



**MARYLAND Prescription Drug Monitoring Program  
(PDMP) Technical Advisory Committee (TAC)  
Public Health Services  
Tele-Conference Call  
October 16, 2020  
3:00PM to 4:04 PM**



**Attendees**

**Technical Advisory Committee Present**

Tiffany Blackwell, LCPC, LCADC  
Akhil Chhatre, MD  
Dennis Dey, MD

Sarah Merritt, MD  
Diane Romaine, DMD, MM, MAGD

**Committee Adjunct:** Linda Bethman, JD, MA, Office of the Attorney General, MDH

**Technical Advisory Committee Absent**

Anika Alvanzo, MD, MS  
Nadeem Aslam, PharmD  
Gayatri Nimmagadda, MD  
Margaret Rajnic, DNP, FNP-C, RN

**Public Health Services Staff**

Susanna Beckerman, MA  
Mary Ann Bruce, LCADC  
Lindsey Goddard, MPH  
Anna Gribble, MPH, MSW  
Ana Lazarides, CPhT  
Doris Mason, MSW  
Vijay Murthy, MPH  
Sara Roberson, MSW

## **Minutes**

### **I. Roll Call and Agenda Review**

Anna Gribble, Provider Engagement and Policy Manager, Office of Provider Engagement and Regulations (OPER) opened the Technical Advisory Committee (TAC) meeting with roll call and agenda review. At the start of the meeting there were only four out of the nine TAC members present. Sara Roberson recommended that the meeting proceed and voting on the minutes be postponed until later in the meeting if quorum is achieved.

### **II. Introduction of New PDMP Staff**

Susanna Beckerman was introduced as the new Deputy Director of OPER over the PDMP and Ana Lazarides as the new PDMP Coordinator.

### **III. Open Meetings Act**

Anna Gribble reminded TAC members that the meeting is subject to the Open Meetings Act. She stated that the meeting was open to the public and that protected health information (PHI) or identifiable information should not be shared or discussed.

### **IV. Feedback on MME Data and High Opioid Prescribing Metric**

Anna Gribble summarized the feedback received on the proposed metric:

Prescribers writing 500 or more prescriptions of 90 or more MME (Morphine Milligram Equivalents) per day during the months of December 2019, January 2020, and February 2020.

- The TAC was asked to review 17 physicians that met the metric.
- OPER received feedback from three of the nine members of the TAC. All three reviews recommended sending letters to prescribers that met the metric of 500 or more prescriptions of 90 or more MME per day.
- Feedback on the Data and Considerations for Potential Notification Language:
  - Consider strategies to minimize the risk for diversion of opioid medications including checking the PDMP, urine drug screens, education about disposal of unused medications and pill counts.
  - Encourage long acting pain medications.

### **V. High Opioid Prescribing Metric**

Anna Gribble discussed the current High Opioid Prescribing Metric (2,000 opioid prescriptions written within a 3-month period). Ten prescribers have received notifications since November

2019, and only 1 new provider has been identified in the past few months. She questioned if this was still a viable metric and recommended moving forward with an MME metric to replace the High Opioid Prescribing Metric to better align with the concerns of opioid prescribing.

Discussion ensued concerning the high opioid metric versus the MME metric. It was stated that the MME data would provide more granular and specific information. The TAC recommended the high opioid prescribing metric should not be abandoned but rather put it on hold until the TAC decides on an MME metric.

## **VI. Morphine Milligram Equivalents (MME) Data Review**

Anna Gribble discussed the relationship between MME and overdose risk and an overview of MME and CDC prescribing guidelines. Vijay Murthy, OPER epidemiologist, presented data on dispenses that occurred between June 1<sup>st</sup> and August 31<sup>st</sup>, 2020 as part of a new potential MME metric. Vijay analyzed PDMP data to identify providers who wrote opioid prescriptions to patients who had a cumulative MME of 500 or more during at least one day in a three month period. In total, 792,545 prescriptions were analyzed resulting in 38 patients with 1 prescriber, and 9 patients with more than one prescriber, contributing to the prescribing of an average daily MME of 500 or more. He also presented line level data that included prescriber specialty information. Discussion ensued with respect to whether providers could be within the same practice location and the current lag time in analyzing the data once it is received.

Anna Gribble posed to the TAC the following questions:

- Should the TAC and OPER move forward with developing a metric based on:
  - Prescribers who write a large number of high MME prescriptions to many patients, or
  - Prescribers writing prescriptions to patients receiving high average MME/day?
- Which behavior should we prioritize for sending educational letters?
- Which could have the biggest impact on reducing adverse events such as overdose?
- Which metric is more likely to influence provider behavior?

Discussion ensued regarding which metric would have the biggest impact, one dimensional prescribing, opioid naïve patients versus patients with a higher tolerance of opioids, legal nuances with respect to the timeliness of letters being sent and the intent of letters to be educational, and that palliative care prescribers should possibly receive a letter containing different language. It was agreed that there is value in both metrics presented, that specialty data should be improved upon, that there should be a metric for one dimensional prescribing, and for potentially diverted medications. The TAC should review the data provided by Vijay Murthy and there will be a vote at the next meeting on an MME metric.

**Action Item:** TAC will review the data presented by Vijay Murtha regarding patients receiving an average daily MME of 500 or more between June 1<sup>st</sup> and August 31<sup>st</sup>, 2020.

Dr. Dey discussed the desire to eventually see a metric that would show the visibility of a trajectory for a prescriber that is tapering a patient off a high dose opioid. He conveyed the difficulty in tapering a patient off high dose opioid prescriptions.

## **VII. TAC Participation**

Anna Gribble shared that in order to have more meaningful recommendations on metrics for notifications, at least 50% participation in data reviews is needed. She asked the TAC if there was anything that could be done differently to facilitate greater participation in data reviews.

Discussion ensued regarding the possibility of receiving CME credits or other types of compensation to encourage greater participation. Linda Bethman discussed statutory limitations regarding compensation. It was also stated that the use of the secure email slows down the process of reviewing the data.

**Action Item:** OPER/PDMP will contact the individual Boards to assess the feasibility of continuing education credits being earned by participating TAC members.

## **VIII. Approval of TAC Meeting Minutes**

With the arrival of an additional TAC member to the meeting, quorum was achieved, and a vote proceeded regarding the meeting minutes from July 27, 2020.

Motion by Dr. Dennis Dey

Move to approve the minutes of the July 27, 2020 meeting, seconded, and carried without dissent.

## **IX. Public Comments**

None

**Meeting Adjourned, 4:04pm**