

**Mission:**

Eliminate substance abuse in Florida by coordinating statewide efforts to protect individuals, families, and communities from substance abuse and to treat those with addiction.

**Vision:** A future without substance abuse in Florida



**Rick Scott**  
Governor

**Celeste Philip, MD, MPH**  
Surgeon General and Secretary

## Statewide Drug Policy Advisory Council

**Department of Children & Families  
Substance Abuse and Mental Health  
1317 Winewood Blvd  
Building 6, Room 299  
Conference Room A  
April 19, 2018  
8:30AM to 4:00PM**

Welcome, Introductions and Roll Call- Dr. Jennifer Bencie, Manatee DOH, Chair

Meeting called to order at 8:30 AM by Dr. Jennifer Bencie. The following Members attended:

1. Dr. Jennifer Bencie (Chair, State Surgeon General Designee)
2. Kate West for Mary Beth Vickers (Office of Planning and Budget Designee)
3. Andy Benard (Attorney General Pam Bondi Designee)
4. Jeff Cece (Department of Children and Families Secretary Designee)
5. Patrick Mahoney (Department of Corrections Secretary Designee)
6. Ashley Schwab (Department of Juvenile Justice Secretary Designee)
7. Penny Taylor (Commissioner of Education Designee)
8. Cory Hardson for Colonel Gene Spaulding (Department of Highway Safety and Motor Vehicles Executive Director Designee)
9. Brandon Miller for Representative Cary Pigman
10. Aaron Gerson (Judiciary Member Representative)
11. Jill Gran for Mark Fontaine (Governor Appointee with expertise in substance abuse treatment)
12. Colonel John Pelleriti (Adjutant General Designee)
13. Dottie Groover-Skipper (Governor Appointee with experience in faith based services)
14. Roaya Tyson (Governor Appointee with expertise in substance abuse services)
15. Beth Rabasky for Peggy Sapp (Governor Appointee with expertise in substance abuse treatment)
16. Dr. John VanDelinder (Governor Appointee with expertise in faith based services)

**Staff:**

Nathan Dunn  
Kendra Scholtz

**Guests:**

Megan Mernoff, OPPAGA  
Nathan Dinger, FLNG-CDP  
Gregory Yevtich, FLNG-CDP  
Gary House, Florida Highway Patrol  
Christina Vracar, AHCA

Arlene Elliott, AHCA  
Beth Kidder, AHCA  
Pam King, AHCA  
Alex Glorioso, Politico  
Joe Anne Hart, Florida Dental Association

Ji"Lynda Brown, DCF  
Jessica Sims, DCF  
Aaron Parsons, Ai  
Kim Shafer, OPPAGA  
Laurie Scott, OPPAGA

Amanda Muller, DCF  
Steve McCoy, DOH  
Randolph Schilke, DOH  
Tyler Knox, EOG  
Dr. Karen Card, DOH

## Business

1. **Welcome and Introductions/Opening Remarks, Jennifer Bencie, MD**
2. **Review and Approve Meeting Minutes-** A motion and a second was made to approve the January 11, 2018 meeting minutes. Motion carried.
3. **Action Plan/Strategy Survey Results and Discussion, Jennifer Bencie, MD** Participation in the survey seemed low and there was a discussion about the benefit of sending the survey out again.
4. **Agency Updates**

**Jeff Cece with the Department of Children and Families (DCF)** reported that the agency is developing a public awareness campaign. The Opioid SDR Grant from Substance Abuse and Mental Health Services Administration (SAMHSA) was authorized for a second year which will fund Medication Assisted Treatment (MAT) including wrap-around services to support individuals on MAT. The agency is also looking at training behavioral health providers on the use of MAT and training first responders to recognize and respond to drug overdoses. They are providing family members of those susceptible to overdoses with Narcan kits. Also, the Department of Health recently got a \$5 million appropriation to provide Naloxone kits to first responders. Best practices and resources for hospitals have been identified and provided to the Florida Hospital Association. The agency will continue to compile and share lessons learned from hospital pilot sites. The plan also includes the expansion of the use of peer recovery support services.

**Patrick Mahoney with the Florida Department of Corrections (FDC)** shared that the agency received \$500k appropriation for Vivitrol in community-based treatment contracts for offenders on supervision. FDC will have additional updates at the next DPAC quarterly meeting.

