



2015-2016 General Assembly

HOUSE BILL 97: 2015 Appropriations Act, Sec. 12F.16(m)-(r): Statewide Strategic Plan/Creation of Prescription Drug Abuse Advisory Committee

Committee:	Date:
Introduced by:	Prepared by: Augustus Willis
Analysis of: Secs. 12F.16(m) through (r) of S.L. 2015-241	Staff Attorney

SUMMARY: Secs. 12F.16.(m) through (r) of S.L. 2015-241 create the Prescription Drug Abuse Advisory Committee (Committee), housed in and staffed by the Department of Health and Human Services (DHHS). The Committee is directed to develop and implement a statewide strategic plan to combat the problem of prescription drug abuse. In addition to any persons designated by the Secretary of Health and Human Services, the Committee must include representatives from the following:

- The Division of Medical Assistance, DHHS.
- The Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, DHHS.
- The Division of Public Health, DHHS.
- The Rural Health Section of the Division of Public Health, DHHS.
- The State Bureau of Investigation.
- The Attorney General's Office.
- The following health care regulatory boards with oversight of prescribers and dispensers of prescription drugs: (i) North Carolina Board of Dental Examiners; (ii) North Carolina Board of Nursing; (iii) North Carolina Board of Podiatry Examiners; (iv) North Carolina Medical Board; and (v) North Carolina Board of Pharmacy.
- The UNC Injury Prevention Research Center.
- The substance abuse treatment community.
- Governor's Institute on Substance Abuse, Inc.
- The Department of Insurance's drug take-back program.

After the Committee develops the strategic plan, it becomes the State's steering committee to monitor achievement of strategic objectives and receive regular reports on progress made toward reducing prescription drug abuse in North Carolina.

In developing the strategic plan, the Committee must complete, at minimum, the following steps:

- Identify a mission and vision for North Carolina's system to reduce and prevent prescription drug abuse.

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- *Scan the internal and external environment for the system's strengths, weaknesses, opportunities, and challenges (a SWOC analysis).*
- *Compare threats and opportunities to the system's ability to meet challenges and seize opportunities (a GAP analysis).*
- *Identify strategic issues based on SWOC and GAP analyses.*
- *Formulate strategies and resources for addressing these issues.*

The strategic plan for reducing prescription drug abuse must also include three to five strategic goals that are outcome-oriented and measurable. Each of these goals must be connected with objectives supported by the following five mechanisms of the system:

- *Oversight and regulation of prescribers and dispensers by State health care regulatory boards.*
- *Operation of the Controlled Substances Reporting System (CSRS).*
- *Operation of the Medicaid lock-in program to review behavior of patients with high use of prescribed controlled substances.*
- *Enforcement of State laws for the misuse and diversion of controlled substances.*
- *Any other appropriate mechanism identified by the Committee.*

In consultation with the Committee, DHHS must develop and implement a formalized performance management system that connects the goals and objectives identified in the statewide strategic plan to operations of the CSRS and Medicaid lock-in program, law enforcement activities, and oversight of prescribers and dispensers. This performance management system must be designed to monitor progress toward achieving goals and objectives and must recommend actions to be taken when performance falls short.

Beginning on December 1, 2016, and annually thereafter, DHHS must submit a report on the performance of North Carolina's system for monitoring prescription drug abuse to the Joint Legislative Oversight Committee on Health and Human Services and the Joint Legislative Oversight Committee on Justice and Public Safety.

These sections became effective September 18, 2015.