



Controlled Substance Monitoring
Committee Meeting Minutes
October 13, 2015

MEMBERS PRESENT

Dr. Michael Baron, Board of Medical Examiners,
Chairperson
Dr. Debra Wilson, Board of Pharmacy
Dr. Kim Johnson, Board of Veterinary Medicine
Ms. Patricia Eller, Board of Medical Examiners, Vice
Chairperson
Ms. Joyce McDaniel, Board of Pharmacy
Dr. David Sables, Board of Podiatry
Mr. Brent Earwood, Board of Nursing
Dr. Donald Polk, Board of Osteopathy
Dr. Richard Orgain, Board of Optometry

MEMBERS ABSENT

Dr. Katherine Hall, Board of Dentistry
Dr. Reginald Dilliard, Board of Pharmacy
Ms. Rosemarie Otto, Executive Director, Health
Related Boards
Mr. Omar Nava, Committee on Physician Assistants

STAFF PRESENT

Dr. D. Todd Bess, Director of Controlled Substance
Monitoring Database
Dr. Mitchell Mutter, Special Projects
Ms. Diona Layden, Interim Director, Office of
Investigations and Deputy Director for Division of
Health Licensure
Ms. Tracy Bacchus, Administrative Assistant
Mr. Andrew Coffman, Attorney, Office of General
Counsel
Ms. Debora Sanford, Project Manager
Ms. Mollie Gass, Attorney, Office of General Counsel
Ms. Mary K. Bratton, Attorney, Office of General
Counsel

STAFF ABSENT

Ms. Sheila Bush, Administrative Manager

The Controlled Substance Monitoring Database Committee convened on Tuesday, October 13, 2015, in the Iris Room, 665 Mainstream, Nashville, TN. Dr. Baron called the meeting to order at 9:00 a.m. and requested that each member introduce themselves. Ms. Mollie Gass instructed the group on the procedures of an electronic board meeting because a physical quorum was not present. After this discussion, Joyce Mc Daniel joined the meeting allowing the committee to have a quorum of the members.

Dr. Baron mention to the group that we are live streaming so please make sure the green light is on and speak in your microphone.

Minutes

Dr. Baron asked had everyone read the minutes from the last meeting, and if so can we have a motion to approve the minutes. Brent Earwood made the motion to accept the minutes from the August 25, 2015 committee meeting. Dr. Kim Johnson seconded the motion; move by acclimation the minutes were approved.

CSMD Director's Report

Dr. D. Todd Bess informed the group that he would present the legislative report at the next committee meeting. He updated the members on staffing for the CDC grant and that three of the seven positions are filled. Dr. Bess shared with group a standing meeting with the CEO of Appriss occurs every Friday to assure the best success with the partnership with Appriss. Appriss also came to TN and met with the Commissioner, Dr. Reagan, Mike Newman, Debora Sanford and myself. During the meeting. Appriss provided an update of their product called Gateway. This product allows PMPs to be queried by electronic health environments. The meeting was very productive and updates will be provided at our committee meetings as information becomes available. Dr. Bess stated that the Comptrollers audit is complete and a meeting will be held to review the finding and finalizing the results. Committee members were invited to join the meeting in November with the Joint Government Operations Committee. Dr. Bess informed the group that a conflict existed with the January meeting date so the next meeting will be January 25, 2016

instead of January 26, 2016.

Dr. Bess asked the group to nominate a Chair and Vice Chair of the CSMD Committee for 2016. Dr. Orgain nominated Dr. Michael Baron and Dr. Polk seconded the motion. The motion carried. Dr. Baron nominated Dr. Donald Polk as Vice Chair, Dr. Orgain seconded the motion. The motion carried with a vote of 6 and 1 abstention. Dr. Bess made a request for the group to approve travel for him, Dr. Chen, and one other staff person to attend the National Rx Summit in Atlanta, GA for March of 2016. Joyce McDaniel made the motion to approve travel for three people; Dr. Polk seconded the motion. The motion carried.

Information Technology Report

Mike Newman, Chief Information Officer for the Tennessee Department of Health (TD) updated the group on what is a data breach, and security of the data. Tennessee Department of Health is a covered entity, and we are required to comply with HIPAA high tech. HIPAA Security Safeguards requires us to have a contract with Appriss. The contract has to have language that specifically discuss HIPAA compliance, Business Associate Agreement, and has to have HIPAA safeguards.