**Nathan Dunn with the Florida Department of Health (DOH)** explained that with the passage of HB21 there are now Prescription limits and continuing education requirements for prescribing of controlled substances. The bill also requires consulting the PDMD before prescribing. The Multidisciplinary Board Workgroup Discussion on CS/CS/CS HB 21 met on April 18, 2018 to discuss the Requirement for Continuing Education on Controlled Substance Prescribing, Updates to Disciplinary guidelines and penalties, Adoption of Rules Establishing Guidelines for Acute Pain, Standards of Practice for dispensing controlled substances, Dispensing Practitioner Requirements, and Mandatory Consultation of the PDMP. There were participants from Board of Dentistry, Board of Medicine, Board of Nursing, Board of Osteopathic Medicine, Board of Pharmacy, Board of Podiatric Medicine, and Board of Optometry. The Florida Enhanced State Opioid Overdoses Surveillance (FL-ESOOS) is a three-year CDC grant, administered by the DOH Bureau of Emergency Medical Oversight, supports states with a high burden of drug overdoses. The purpose is to improve timeliness of fatal and nonfatal opioid surveillance and dissemination of findings to key stakeholders who are working to prevent or respond to opioid overdoses. A majority of the funding will be used to support medical examiners and coroners (ME/Cs) to conduct timely and comprehensive toxicology testing of suspected drug overdose deaths. The program recently established a presence on the DOH website. The drug poisoning death indicator is now available in CHARTS: <http://www.flhealthcharts.com/charts/InjuryAndViolence/default.aspx> There is both trend and county specific information provided.

On March 19, 2018, the NAS Data Workgroup met to continue their work on data sources and interpretations of Neonatal Abstinence Syndrome (NAS) data. The pilot project is looking at NAS codes for ICD-10 in three hospitals: Baptist Medical (Duval), Tampa General Hospital (Hillsborough) and

Winnie Palmer (Orange). Currently, 116 cases from 2016 are being reviewed that have either a P96.1 or P04.49 ICD-10 code. There are four abstractors from DOH and USF. The goal of the project is to evaluate how well ICD-10 code P96.1 is capturing NAS cases, and whether any NAS cases are showing up under the P04.49 codes.

The Florida Hospital Association (FHA) is developing a collaboration project with DOH and AHCA. Several existing initiatives targeting NAS have been identified. These included the state interagency workgroup hosted by DOH, a pilot initiative to improve identification of babies born with NAS in a couple of counties and a planned project by the Florida Perinatal Quality Collaborative. The Florida Chapter of American Academy of Pediatrics is forming a task force to look at what they can do as a chapter to address opioids, focusing on neonates and adolescents. Alicia Adams, the Executive Director, will provide updates as the plan develops. Erin Hough with DCF recently joined the conversation and is including the requirements around SAFE plans and the need to educate various groups about what is required.

**The Department of Juvenile Justice (DJJ)** had no updates.

**The Department of Highway Safety and Motor Vehicles (FHP)** shared that one of their main responsibilities is to intercept and disrupt criminal activity. Of the 1,900 troopers around the state, 75 of those patrol specifically for drug interdiction. And of those 75, 31 are K9 units. The work of these units is consistent with the mission of this organization. Recently FHP was able to receive 250 doses of Narcan through a grant and the agency purchased 444 additional doses. These have been strategically deployed around the state. Due to the medical marijuana legislation, they have increased drug recognition experts with a goal of having 300 around the state. Recently purchased 41 TruNarc Narcotic Analyzer devices. Officer uses it to scan suspicious packages to see what's in them; this way, the officer is not exposed to the substance(s); also keeps nearby civilians safe. The device scans in real time and can identify multiple substances at once; prints out a graph. The substances are still sent to a lab and analyzed. Each costs \$20-25k. Council requests that staff send out an email with a description of the device. Dr. Bencie: Regional Emergency Response Advisors (RERAs) are the liaisons to any unknown substances that need to be delivered to the state laboratories for assessment

**FDLE** - Not present

**Pam King with the Agency for Health Care Administration (AHCA)** provided a presentation regarding the Health Information Exchange Project. The project was implemented in 2010, when AHCA was designated as the governing body to implement a data-sharing capability between health providers in Florida. The first services came out in 2011. Florida has a federated system. Instead of just one model, they have a suite of services that allows varying levels of exchange between providers (i.e. email, exchanging information through EHR systems). The new system allows information to come from 220 acute-care hospitals regarding admits and discharges. They can identify overdoses better with the data collected; there is a correlation between the number of hospital visits before an overdose death. Hospitals are exploring ways to use the data to help prevent overdose deaths and help patients overcome addiction issues. Florida is an opt-in state, which means the patient has to give consent for the sharing of their information. They have been working with DOH to identify gaps in the information, looking at the information from a global perspective. One piece that AHCA is missing is the data regarding when EMS provides treatment to a patient in their home. Once AHCA has the data, they will be able to share it with the patient's primary care provider.

