

Health Care Highlights[©]

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Good morning! The second interim session of the 83rd West Virginia Legislature took place last week (May 20-22) and incorporated a special session called by Gov. Jim Justice. There are four additional interim meetings scheduled through the end of the year (see below), and Statehouse observers expect at least one additional special session to be scheduled.

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Upcoming Interim Meetings

June 24-26
September 16-18
November 11-13
December 9-11

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Health Care Highlights

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Governor Calls Special Session

Gov. Jim Justice called for a special session to coincide with May interim committee meetings, with his official proclamation limiting items to be considered to establishment of a Department of the Arts, Culture & History; survivor benefits for the families of first responders killed in the line of duty, retroactive to Jan. 1; technical cleanup on several bills passed during the 2018 regular session, including a bill allowing for a physical therapy licensure compact; and supplemental appropriations for the state Department of Health and Human Resources for tobacco education and the state Department of Military Affairs and Public Safety. (The latter presented an exhaustive review of its functions and achievements to the Joint Committee on Government Operations on Monday afternoon.)

Notably absent from the “call” was any item dealing with **SB 273**, commonly known as the Opioid Reduction Act; sports betting; the future of the Public Employees Insurance Agency; and any action related to implementation of the Medical Cannabis Act.

Health care associations and individual practitioners, while applauding the overall bill, take issue with some provisions of **SB 273**, among them a requirement for a physical examination every 90 days for patients who continue to be prescribed any Schedule II controlled substance – not just opioids.

Implementation of the medical marijuana law passed in 2017 has stalled while state officials struggle to identify a financial plan. Banks are reluctant to process funds from medical marijuana because it is still illegal under federal law. State Treasurer John Perdue has proposed two potential solutions, each of which would require legislative action. Meanwhile, contrary to the state Constitution, House Democrats led by Delegate Mike Pushkin nevertheless introduced a bill establishing a Medical Cannabis Banking Act, but the bill was triple-referenced to committees that did not meet.

Proponents are continuing to circulate a petition in hopes of gathering enough lawmakers’ signatures to force Gov. Justice to call another special session on the medical cannabis issue, perhaps as early as next month. A three-fifths majority is required in both houses and, according to media reports, the Senate met that threshold.

Quick Response Teams Expanding Statewide

A Quick Response Team (QRT) should be up and running in the city of Charleston later this week, modeled after a highly successful Huntington program that has drawn national attention. Susie Mullens, interim director of the state Office of Drug Control Policy, told the Legislative Oversight Commission on Health and Human Resources Accountability (LOCHHRA) last Monday that her goal is to help establish a QRT in every West Virginia city that needs one.

The state Department of Health and Human Resources on May 10 announced \$750,000 in available funding to establish QRTs statewide. Proposals must be submitted by June 5. QRTs are composed of emergency service personnel, law enforcement officers and a substance abuse treatment or recovery provider who contact overdose survivors within 24 to 72 hours to try to get them into a treatment program. The teams’ goal is to reduce repeat overdoses and overdose fatalities, and to increase the number of people who participate in treatment for substance abuse disorder.

Huntington’s QRTs operate five days a week, Mullens said, under three-year federal grants from the Department of Justice and Health and Human Services’ Office of Minority Health. They are modeled after a program established in Colerain Township, Ohio, which realized a 40% decline in overdoses and a 70% participation rate in treatment programs. In Huntington, the overdose rate has been cut in half.

Charleston and Kanawha County, identified as having the second highest overdose rates in the state, received \$263,000 to get its QRT up and running. At this time, the QRT funding is one-time, one-year funding which must be expended by July 1, 2019. It is a part of an effort mandated in **SB 272**, passed during the 2018 regular session, which mandates the Office of Drug Control Policy to establish a four-year Community Overdose Response Demonstration Pilot Project for communities across the state.

