient's history of controlled substance prescriptions using state prescription drug monitoring program (PDMP) data to determine whether the patient is receiving opioid dosages or combinations that put the patient at high risk for overdose (recommendation category: B; evidence type: 4).
- The main topics are about discussions with patients and reevaluations after a period of time, recognizing that opioids are a therapy that may or may not be necessarily of benefit for some people to be able to function.
- Other sections pertain to non-opioid therapies for acute, subacute, and chronic pain, dosage levels/period of time, benzodiazepine co-prescribing, and risk assessments. Jason pointed out the necessity for continuing provider education.

Comments:

Marjorie Zimdars-Orthman mentioned the disparity between state and federal laws pertaining to marijuana. Pain patients who partake of marijuana edibles or Marinol for pain relief often find their pain management physicians are reluctant to approve the use because of DEA regulations.

Jason said that Marinol really doesn't have the same cannabinoids that are in edibles or what is available over the counter. He also said that urinary drug testing does not identify oxycodone, the most prescribed opioid.

Jose Esquibel suggested thought should be given to how the guidelines can be properly summarized in order to educate the provider workforce. He mentioned the School of Medicine might be willing to put a summary together and that there should be coordination with the Consortium Provider Education Work Group and alignment with DORA. Dmitry Kunin agreed. Jose will coordinate with Allyson Gottsman in the School of Medicine. Work group members discussed how the guidelines would be presented once coordination between all groups is established.

**Consideration of PDMP Annual Report Questions for 2023:**

Justin Wipf spoke to participants about next year's annual report and the tasks that will be assigned to the work group by DORA's executive director. He suggested clarifying any outstanding questions regarding the legislative audit process. Dmitry mentioned a forthcoming legislative audit committee hearing that might finalize anything related to the audit.

Jason suggested revisiting the use of the PDMP and maximizing utilization as a public health and research tool.

Justin asked for comments from Barbara Gabella and Katie Sullivan regarding data that might inform practice improvement initiatives, and he summarized PDMP practices in other states. Katie and Barbara mentioned updating the data dashboard, how work related to data collection might be streamlined, and the sharing and linking of data. Barbara said the BHA is creating a data warehouse related to opioid use disorder treatment that will include data from methadone clinics and another data sharing/link project specific to substance-exposed newborns. Katie provided data for that project.

Justin said that there would be value in merging multiple data sets to build more robust profiles and evaluations, which might also require updating of the PDMP statutory language.

Barbara brought up the recently passed fentanyl bill that includes recommendations from the Health Department related to overdoses. CDPHE has an internal work group addressing this.

Justin asked the work group members to email him directly if they have any other ideas or questions.

**Adjournment and Next Meeting:**

The meeting adjourned at 3:30 p.m. The next work group meeting will be held on Thursday, January 12, 2023 from 3:30 to 4:30 p.m.

Attachment: work group roster