**Beth Kidder, AHCA Deputy Secretary for Division of Medicaid** provided an update. They serve ~4 million children, disabled adults, pregnant women, etc. In February 2018, they limited prescriptions for short-acting narcotics treating acute pain to a 7-day supply. In March 2018, they limited prescriptions for new opioid patients to 90mg/day. AHCA does not reimburse more than 2 long-acting opioids at the same time. They alert pharmacists if a patient has a prescription for an opioid and a benzodiazepine at the same time; they're still considering the data for this. AHCA requires prescribers to order a short-acting opioid before considering a long-acting opioid. In February 2018, they eliminated prior authorization for valtrexone and bontrol.

**Andy Benard, Office of the Attorney General** provided an update. NAS task force formed in 2012, produced a report; trying to bring together public and private entities; made 15 recommendations based on hearings held around the state to serve as a roadmap moving forward. DCF and DOH are both involved in revisiting these recommendations. They started borndrugfree.org; and there are current discussion about ways to move this forward. We are discussing how to add anti-opioid abuse education in schools FOMA and FMA have been raising awareness about drug screening pregnant patients. The goal is to keep the baby with the mother and allow them to get treated together. Florida Nursing Association was part of the task force; they are finishing up a toolkit for nurses and will work on developing a speakers outreach that will target nurses and the general public. NAS was previously not part of the list of reportable diseases/events, but now it is. Will continue to work on prevention messaging. He has had continued contact with Dr. Mike Kriegal to consider holistic treatment options and the implications with the insurance industry. The Department of Agriculture has recently seen issues with Kratom and salmonella. Suboxone is becoming a big issue in the prison system; perhaps the council could look into this. How does the Council proceed past January 2019? Use the DPAC Annual Report to pass along information to the next administration.

**Penny Taylor with the Department of Education** provided an update. There are four areas of prevention. First, Comprehensive health education: There is not a course requirement for students, so children get health education in fragmented, different ways. 1% of students are in stand-alone health education courses where the teacher is a certified health educator trained in pedagogy. We have worked to embed health information through students' courses. Districts are moving toward requiring a course in health education. Every year, they do a statewide summer academy. Second, the Youth Risk Behavior Survey: We work with DOH and they make infographics from the data. We are using survey data to create lessons/activities based on standards to implement into classrooms. This allows students to see the data and understand the norms. Third, School Health Profiles: The survey is required by CDC and distributed statewide every other year. This collects information about what teachers want as it relates to drug prevention. Fourth, building healthy district: Whole school, Whole community, Whole child started almost 10 years ago. A program with training on drug prevention is being done with Superintendents. At this point 45 of 67 Districts have gone through the needs assessment. Partners include Superintendents Association, Healthy Kids Corporation, DOH, Florida National for Healthy Kids

**Nate Dinger with the Florida National Guard** shared that they work in school systems and partner with anti-drug coalitions/task forces. They are helping students develop prevention programs within their schools. They are creating social media campaigns. Night Vision is their primary prevention program. They have reached over 10,000 students this year; October is the busiest month. This is a Federally funded program.

**Aaron Gerson with the State Courts System** shared that they received funds distributed by Trial Court Budget Commission (TCBC). Additional information may be available by the next DPAC meeting regarding the distribution of these funds. There are currently 94 Drug Courts.

**Representative Cary Pigman's Legislative Assistant Brandon Miller** shared that HB21 was one of the biggest pieces of legislation regarding health care. He has a great working relationship with Legislative Affairs Directors at AHCA and DOH.

**Jill Gran from the Florida Alcohol & Drug Abuse Association** provided several updates related to legislation. Changes in the PDMP and acute care prescribing were included in HB21 The bill also included funds that provided legislative authorization at the state-targeted response grant and appropriated funding for expanded capacity The items that didn't pass this session that were included in the recommendation: parity between Federal and state standards, needle exchange. Addiction medicine graduate medical education not funded for FY 2018–2019. They started addressing gaps; created a youth/adolescent division focused on prevention, treatment, juvenile justice. They are working to appropriately associate mental health and addiction/drug use. The agencies do a good job in their field, but what's missing is continual overlap and information sharing; to address this, Senator Rouson sponsored legislation to reinstate the Office of Drug Control. There is a big workforce problem in behavioral health; some of this has to do with background screening. They will have a big announcement next week (April 25) in DC about a partnership with the Florida Hospital Association and

the Florida College of Emergency Physicians regarding these gaps. Housing is a big factor in overcoming addiction in the population.