“We are moving as fast as we can,” Mullens told LOCHHRA. “This will bring a lot of hope to communities that are able to establish QRTs, and it will get help to a lot of individuals.” Huntington’s experience was highlighted in an article published last week in *The Christian Science Monitor*, headlined [“With compassionate outreach, a city cuts its drug overdose rate in half.”](#)

DHHR Seeks Recertification at Sharpe

The state Department of Health and Human Resources has submitted a Medicare enrollment application for recertification of William R. Sharpe Jr. Hospital to the Centers for Medicare & Medicaid Services. Cabinet Secretary Bill Crouch also told the Legislative Oversight Commission on Health and Human Resources Accountability last Monday that DHHR and its consultant, The Greeley Company of Boston, plan to notify CMS of survey readiness by June 30.

DHHR lost its CMS certification at Sharpe last fall, in large part because of a lack of documentation in patient treatment plans. Officials have blamed an antiquated electronic health record/documentation system, poor fiber optic connectivity and software, and inconsistent training, education, mentoring and leadership among staff, administration and medical providers. The lost certification resulted in the transfer of more than 60 patients away from Sharpe and a greater reliance on forensic patients, or those referred to the hospital through the court system. (Civil commitments typically come from physicians, behavioral health centers or hospitals.)

“We’ve learned a lot and the care is going to be better when we do get recertified,” Crouch vowed. “We will be a better facility for this.”

DHHR hired a new medical director at Sharpe, and filled key vacancies, including the director of social services and the director of clinical compliance/quality. The hospital still seeks a clinical director of nursing and a dietitian. Still, issues remain. The EHR system was modified, not replaced. And Sharpe’s reliance on high-reimbursement forensic patients has drawn patients away from Highland-Clarksburg Hospital, leading to financial strain at the former United Hospital Center facility. CEO Mike Casdorff told the committee his facility currently has 52 forensic patients, down from 70.

The state supported the \$36 million renovation at the hospital, which now provides 300 jobs and a \$16 million annual payroll, even as it was funding the addition of 50 forensic beds at Sharpe. Crouch acknowledged the apparent discrepancy, but could not explain it. “It’s been tough on both of us,” he said. “I’m trying to do the right thing here for them and the state.” Casdorff said Highland-Clarksburg is converting some beds for substance abuse treatment.

Budget Adds Funding for SUD Treatment

Cabinet Secretary Bill Crouch last Monday provided a breakdown of a \$10 million supplemental appropriation for DHHR to the Joint Committee on Finance. The funding, approved on the last day of the 2018 regular session, has been allocated to a variety of projects combating substance use disorder (SUD) “We have a serious, serious problem going on – which have become my top priority,” he told lawmakers.

Among the allocations:

- \$1 million for naloxone for first responders in eight high-risk counties, including Berkeley, Cabell, Harrison, Kanawha, Mercer, Monongalia, Ohio and Raleigh. EMS personnel have received 34,300 doses of naloxone.
- \$500,000 to increase the number of hospitals that deliver immediate postpartum long-acting reversible contraception (LARC) for women with substance use disorder.
- \$500,000 for reproductive health care at harm reduction program (HRP) sites, with an emphasis on LARC.
- \$750,000 for children’s mobile crisis response, linking children and families/caregivers to services in the community, involving families in treatment, and avoiding unnecessary hospitalization or residential placement. This is currently available in the FMRS and United Summit Center catchment areas.
- \$1.45 million for Partnerships for Success, part of a five-year federal grant to reduce underage drinking and misuse of prescription drugs among youths in 12 high-risk counties, including Berkeley, Brooke, Hancock, Harrison, Jefferson, McDowell, Mingo, Monongalia, Roane, Tyler, Wayne and Wyoming.
- \$600,000 for Law Enforcement Assisted Diversion programs to divert adults with SUD from the criminal justice system to community-based services.
- \$140,000 to the WV Alliance for Recovery Residences.
- \$100,000 for Collegiate Recovery Programs.
- \$1 million for Quick Response Teams.
- \$150,000 for the WV Peer Network of recovery coaches.
- \$500,000 to higher education support for those in recovery.
- \$500,000 to expand Drug Free Moms and Babies programs.
- \$2.59 million for a County Recovery and Empowerment Initiative.

