

# Illinois Heroin Crisis Act and Family Physicians

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Hinsdale Family Medicine Residency

Faculty Development Program

# Your speaker's disclosures

- ▶ Executive vice president, Illinois Academy of Family Physicians
- ▶ Executive director, Family Medicine Midwest Foundation
- ▶ Executive director, Family Health Foundation of Illinois
- ▶ Board member, Family Medicine for America's Health
- ▶ Board member, Healthcare Associates Credit Union
- ▶ Member, Advisory Board, Illinois Prescription Monitoring Program
- ▶ Member, DuPage Coalition Against Heroin



# Illinois Public Act 99-0480 Lali's law

- ▶ Alex Laliberti “Lali” died of heroin overdose Dec. 2008
- ▶ Chelsea Laliberti, his sister,
  - ▶ Founded [www.Live4Lali.org](http://www.Live4Lali.org)
  - ▶ Started Lake County Opioid Initiative
  - ▶ Advocated for opioid antagonist front-line availability
  - ▶ Assisted in development of DuPage Coalition Against Heroin, [www.heroindupage.org](http://www.heroindupage.org)
- ▶ Law enacted Sept. 11, 2015, over Governor Rauner’s amendatory veto <http://www.ilga.gov/legislation/publicacts/99/099-0480.htm>
- ▶ Law takes effect immediately

# How does this law affect family physicians?

1. Prescribing opioid antagonist
  - a. You have no criminal liability for prescribing opioid antagonist
2. Prescribing opioids or not
  - a. You must document the medical necessity for amount and duration of 3 sequential 30-day prescriptions for any Schedule 2 drug
  - b. Any patient feedback in opposition to your clinical decision that prescription of controlled substance is not medically necessary shall not be basis of any adverse action (such as credentialing, contracting, licensure or employment)

# The law and FPs -- 2

## 3. Using Prescription Monitoring Program

- a. When you get your controlled substance license or renew it you will be auto-enrolled into the IL PMP. You are strongly urged to provide an email address.
- b. You may name designee as long as they employed in the same practice, group, hospital or health system. And they must be reasonably competent. And you must supervise their access.
- c. If patient goes to 3 or more prescribers and/or 3 or more pharmacies in 30 day period you will be notified (currently "6")

## 4. Use American Society of Addiction Medicine criteria for decision-making.

[www.asam.org](http://www.asam.org)

# The law and FPs -- 3

- ▶ IL PMP will have website with following:
  - ▶ Clinical guidelines from AAFP and others, <http://www.aafp.org/patient-care/public-health/pain-opioids.html>
  - ▶ Accredited CME, like IAFP Safe Prescriber, [www.iafp.com/safe-prescriber/](http://www.iafp.com/safe-prescriber/)
  - ▶ Updates of information from medical societies
  - ▶ Updates of information from CDC, FDA and others
  - ▶ Relevant medical studies on prescribing, such as Oct. 13 JAMA article, <http://www.samhsa.gov/newsroom/press-announcements/201510131100>
  - ▶ Information on drug disposal

# The law and FPs -- 4

- ▶ IL PMP peer review committee
  - ▶ Out of range prescribers notified and have 30 days to reply
  - ▶ If no response after 3 notices
  - ▶ 4 physicians, 1 APN, 1 PA, 1 OD, 1 DDS, 1 podiatrist, 3 pharmacists

# The law and patients -- 1

1. Allows Medicaid to fully cover heroin addiction treatment (Illinois currently does not pay for this)
2. Other non-ERISA health insurances must cover for use of opioid antagonist
3. Includes addiction services for acute treatment and medically necessary clinical stabilization services in Mental Health Parity.
4. Public to be provided with education on proper storage and disposal



# Other tidbits that may interest you

- ▶ Pharmacists allowed to dispense opioid antagonist after training
- ▶ First responders to emergencies must have training and access to opioid antagonists
- ▶ Schools must train and have qualified personnel to administer opioid antagonists
- ▶ Dispensers must now include address, date of birth, gender, days supply in information to IL PMP
- ▶ Dispensers must put information in IL PMP by end of next business day (now 7 days)

# Thanks for listening!

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