

ROY COOPER GOVERNOR

MANDY COHEN, MD, MPH SECRETARY

August 31, 2018

SENT VIA ELECTRONIC MAIL

The Honorable Josh Dobson, Chair Joint Legislative Oversight Committee on Health and Human Services North Carolina General Assembly Room 301N, Legislative Office Building Raleigh, NC 27603

The Honorable Donny Lambeth, Chair Joint Legislative Oversight Committee on Health and Human Services North Carolina General Assembly Room 303, Legislative Office Building Raleigh, NC 27603

The Honorable Louis Pate, Chair Joint Legislative Oversight Committee on Health and Human Services North Carolina General Assembly Room 311, Legislative Office Building Raleigh, NC 27603

Dear Chairmen:

Session Law 2015-241, Section 12F.16.(k), requires the North Carolina Department of Health and Human Services, Division of Mental Health, Developmental Disabilities and Substance Abuse Services, to submit a report on the agency's participation with the Prescription Behavior Surveillance System to the Joint Legislative Oversight Committee on Health and Human Services and the Joint Legislative Oversight Committee on Justice and Public Safety. The first report was due beginning September 1, 2016, and every two years thereafter. Pursuant to the provisions of law, the Department is pleased to submit the attached report.

Should you have any questions, please contact Kody Kinsley, Deputy Secretary for Behavioral Health and Intellectual/Developmental Disabilities at (919) 733-7011.

Mark T. Bulon

Mandy Cohen, MD, MPH

Secretary

Matt Gross cc:

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STATE OF NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER GOVERNOR

MANDY COHEN, MD, MPH SECRETARY

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SENT VIA ELECTRONIC MAIL

The Honorable James L. Boles, Jr., Chair Joint Legislative Oversight Committee on Justice and Public Safety North Carolina General Assembly Room 528, Legislative Office Building Raleigh, NC 27603-5925

The Honorable Shirley B. Randleman, Chair Joint Legislative Oversight Committee on Justice and Public Safety North Carolina General Assembly Room 628, Legislative Office Building Raleigh, NC 27603-5925

The Honorable Ted Davis, Jr., Chair Joint Legislative Oversight Committee on Justice and Public Safety North Carolina General Assembly Room 417B, Legislative Office Building Raleigh, NC 27603-5925

Dear Chairmen:

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Sincerely,

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Report on Expanding Monitoring Capacity Session Law 2015-241, Section 12F.16. (k)



Report to the Joint Legislative Oversight Committee on Health and Human Services

and Joint Legislative Oversight Committee on Justice and Public Safety

Prepared by North Carolina Department of Health and Human Services

August 31, 2018

INTRODUCTION

Section 12F.16.(j) of North Carolina Session Law 2015-241, requires the North Carolina Controlled Substances Reporting System (CSRS) to expand its monitoring capacity by establishing data use agreements with the Prescription Behavior Surveillance System. In order to participate, the CSRS is required to establish a data use agreement with the Center of Excellence at Brandeis University no later than January 1, 2016.

Section 12F.16.(k) of North Carolina Session Law 2015-241, requires the Department of Health and Human Services, Division of Mental Health, Developmental Disabilities and Substance Abuse Services, to report on its participation with the Prescription Behavior Surveillance System to the Joint Legislative Oversight Committee on Health and Human Services and the Joint Legislative Oversight Committee on Justice and Public Safety. The first report is due beginning September 1, 2016, and every two years thereafter.

BACKGROUND

Since January 2015, the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) has been developing reports for short-term analysis and licensing boards, as well as pro-active reports to prescribers and dispensers when data in the CSRS identifies one of their patients who may be engaging in potentially harmful behavior.

DATA USE AGREEMENTS WITH THE PRESCRIPTION BEHAVIOR SURVEILLANCE SYSTEM

The PBSS project is a public health surveillance system that allows public health authorities to characterize and quantify the use and misuse of prescribed controlled substances. The main goal of PBSS is to create an early warning surveillance and evaluation tool based on de-identified, longitudinal data from state Prescription Drug Monitoring Programs (PDMPs). In 2016, DMH/DD/SAS submitted an official request to the PBSS to join the project going forward. However, PBSS had limited funding at the time and was not able to accept the request. In August 2018, we were informed by PBSS that their funding from the Centers for Disease Control and Prevention (CDC) ended and they were in the process of securing additional funding. If successful, they will contact DMH/DD/SAS.

CURRENT CSRS ANALYTICAL EFFORTS

As a result of funding appropriated by the General Assembly, DMH/DD/SAS is working with the Government Data Analytics Center (GDAC) to improve CSRS analytics and reporting. An initial Memorandum of Agreement was executed along with a scope of work. GDAC has completed practitioner and patient entity resolution to improve data quality. Work is underway to enhance and automate standard reports to licensing boards and to enhance reporting to other entities authorized under G.S. 90-113.74 to receive the data in order to address the state's opioid epidemic.

CONCLUSION

Despite continued efforts from DMH/DD/SAS to develop a successful data use agreement to participate in PBSS, it is evident the program has its own limitations. DMH/DD/SAS is committed to continuing and expanding its scope of work with GDAC to improve the accessibility and use of data contained in the CSRS to achieve the purposes specified in N.C.G.S. 90-113.71 and the state's Opioid Action Plan.