PEIA Public Hearings Continue

The Legislative & Public Outreach Committee of the PEIA Stability Task Force continues its series of public meetings this week, with stops planned for 6:30 p.m. Thursday at Pineville Middle School and Logan High School.

These meetings are part of 21 public outreach meetings being held across the state, with the goal of allowing West Virginians to voice their experiences with the Public Employees Insurance Agency and suggest ways to improve it. The public outreach subcommittee will relay the feedback received at these meetings to the larger task force, which Gov. Jim Justice established to find a long-term solution to the issues facing PEIA.

Committee convener Helen Matheny, director of collaborative relations and initiatives at WVU Health Science Center, outlines Task Force operations during a May 20 meeting of the Select Committee on PEIA, Seniors and Long-Term Care. Her committee is one of three organized under the 29-member Task Force. The others are a Coverage & Plan Review Committee and the Cost & Revenue Committee.

Matheny acknowledged the committees are still at the information gathering and research stage. Common themes heard to date include concerns about accessibility of health care, including specialists; affordability of premiums, deductibles and copays; and predictability of drug formularies and prior-authorization requirements. As to wellness programs, “They would prefer incentives, rather than penalties,” Matheny said, a reference to the poorly received 360 Program.

Other public meetings are planned for:

- June 2 Elkins — 11 a.m. Phil Gainer Community Center
- June 5 West Union — 6:30 p.m. Doddridge County High School
- June 8 Morgantown — 6:30 p.m. West Virginia University (Location TBD)
- June 9 Martinsburg — 11 a.m. Spring Mills High School
- June 11 Charleston — 6:30 p.m. The State Culture Center

Those who wish to submit feedback online can do so at peiataskforce.wv.gov. Those who wish to receive updates on social media can follow the WV PEIA Task Force Facebook page and @WVPEIATaskForce Twitter account.

Hepatitis A Vaccinations Available

The state Department of Health and Human Resources’ Bureau for Public Health has requested the Kanawha-Charleston Health Department provide hepatitis A vaccination clinics for restaurant and food service employees in Kanawha and Putnam counties, where most of the local outbreak has occurred.

“National data indicate that drug use among the food service industry is about 19.1 percent,” said Dr. Rahul Gupta, BPH commissioner and state health officer. “This is a proactive measure to vaccinate a high-risk group in accordance with the Centers for Disease Control and Prevention guidelines

Eight food establishments in Kanawha, Putnam and Cabell counties have been identified as having a food service worker confirmed with hepatitis A. In each of those instances, a history of drug use was identified in an employee. To date, no customer of any of the food establishments impacted thus far have become ill by eating food provided by the facility.

Kanawha County Commission President Kent Carper asked BPH to intervene in the local outbreak on May 7. KCHD will provide mass vaccination clinics to help accommodate food service employee schedules from 8 a.m. to 6 p.m. Wednesday at Charleston Civic Center and Friday at St. George Conference Center (Court and Lee Streets). “I have directed the purchase of an additional \$550,000 in hepatitis A vaccines to support these clinics and to help eliminate cost as a barrier of getting the vaccine. We anticipate this outbreak will continue for quite some time as it has in other states and we must remain vigilant in our efforts to protect the public’s health,” Gupta said.

Statewide, there have been 106 confirmed, probable, or suspected cases of hepatitis A. Most (87%) of those cases in have occurred in Kanawha (59) and Putnam (28) counties, with Cabell at 10, and Boone, Jackson, Lincoln, Wayne and Wyoming counties having less than five cases each. High risk groups needing the vaccine include persons who use injection and non-injection drugs, persons who are homeless, men who have sex with men, and persons who were incarcerated within the past six weeks. Additionally, persons who have ongoing or direct contact with individuals in these

Board President Elected to National Post

Dr. Ahmed D. Faheem, president of the West Virginia Board of Medicine, has been elected to a two-year term on the Nominating Committee of the Federation of State Medical Boards (FSMB). The election took place during the FSMB's 106th annual meeting April 26-28 in Charlotte, NC. Faheem, a Beckley psychiatrist, was formally elected to the post on April 28 and officially began his duties on May 1. His term continues through April 30, 2020.

