

## **SJR 20: Reducing Prescription Drug Abuse** ***Draft Study Plan***

Prepared for the Children, Families, Health, and Human Services Interim Committee  
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for June 25, 2013

### **INTRODUCTION**

The 2013 Legislature approved Senate Joint Resolution 20, to study strategies for reducing prescription drug abuse. Legislators ranked the study seventh out of 17 study resolutions in the post-session poll of interim studies. In May, the Legislative Council assigned the study to the Children, Families, Health, and Human Services Interim Committee.

SJR 20 directs the Committee to focus in particular on the use of opioid pain relievers for the treatment of chronic pain caused by conditions other than cancer or the treatment of cancer. It also suggests that the Committee identify steps that Montana policymakers could take to reduce prescription drug abuse.

### **PREVIOUS EFFORTS IN MONTANA**

Shortly after taking office in 2009, then-Attorney General Steve Bullock announced that his office would focus attention on the issue of prescription drug abuse. The initiative included a number of efforts, including:

- a public education campaign to raise awareness about prescription drug abuse;
- community programs allowing people to dispose of their unused prescription drugs in a secure manner; and
- creation of a Prescription Drug Abuse Advisory Council made up of legislators, health care providers, law enforcement officials, and members of the public. Among other things, the council recommended creation of a registry of information on prescription drug orders that involve controlled substances.

The 2011 Legislature approved a bill authorizing the Board of Pharmacy to create the registry. In March 2012, the registry began accepting information from pharmacies. Health care providers who write prescriptions may access the registry to obtain information about the controlled substances prescribed to any patients in their care.

With passage of SJR 20, the 2013 Legislature recognized that additional steps may be needed to reduce the abuse of prescription drugs while ensuring that patients who a legitimate medical need for the drugs will still be able to obtain them.

## **STUDY TASKS**

SJR 20 suggests that the committee:

- use available sources to compile data on the major illicit sources of prescription drugs;
- evaluate the extent and impact of current efforts to prevent prescription drug abuse and to mitigate the effects of the abuse;
- identify a comprehensive and coordinated statewide strategy to restrict access to prescription drugs for illegal use while ensuring access to individuals who have a legitimate need for the drugs;
- identify opportunities for collaboration among public health, law enforcement, and medical communities at the state and local levels;
- identify communities that are most in need of prevention and mitigation efforts; and
- identify appropriate steps that policymakers could take to reduce prescription drug abuse.

## **STUDY RESOURCES**

Many studies have been conducted nationally and in Montana to identify the extent of prescription drug abuse and the sources from which people generally obtain the drugs. Those studies will serve to inform the committee's work as members begin the SJR 20 study.

Other Montana-specific information will be drawn from:

- analysis of information available from the Montana Prescription Drug Registry;
- materials developed by the Attorney General's Office related to its efforts to curb prescription drug abuse;
- a performance audit of efforts by the Department of Public Health and Human Services to detect and resolve suspected prescription drug abuse by Medicaid recipients; and
- other sources identified in the course of the study.

National organizations devoted to state-level public policy also have compiled information on prescription drug abuse and undertaken efforts to curb abuse. For example, the National Governors Association has undertaken a five-state project on prescription drug abuse, while the National Conference of State Legislatures has compiled information on legislative initiatives around the country. In addition, a number of federal agencies — from the Food and Drug

Administration to the Substance Abuse and Mental Health Services Administration and the Drug Enforcement Administration — have undertaken efforts related to preventing misuse, abuse, and diversion of prescription drugs. Materials and initiatives developed by these groups and agencies will be reviewed during the research phase of the study.

Health care providers in Montana and elsewhere have also piloted efforts to better track the prescribing of pain drugs and implement systems to identify potential abuse. Those efforts will be presented to the committee, to allow members to identify potential strategies that may work across the state.

### **OUTLINE OF STUDY ACTIVITIES**

The study will include the following basic activities during the time periods noted:

1. **Compile background information: June 2013 through January 2014.** This stage is designed to provide the Committee with information about the various study topics and will include:
  - a. staff research and briefing papers summarizing key aspects of prescription drug abuse, misuse, and diversion; statistical information available for Montana; and efforts undertaken in Montana and elsewhere to reduce abuse while still maintaining access to the drugs for appropriate pain management uses.
  - b. presentations from stakeholders, to provide information on prescription drug abuse in Montana, communities in need of prevention and mitigation efforts, and ideas for strategies that may be successful in Montana. Stakeholders include health care providers, law enforcement, mental health and chemical dependency treatment providers, tribes, patient advocates, and patients.
2. **Identify issues: January through March 2014.** Study activities during this period will include a review of the information compiled to date and Committee identification of issues that members would like to address through further analysis or legislation. This phase of the study will help the Committee focus attention on the study issues it considers to be of greatest importance, so members may obtain any additional information they would like to receive before identifying potential solutions and making recommendations on study topics.
3. **Review and decide legislative options: March 2014 through August 2014.** After compiling background information, identifying issues, and researching options, the Committee will discuss and act on issues to be addressed through the legislative process or in other ways.

The table on the following page provides a listing of anticipated study activities and resources, as well as tentative dates for the activities and the amount of Committee meeting time each activity is anticipated to entail. ***The time estimates on P. 5 are based on the assumption that the Committee will adopt the proposal in the Draft Work Plan to devote 32% of its meeting time, or approximately 23 hours, to the SJR 20 study.***

If the Committee chooses a different allocation of time or a different level of involvement in the study, the activities would be revised accordingly.

**Action Item:** *Review, discuss, and adopt or revise the proposed study activities and allocation of Committee time.*

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<b>Study Activity</b>	<b>Source</b>	<b>Activity</b>	<b>Meeting Date</b>	<b>Committee Time</b>
(1) Compile information on the major illicit sources of prescription drugs	Staff research, Montana Prescription Drug Registry, Attorney General's Office, stakeholders	Staff materials and agency presentations	November 2013	1.5 hours
(2) Evaluate extent and impact of Montana efforts to prevent abuse and mitigate effects of abuse	Staff research, state agencies, stakeholders	Staff materials and panel presentations	November 2013	3 hours
(3) Identify statewide strategy for restricting access to prescription drugs for illicit use and maintaining access for appropriate use	DPHHS, Board of Pharmacy, stakeholders	Panel presentations and public comment	November 2013 through March 2014	6 hours
(4) Identify opportunities for collaboration among public health, law enforcement, and medical communities	Staff research, stakeholders	Staff materials, panel presentations, and public comment	November 2013 or January 2014	4 hours
(5) Identify communities most in need of prevention and mitigation efforts	Staff research, stakeholders	Panel presentations and public comment	January 2014	2.5 hours
(6) Develop recommendations and, if desired, bill drafts for 2013 session	Committee members	Committee work sessions and public comment	March through August 2014	6 hours
			<b>Total</b>	<b>23 hours</b>

