

### **MEMBERS PRESENT**

Dr. Melanie Blake, Board of Medical Examiners, Chairperson  
Dr. Robert Simpson, Board of Veterinary Medicine, Vice Chairperson  
Dr. Bhekumuzi Khumalo, Podiatry Board  
Dr. Adam Rodgers, Board of Pharmacy  
Dr. Robert Caldwell, Board of Dentistry  
Dr. Linda Tharp, Board of Optometry  
Dr. Shant Garabedian, Osteopathic Board  
Mr. Brett Reeves, Committee on Physician Assistants  
Ms. Amber Wyatt, Board of Nursing  
Mr. Jake Bynum, Board of Pharmacy Public Member

### **STAFF PRESENT**

Dr. D. Todd Bess, Director of Controlled Substance Monitoring Database  
Mr. David Silvus, Attorney, Office of General Counsel  
Mr. Jae Lim, Attorney, Office of General Counsel  
Ms. Debora Sanford, Clinical Application Coordinator  
Ms. Tracy Bacchus, Administrative Assistant

### **MEMBERS ABSENT**

Mr. Robert Ellis, Board of Medical Examiners

### **STAFF ABSENT**

Ms. Jaime Byerly, Office of Investigation

The Controlled Substance Monitoring Database (CSMD) Committee convened on Tuesday, October 12, 2021, in the Iris Room, 665 Mainstream, Nashville, TN. Dr. Blake called the meeting to order at 9:00 a.m. and the members introduced themselves.

### **Action Items**

- Ms. Grice stated she will send the 2021 Final Year-End Financial Report numbers to the committee when they are available.

### **Minutes**

Dr. Blake asked if everyone had read the minutes from the meeting on June 22, 2021, and if so could the committee have a motion to approve the minutes.

- Dr. Linda Tharp made the motion to accept the minutes from the June 22, 2021 committee meetings, and Dr. Shant Garabedian seconded the motion.
- Minutes were approved.

**Office of Investigations (OIV)– an update report was provided to members at the Committee Meeting. OIV staff were not able to present today, but Committee members are encouraged to discuss the report with OIV at the next meeting.**

### Office of Finance – 2021 Preliminary Financial Update – Alicia Grice

- Estimated Total Expenditures
  - \$1,490,501.82 in FY2021
  - \$1,666,473.69 in FY2020
  - \$1,291,781.12 in FY2019
- Estimated FY 2021 CSMD Percentage Allocated by Board
  - Board of Medical Examiners 35%
  - Board of Nursing 25%
  - Board of Pharmacy 19%
  - Board of Optometry 1.9%
  - Osteopathic Board 3.3%
  - Board of Podiatry .43%
  - Board of Veterinary Medicine 4%
  - Board of Physician Assistant 4%
  - Board of Dental Medicine 6%
- Estimated FY 2021 CSMD Expenditure Allocated by Board
  - Board of Medical Examiners \$527,102.49
  - Board of Nursing \$373,119.20
  - Board of Pharmacy \$289,649.19
  - Board of Optometry \$29,451.07
  - Osteopathic Board \$47,942.08
  - Board of Podiatry \$6,467.52
  - Board of Veterinary Medicine \$60,725.19
  - Board of Physician Assistant \$64,653.45
  - Board of Dental Medicine \$91,391.63
- Dr. Blake asked about the State Professional Services and Ms. Grice stated she would have to get this information back to the committee once the final FY closeout numbers are back to the department.

### Office of Informatics and Analytics Update on Stimulants– Dr. Allison Roberts

The Committee had requested an update on stimulants. Dr. Roberts discussed the following topics:

- Introduction to Data Sources
  - Prescriptions: Controlled Substances Monitoring Database (CSMD), 2016-2020
  - Deaths: Vital Records Death Statistical File
- Stimulant Prescription Trends
  - Stimulants are prescribed in Schedule II (most regulated)
    - Primarily indicated for Attention Deficit Disorder (ADD)
    - Most commonly prescribed
  - Stimulants Schedule III and IV (least regulated)
    - Primarily indicated for weight loss and narcolepsy treatment
    - Schedule III stimulants are the most uncommon
  - Dr. Roberts provided the Committee the CSMD breakdown by the following:
    - Stimulants by year and class
    - Distribution by Schedule and Gender

- Distribution of Stimulants by Schedule and Age Group
- Distribution by Schedule and Payment type
- Trend in Fatal Overdose for Cocaine and Methamphetamine (2016-2020)
- Percent of Fatal Overdoses that involved a Stimulant (2016 -2020)
- Conclusions:
  - Stimulant prescriptions have stayed stable over time
    - Schedule II drugs were the most frequently prescribed, most commonly in metropolitan regions
    - Children 10-17 received the most Schedule II stimulants, though the number was decreasing
  - Stimulant deaths are on the rise
    - Particularly those involving methamphetamine
    - methamphetamine was involved in 31.5% of all fatal overdoses in 2020

**Office of Informatics and Analytics Drug Overdose Deaths Update – Dr. Sutapa Mukhopadhyay**

Dr. Mukhopadhyay discussed the following topics:

