

PRESCRIPTION DRUG AND OPIOID TASK FORCE RECOMMENDATIONS

The Michigan Prescription Drug and Opioid Abuse Task Force has developed strategic statewide recommendations to address Michigan's growing prescription drug and opioid abuse problem.

PREVENTION

- Require additional training for all professional who will be prescribing controlled substances.
- Encourage the development and maintenance of relationships among state and local agencies to provide necessary information regarding prescription drug abuse, prevention and treatment.
- Collaborate with local coalitions, pharmacies, health profession boards, state agencies and the DEA to increase availability of prescription drug drop-off bins.
- Review successful state and local collection programs for possible replication and expansion.
- Review programs and parameters established within the Medicaid system as well as actions taken by other states to determine the best route forward to eliminate doctor and pharmacy shopping.
- Review programs already in use in Tennessee and Washington to determine how their systems operate and if any of those systems would work in Michigan.
- Develop a multifaceted public awareness campaign to inform the public of the dangers of abuse, how to safeguard and properly dispose of medicines, publicize improper prescribing practices, and reduce the stigma of addiction. The state should try to partner with pharmaceutical companies on this campaign.

TREATMENT

- Allow pharmacists to dispense Naloxone to the public in a similar fashion to how pseudoephedrine is dispensed.
- Create a public awareness campaign about the laws that limit civil and criminal liabilities for administering Naloxone.
- Explore the possibility of limited statutory immunity for low-level offenses involved in reporting an overdose and seeking medical assistance.
- Explore ways for the state to increase access to care, including wraparound services and Medication Assisted Treatment, as indicated by national and state guidelines for treatment.
- Insurance companies should consider providing health plans that cover the costs of MAT with reasonable quantity limits on medication used.
- Explore ways to increase the numbers of addiction specialists practicing in Michigan.
- Require additional training for law enforcement in the area of recognizing and dealing with addiction for those officers who do not deal directly with narcotics regularly.
- Expand treatment courts as called on by Gov. Snyder in his 2015 Criminal Justice Message, as well as expand the courts' ability to create pilot programs for use of Medication Assisted Treatment.
- Requiring a bona-fide physician-patient relationship prior to prescribing controlled substances.
Review current guidelines for reducing the development of neo-natal abstinence syndrome caused by prescription drug and opioid abuse.

REGULATION

- Consider legislation to better define and identify pain management practice for the purposes of licensing.
- Update regulations to delineate licensing for clinics based on the population being treated and consider a tiered system of licensing that regulates the functions and prescription capabilities of the clinics and their staff.
- Establish an exemption from civil liability when a pharmacist is acting in good faith and has reasonable doubt regarding the authenticity of the prescription or believes the prescription is being filled for non-medical purposes.
- Review the Michigan College of Emergency Physicians policy and then endorse a best practices policy that hospitals and doctors could use as a model.

POLICY & OUTCOMES

- Create an ongoing Prescription Drug and Opioid Task Force or Commission to evaluate the efficacy of current proposals and continually develop new solutions to address societal changes.
- Adding outcomes to the State Dashboard to track success.
- Consider mechanisms to ensure patient continuity of care during an abrupt closure of a medical practice to ensure that necessary treatments can continue without interruption.
- Document law enforcement efforts with local coalitions and focus groups that have resulted in a reduction of prescription drug overdose deaths to determine if replication and expansion are possible and warranted.

ENFORCEMENT

- Review budgetary requirements for updating or replacing the Michigan Automated Prescription System.
- Require mandatory registration in MAPS by all licensed prescribers to ensure all are registered when the updated or new system comes online.
- Allow broader access to MAPS for law enforcement purposes when investigating questionable business practices by prescribers.
- Require enhanced licensing sanctions for health professionals that violate proper prescribing and dispensing practices.
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