The TDH has a Chief Information Security Officer and HIPAA Privacy Officer. There are technical safeguards; access controls, audit controls, integrity controls and transmission security. **Access controls** provides that only authorized access to CSMD data by registered users; CSMD application adheres to State Secure Application Development Guides; and Open Web Application Security Project (OWASP). **Audit controls** provide that all access to the CSMD is logged and monitored. **Integrity Controls** provides that only authorized users' access CSMD data, and CSMD administration monitoring data. **Transmission Security** provides network monitoring and logging; firewalls protect access to CSMD; network penetration and boundary monitoring; and CSMD data is encrypted in transport.

Mr. Newman indicated what's ahead from Appriss. Appriss proposed customer collaboration by forming PMP User Groups to advance PMPs nationally, and ability to inter-operate with EHR/EMRs via Gateway service. Tennessee has a multi-step plan with Appriss which addresses the following:

- Transition planning – administrative
- Addressing recent CSMD unplanned outages
- Network capacity –
 - Cologix (data center currently used by vendor)
 - Goal it so move to Amazon Web Services (AWS) which is a Cloud strategy
- Additional monitoring tools.
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Ms. Eller asked does Cologix have a backup plan if the system goes down and Mr. Newman stated as a part of the HIPAA compliance guidelines that Cologix has to have a disaster recovery plan in place. TDH is working with Appriss on a plan to move CSMD data to the Amazon Cloud.

Dr. Polk asked the group to talk about EHRs, is this a reach in and grab type deal, what would be the storage, and are we looking at private offices, hospitals, or insurance companies. Mr. Newman stated that we are trying looking at companies, certified with the federal government as a provider to provide for meaningful use. Using the EHR to send data query to the PMP and provide the data back into the electronic health records with the clinical decision support developed by TN so providers can use the data

to help make clinical decisions.

OGC Report

Mollie Gass introduced Mr. Andrew Coffman as the new attorney for the CSMD. Ms. Gass stated there are some rules that are in the mist of change and that would include law enforcement fees, dispensers reporting daily, and ARCOS update. We have had some internal discussions about adding the national practitioner identifier (NPI) as a requirement to collect. Dr. Polk asked would each board have to pass this rule or would it come through the CSMD Committee? Ms. Gass stated it would be a part of the CSMD rules and she would come back in January with the suggested language for the use of the NPI numbers. Ms. Eller suggested that we require it with the exceptions of veterinarians. Dr. Polk move to table this until January once Ms. Gass has more information, Joyce McDaniel seconded the motion. The motion carried. Ms. Gass discussed the naloxone standing order. The standing order would be an agreement between the pharmacist and the prescriber.

Medical Director for Special Projects

Dr. Mutter informed the group that he will be speaking at Vanderbilt on October 15, 2015, Murfreesboro, TN on October 16, and Kingsport, TN on October 17, 2015. The Chronic Pain Guidelines Committee met on September 25, 2015. The Chronic Pain Guidelines committee discussed the morphine equivalent ceiling, adding acute pain, long acting vs. short acting drugs, and updates to the urine drug screen. He informed the group that a survey will be sent out within the CSMD to survey the users (prescribers and dispensers only) of the CSMD.

BIV Report

Diona Layden reported on BIV and stated that 73 random audits completed as of the end September. BIV closed 82 audits and breakdown of actions of these audits are: 23 closed with no actions; 19 letters of concerns; 21 letters of warning; 7 was referred to OGC; and 12 were closed on arrival. BIV had 29 complaints open through the end of September and breakdown of actions of these audits are: 13 closed; 5 were referred to OGC; 5 were closed with no actions; 2 letters of warning; and 1 letter of concern.

Exemptions/Waivers

Dr. Bess asked the committee to approve the waiver from electronic reporting and exemption from reporting forms. Ms. Joyce McDaniel made the motion to approve and Dr. Orgain seconded that motion. The motion carried.

Name	Business
Dana Proctor	Petnet Solutions
Lanier Evans	Petnet Solutions
Natalie Ryan	Value Specialty Pharmacy
Diana Tow	RxPress Pharmacy
Pam Smith	Care Services on Call
Kelley Pipkin	Aureus Pharmacy
Joshua Heiblum	My Health South Pharmacy
John Ramser	Hemophilia Preferred Care of Memphis
John Williams	Imperial Beach Pharmacy



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Noureen Wadhwanian	Primary Care Pharmacy
Jane Garrison	Pack4U Corp

The meeting was adjourned at 12:05 p.m.