- Data Sources used for this report
  - **Prescriptions:** Controlled Substances Monitoring Database (CSMD)
  - **Deaths:** Death Statistical File
  - **Link to the report:** [2020 Overdose Death Report](#)
- Tennessee has seen an 86% increase in drug overdose deaths from 2016 to 2020
- Drug overdose deaths increasing despite success in limiting opioid and benzodiazepine prescribing
- Overdose increase driven by illicit fentanyl and stimulants
- Demographics of overdose are changing
- Many decedents still encounter the healthcare system before death

Prescription History Prior to Overdose Death (2016 – 2020)

Percent who filled any prescription in the Tennessee CSMD within 60 days of death by type of overdose death among all individuals who died by year, 2016-2020

Overdose Death	2016 (n=1,631)	2017 (n=1,776)	2018 (n=1,818)	2019 (n=2,089)	2020 (n=3,032)	Percent Difference b
All Drug	50	44	40	36	32	-18
Opioid	51	46	41	36	31	-20
Pain Relievers (per CDC Definition, includes methadone)	61	60	55	49	49	-12
Heroin	35	30	32	30	29	-6
Fentanyl	38	32	29	29	26	-12
Benzodiazepine	59	60	64	55	52	-7
Opioid and Benzodiazepine	60	58	62	55	51	-9

**b Difference between 2020 and 2016**

Percent who filled a prescription for an opioid or benzodiazepine in the Tennessee CSMD within 60 days of death by type of overdose death among all individuals who died by year, 2016-2020 (n<sub>total</sub>=10,346, n<sub>linked</sub>=8,979)<sup>a</sup>

Overdose Death	Opioid prescription filled						Benzodiazepine prescription filled					
	2016	2017	2018	2019	2020	Percent Difference <sup>b</sup>	2016	2017	2018	2019	2020	Percent Difference <sup>b</sup>
All Drug	40	35	28	23	19	-21	30	22	21	15	12	-18
Opioid	42	38	29	24	19	-23	31	23	21	15	12	-19
Pain Relievers	52	52	42	37	35	-17	39	32	30	24	21	-18
Heroin	27	23	22	18	18	-9	19	11	14	14	9	-10
Fentanyl	28	24	19	19	15	-13	18	12	12	12	9	-9
Benzodiazepine	46	45	40	31	29	-17	44	41	49	39	32	-12
Opioid and Benzodiazepine	47	47	42	33	29	-18	44	40	47	39	31	-13

<sup>b</sup> Difference between 2020 and 2016

#### Office of General Counsel – David Silvus

- Reported prescribing cases for June 2021 through August 2021
  - Three BME cases
  - One Board of Nursing case
  - Two Pharmacy cases
  - Five Pain Management Clinic cases
- Updated the Committee on the CSMD Rules
  - Went to the Attorney General Office for review and signature
  - Attorney General has signed off
  - Rules now go to the Governor’s Office for review
  - After that, CSMD Rules will go to the General Assembly for final review and approval
- David Silvus introduced Jae Lim as the new CSMD Advisory attorney

#### CSMD Director’s Report – Dr. D. Todd Bess

The CSMD Director’s report included the following:

- Dr. Bess updated the Committee on the DEA Public Safety Alert released September 27, 2021 related to Sharp Increase in Fake Prescription Pills Containing Fentanyl and Methamphetamine.
  - DEA laboratory testing further reveals that today, two out of every five pills with fentanyl contain a potentially lethal dose.
  - Additionally, methamphetamine is increasingly being pressed into counterfeit pills.
- Appriss, Inc. is now doing business as Bamboo Health
- RxCheck will be an additional hub for interstate data sharing

- Vote needed at the next CSMD Committee Meeting on the 2022 CSMD Legislative Report
- DEA will hold Tennessee National Prescription Drug Take Back on Saturday, October 23, 2021 –10:00 a.m. to 2:00 p.m. DEA website provides information on locations [https://www.deadiversion.usdoj.gov/drug\\_disposal/takeback/](https://www.deadiversion.usdoj.gov/drug_disposal/takeback/)
- Proposed new CSMD Enhancements to add Additional Clinical Risk Indicators
  - Combination drugs classes with overlapping days
  - Benzodiazepines, opioids, and/or muscle relaxants
- Updated on Gateway Electronic Health Record (EHR) and Pharmacy System Integration Project
  - TDH received a Department of Justice's (DOJ) Bureau of Justice Assistance (BJA) grant to provide funding for a third year on this project starting January 2022.
  - TDH is working to create a system to efficiently support the audit needs of CSMD team when access to the CSMD data occurs outside of the CSMD application. One example would be accessing CSMD Data using Gateway.

Dr. Bess had Debbie Sanford, CSMD Clinical Application Coordinator, update the Committee on a new enhancement to improve communication from CSMD Data Collection to not only include a communication to central reporters, but also the contact for the DEA associated with the dispensing site.

- Updated the committee on the next CSMD Committee dates:
  - February 15, 2022
  - June 21, 2022
  - October 18, 2022
- Agenda Highlights for February 15, 2022 CSMD Committee
  - Election of Committee Chair and Vice Chair
  - Approval of the 2022 CSMD Legislative Report

The meeting adjourned at 10:29 a.m.