

SJR 73 STUDY OF STRATEGIES AND MODELS FOR THE TREATMENT AND PREVENTION OF SUBSTANCE ABUSE

WEDNESDAY, AUGUST 18TH, 2010
VIRGINIA GENERAL ASSEMBLY BUILDING

Members Present: Senator Emmett W. Hanger, Jr., Delegate John M. O'Bannon, III, Delegate David A. Nutter, Delegate Charniele L. Herring, Dr. Sherman Masters, M.D., Mr. John Shinholser, Mr. Terry R. Tinsley, Mr. Jack Fraser (Department of Social Services), Ms. Scott Richeson (Department of Corrections), and Mr. James W. Stewart, III.

Members Absent: Senator Maimie E. Locke

The first meeting of the SJR 73 Joint Subcommittee Studying Strategies and Models for the Prevention and Treatment of Substance Abuse was held on Wednesday, August 18th, 2010, at 10:00 a.m. at the General Assembly Building in Richmond. Following introductions and opening remarks, the joint subcommittee undertook the following new business.

I. Overview of the Purpose and Goals of the Joint Subcommittee

Staff reviewed the purpose and goals of the joint subcommittee, reporting that Senate Joint Resolution 73 (2010) continued the Joint Subcommittee to Study Strategies and Models for Substance Abuse Prevention and Treatment for one additional year, through December of 2010, and directed the joint subcommittee to:

- Continue to process information received and models and strategies identified by the joint subcommittee during the 2009 interim, in order to: (i) identify and characterize the nature of substance abuse in the Commonwealth; (ii) identify current state policies and programs targeting substance abuse prevention and treatment; (iii) examine the cost of such policies and programs to the Commonwealth; (iv) identify and examine policies and prevention programs from other leading states in the field of substance abuse and prevention; and (v) compare the Commonwealth's substance abuse prevention and treatment programs and policies with those of the leading states.
- Continue the work groups established during the 2009 interim to explore issues related to substance abuse treatment, substance abuse prevention, and special issues related to the abuse of prescription medication.
- Receive data and information collected by the Bureau of Insurance of the State Corporation Commission pursuant to the Senate Amendment in the Nature of a Substitute for Senate Joint Resolution No. 74 (2010), directing the Bureau of Insurance to collect data and information on the coverage provided by health insurers, health services plans, and health maintenance organizations for substance abuse treatment services, including: (i) the number of complaints received in 2009 by health insurers, health services plans, and health maintenance organizations regarding coverage of substance abuse services as reported by these entities pursuant to § 38.2-511 and subsection C of § 38.2-5804 of the Code of

Virginia; (ii) the number of complaints the Bureau of Insurance received in 2009 concerning coverage of substance abuse services by health insurers, health services plans, and health maintenance organizations pursuant to § 38.2-3412.1 of the Code of Virginia; and (iii) the cost and utilization information for substance abuse services, which shall be reported by health insurers, health services plans, and health maintenance organizations to the Bureau in a manner consistent with the substance abuse information reported pursuant to § 38.2-3419.1 of the Code of Virginia, and to receive, review, and develop recommendations regarding steps that the Commonwealth may take to address barriers to mandated insurance coverage of substance abuse services developed and reported by the Bureau of Insurance.

