

Aug. 9, 2012

Dear Dr. Wymyslo and Director Kantor-Burman:

As organizations representing Ohio's physician community, we are writing to applaud the efforts of the Governor's Cabinet Opiate Action Team (GCOAT) Professional Education Workgroup in developing innovative and consensus-driven solutions to alleviate the prescription drug abuse epidemic plaguing our state. However, with all of the rapid legal and regulatory changes that are now in place, we strongly encourage GCOAT to proceed very cautiously with any additional regulatory solutions to this problem until the impact of current accomplishments can be evaluated and an aggressive professional and public educational program is in place.

We also encourage the GCOAT Reforming Prescribing Practices Committee to continue to focus on consensus-driven solutions that do not negatively impact access to care for chronic pain patients. We are continuing to hear concerns from patients and providers that some actions have already had a negative impact on access and are being exacerbated by a shortage of pain treatment facilities and pain specialists.

Much has been accomplished in the past two years that has established Ohio as a progressive leader in addressing the prescription drug abuse epidemic, including:

- The enactment of HB 93 and SB 301 has led to the closing of pill mills, the prosecution of rogue prescribers, the implementation of a system for disposal of unused drugs, and restrictions on in-office dispensing of controlled substances.
- The adoption of Medical and Pharmacy Board Rules for the licensure of pain clinics and the usage of the Ohio Automated Rx Reporting System (OARRS) have led to office inspections, regulatory standards, and increased public and professional awareness of drug diversion and abuse issues that are helping to reform prescribing practices.
- The creation of GCOAT, which united the medical community, law-enforcement, licensing boards, consumer groups, and treatment providers in developing and promoting Emergency Department and Urgent Care Facility clinical guidelines followed by the current efforts to generally reform the prescribing practices of providers in Ohio.

In regard to the "press pause/reassessment trigger threshold" being addressed, we do not believe there is sufficient published data and evidence-based research to support a mandatory rule at this time. Such a rule would establish a rigid mandate as to when and what must be performed when a patient reaches a certain dosage threshold. It could infringe upon the physician's ability to use sound clinical judgment in times when the required actions for high dose patients may or may not be necessary.

Adoption of a rule could result in an ineffective use of health care resources where clinicians are performing costly tests and providing services merely to comply with the rules. A rule would also shift focus from worst offenders to a scrutiny of all prescribers who do not have a pattern of practice below acceptable standards of care. Therefore,

we strongly encourage GCOAT to consider the adoption of clinical guidelines - like those in place for Emergency Departments and Urgent Care Facilities - and not promulgate general prescribing rules prematurely at this time. Working with the various provider licensing boards, the organizations below stand ready to aggressively educate the physician community on prescribing guidelines when finalized by the Reforming Prescribing Practices Task Force.

One option for strengthening the clinical guidelines is to have the Ohio State Medical Board adopt the proposed prescribing standards as a position statement. According to Medical Board policy, the board may establish a position statement defined in the following way: ***“unlike a statute or rule, a position statement does not have the force and effect of law. Position statements are most often used to announce Medical Board policy, promote certain minimum guidelines and highlight safety concerns. Through a position statement, the Board can also put the public and the profession on notice of what it considers to be the appropriate standard of care.”***

Establishing the proposed guidelines as a Medical Board position statement and practice guideline will inform the physician community that an appropriate standard of care has been established. The same standards can be established by the licensing boards of other prescribers through the same process.

In closing, we applaud the good work of Governor’s Office, GCOAT, Representative Terry Johnson, DO, Sen. Dave Burke, the Medical and Pharmacy Boards, the Attorney General’s Office and Ohio’s medical community in aggressively addressing Ohio’s prescription drug abuse epidemic. Through these collaborative efforts, our state is making great progress in improving the lives of citizens, who are suffering from the prescription drug abuse crisis. At the same time, we must continue to preserve access to care and ensure that appropriate treatment facilities and providers are available to make life better for patients who are suffering with chronic pain.

Kindest regards,

Ohio State Medical Association  
Ohio Osteopathic Association  
Ohio Chapter, American College of Emergency Medicine  
Academy of Medicine of Cleveland & Northern Ohio  
Ohio Academy of Family Physicians  
Ohio Society of Anesthesiologists  
Ohio Psychiatric Physicians Association

cc: Tracy Intihar  
Christine Morrison  
Melissa Bacon