An update was provided for **Informed Families**. They run four campaigns throughout the school year. They are currently focused on Safe Parties, which focuses on messages about drinking during prom time. They maintain prevention programs throughout the community, primarily in schools. Their most pronounced program in the last 2-3 years is the Lock Your Meds Program; five other states have adopted it as their prescription drug education program. There is a lack of coordination/a coordinator which is an issue in school boards.

**Dr. John Van Delinder** - No report

**Dotti Groover-Skipper with the Salvation Army** shared that they provide housing short term through our adult rehabilitation centers. After people leave their facilities, there is a challenge with where they can go for housing. They are trying to get to the root of problem and they are building their first female adult rehab center in Florida which opens in May in Tampa Bay area. There are prevention components in the programs they provide to youth, but funding is an issue.

The group proposed the next meeting date: Thursday, July 12 in the Supreme Court annex.

## 5. Additional Updates

**Paul Runk, DOH Legislative Affairs Director** shared that in reaction to the opioid crisis, Governor Scott asked DOH to draft a bill; the bill was adopted and will take effect on July 1. The law requires continuing education (at least 2 hours) for people who prescribe controlled substances in Florida; Nurse Practitioners are still at 3 hours. Emergency physicians, family doctors, and Florida Medical Association all have medical courses that can be taken; Osteopathic physicians have a course as well. Sets prescription limits for patients with acute pain, limiting the initial prescription to a 3-day supply (7 days in certain circumstances). Exceptions for traumatic injuries, cancer patients, hospice care. Requires mandatory check of Prescription Drug Monitoring Program by prescribers and dispensers. The new program integrates data into the Electronic Health Systems and is already used in 40 states. It should be online in Florida by July 1. A DBPR bill from 2016 required DOH to develop a pamphlet about the dangers of opioid abuse and how to deal with those prescriptions and identify signs of abuse; available online and in print.

**Amanda Muller with, DCF** explained that through a grant, in eight counties they are implementing life skills training programs in middle schools and high schools. They are continuing with overdose and Naloxone training in those counties. They train agencies with Prevention, Training and Skill (PTS) funds. Currently there are 58 agencies handing out Naloxone throughout the state; ~1,000 overdose reversals so far. Most of these are friends and family members who are already on site when the overdose occurs. With the PFS grant, they're starting a pilot at seven hospitals. Memorial Healthcare in Broward is using Peer Specialists in their emergency department to engage individuals who are there for an overdose or other drug-related issues to see if they're ready for treatment; if so, they can receive Buprenorphine in the emergency department; they are then linked to other services; have had ~130 inductions on MAT since starting in October. The State Epi Workgroup meeting is June 12. It meets twice a year. They are working on a statewide website to direct people to treatment resources

**Steve McCoy, DOH Administrator, Bureau of Emergency Medical Oversight** shared about HB249 from last year; the bill said that EMS agents may report overdose information (not a requirement); it outlined a couple of ways for reporting. There are two versions of EMSTARS right now; trying to get people to move to real-time submissions. They are collecting 90% of the emergency call volume. Collier County Sheriff's Office is going to incorporate their data into the bio-spatial platform. Started to treat overdoses as a syndrome; completed pilot phases with Manatee County, Palm Beach County, and Leon County. Washington/Baltimore HIDTA ODMAPS - Collects data from EMS/law enforcement/fire. This information is useful for law enforcement agencies. Bio-Preparedness platform now available, gives monthly updates. Quarterly report for DCF/FFC/DPAC currently getting approval and will be sent to all the partners.

**Karen Card, DOH Reporting Unit Manager, Division of Emergency Preparedness and Community Support, Bureau of Emergency Medical Oversight** shared about the Opioid Surveillance Grant also known as the Enhanced State Opioid Overdose Surveillance (ESOOS). Florida and 32 other states are implementing this to make more timely and comprehensive data available on fatal/non-fatal opioid overdoses and the risk factors associated with fatal overdoses. Submitting their first annual report to CDC by December 2018. They now have two records abstractors who started with the Department last month. To get information to the public and to key stakeholders, they created a webpage to make research and reporting products available: <http://www.floridahealth.gov/statistics-and-data/fl-esoos/index.html>. The grant came with almost \$200,000 in supplemental funds that were intended to go to medical examiners to enhance toxicology testing. The national ESOOS annual meeting is next month in Atlanta. The program has a unique phone number: 850-245-4411

**6. Public Comment/ Open Discussion Next Steps**

There were no public comments. A national opioid summit was held in February, hosted by U.S. Attorney General Jeff Sessions. There was a national drug abuse and heroin summit on April 2; Dr. Philip and Secretary Carrol attended. The group discussed topics and speakers for the next meeting. A speaker will come to present/demonstrate the TruNarc device

**7. The meeting was adjourned at approximately 2:15pm**