- Receive data and information about utilization of the Prescription Monitoring Program by prescribers and dispensers of controlled substances and responses to notifications sent by the Department of Health Professions to prescribers collected by the Department pursuant to Senate Joint Resolution No. 75 (2010), as amended by the Senate, directing the Department to collect data on and information about utilization of the Prescription Monitoring Program by prescribers and dispensers of controlled substances and responses to notifications sent by the Department to prescribers including, for each month of 2010: (i) the number of registered users eligible to receive reports from the Prescription Monitoring Program; (ii) the number of reports of dispensing of covered medications submitted to the Prescription Monitoring Program; (iii) the number of exemptions from reporting requirements authorized; (iv) the number of requests for information from registered users made and responded to; (v) the number of notifications of indications of potential misuse or abuse of covered substances sent to prescribers, and the number and nature of responses to such notifications; (vi) the number of responses to requests for information relevant to an investigation of a specific recipient, prescriber, or dispenser made, and the agency or entity to which such information was released; and (vii) the number of disciplinary proceedings initiated by a health regulatory board against a person required to report dispensing of a covered substance to the Prescription Monitoring Program for failure to report as required, and receive and review any recommendations for changes to the Prescription Monitoring Program, and any other information relevant to the use of the Prescription Monitoring Program reported by the Department of Health Professions.

Senate Joint Resolution 73 (2010) authorizes the joint subcommittee to hold four meetings during the 2010 interim, and all meetings must be concluded by November 30, 2010.

II. Presentation - "Creating Opportunities for Recovery: Services for People with Substance Use Disorders"

Mr. James W. Stewart, III, Commissioner of the Department of Behavioral Health and Developmental Services, provided an overview of the Department's initiatives around services for people with substance use disorders, including funding, prevention programs, services and utilization, unmet needs for treatment services, waiting lists and delays experienced by people in need of substance abuse services, information on treatment quality, services for persons with co-occurring mental health and substance use disorders, and new initiatives to improve services quality and access to service. New initiatives include efforts to:

- Strengthen the responsiveness of Virginia’s emergency response system.
- Develop infrastructure to increase direct service roles for peers and expand recovery support services.
- Address housing needs through involvement in the Governor’s initiative to reduce homelessness and expand affordable housing.
- Create employment opportunities through coordination with the Governor's Economic Development and Job Creation Commission.
- Enhance accessibility to a consistent array of substance abuse treatment services across Virginia.
- Review and develop strategies to enhance the effectiveness and efficiency of state hospital services.
- Strengthen the capability of the case management system.
- Develop and implement a comprehensive plan for child and adolescent mental health services.

III. Overview of Work Group Activities and Work Plan for 2010

Staff presented information on the work and work plan of the work groups created at the beginning of the 2009 interim to assist the joint subcommittee with its work. All three work groups (Treatment & Recovery Models, Prevention, and Prescription Drug) met once prior to the first meeting of the joint subcommittee. At that meeting, the work groups voted to combine the three existing work groups into a single work group. This recommendation was approved by the joint subcommittee. Staff then reported that the combined work group planned to:

- Develop a report on the current system of services in the Commonwealth, including gaps in service and service needs, and to develop recommendations, including recommendations for funding, to address unmet needs,
- Develop a report on changes in federal policy affecting substance abuse services,
- Prepare a list of state initiatives focused on issues related to substance abuse,
- Prepare a recommendation on options for continuing the work begun by the Joint Subcommittee, and
- Develop specific recommendations related to needs for substance abuse prevention, treatment, and recovery support services; expanding the role of and providing support for peer support and recovery support services; expanding the drug court model and supporting drug courts; improve use and effectiveness of the Prescription Monitoring Program; increasing efforts to education prescribers and pharmacists about substance abuse and the prevention of substance abuse, particularly prescription substance abuse; expanding the role of community coalitions in prevention activities, and supporting community coalitions; and the need for data collection and planning around substance abuse prevention and treatment needs.

The joint subcommittee approved the work group's work plan for the 2010 interim.

IV. Discussion of 2010 Joint Subcommittee Work Plan

At the end of the meeting, the joint subcommittee discussed its work plan for the 2010 interim. The joint subcommittee will meet three more times, with meetings to be held in different regions of the Commonwealth. At these meetings, the joint subcommittee will hear reports from the work groups, receive information about the impacts of federal health care reform on substance abuse services, receive the report of the Bureau of Insurance on the issue of substance abuse services insurance parity, and receive the report of the Department of Health Professions on the Prescription Monitoring Program.