"I am honored to serve in this important capacity for such a prestigious national organization," Faheem said. "My goal is to encourage the right candidates to seek leadership opportunities and assist in their ability to succeed in guiding physicians and protecting the public."

Faheem, originally from India, completed medical and residency training in India, England and the United States. He is board certified by the American Board of Psychiatry and Neurology in General Psychiatry, Geriatric Psychiatry, Addiction Psychiatry, and by the American Board of Adolescent Psychiatry. In addition to a full-time private practice, Faheem is a clinical professor in the Department of Psychiatry at West Virginia University in Morgantown, and medical director of the Adolescent Program and associate medical director of the Adult Addiction and Geriatric Program at Appalachian Regional Hospital in Beckley.

Faheem served on the West Virginia Board of Medicine from 1993 to 2002. He rejoined the board in November 2010 and his current appointment expires in September 2019. The FSMB represents 70 state medical and osteopathic regulatory boards within the U.S., its territories and the District of Columbia.

Senate Confirms Health Care Appointees

The state Senate last Monday confirmed several health-related appointments by Gov. Jim Justice. They include:

West Virginia Children's Health Insurance Board

- Lisa M. Costello, Morgantown, for the term ending June 30, 2019.

West Virginia United Health System Board of Directors

- Kevin J. Craig, Huntington, for the term ending Oct. 15, 2022;
- Bernard P. Twigg, Glen Dale, for the term ending Oct. 15, 2020;
- Ellen S. Cappellanti, Charleston, for the term ending Oct. 15, 2018.

Quotes of Note ...

... "The WV Center for End-of-Life Care did not end operations on March 28 as anticipated. In the final week of March, the WVU Health Sciences Center stepped in and agreed to continue funding it until a more permanent solution could be found. The center's 800 number, website and registry remain quite active, and the center received 1,190 forms to its registry in March. Since inception, the center has received 85,588 forms."

- Dr. Alvin Moss, in an email to ***Health Care Highlights*** about a report in last month's issue about the Center for End-of-Life Care's demise because of cutbacks in the state's fiscal 2019 budget, which begins July 1. We're happy to report the center's ongoing and outstanding work.

... "Jeremiah's not here. He's my Google machine."

- DHHR Cabinet Secretary Bill Crouch, during a Q&A before the Legislative Oversight Commission on Health and Human Resources Accountability, regarding efforts to seek recertification for William R. Sharpe Jr. Hospital. Deputy Secretary Jeremiah Samples had left the meetings moments before.

... "I like to find a seat where I can make a quick getaway, if I need to."

- Sen. Ed Gaunch, looking for an unoccupied desk in the House Chamber prior to the start of last Monday's meeting of the Joint Committee on Finance.

... "We have the best data in the country. But, unfortunately, it's on dead people."

- Dr. Rahul Gupta, state health officer and commissioner of the Bureau for Public Health, regarding efforts to add non-fatal overdose information to state data collection efforts.

In Other Health Care Highlights ...

... Gov. Jim Justice delivered the keynote address during Saturday's 41st commencement ceremonies at the West Virginia School of Osteopathic Medicine in Lewisburg. He also received an honorary doctorate from the Dr. Michael Adelman, the school's president. "You graduates have been prepared by these great people and this great institution," Justice said. "You may go off for a while, but we want you back, right here in West Virginia. We are really, truly moving forward. This state is going to provide you with opportunities." ...

... Speaking of osteopaths, Executive Director Diana Shepard of the WV Board of Osteopathic Medicine recently was recognized by Administrators in Medicine during AIM's annual meeting in Charlotte. Congratulations! ...

... The special session last week forced cancellation of the Joint Committee on Health meeting, which had been scheduled for 1 p.m. Monday. The committee had been slated to hear a series of presentations on various aspects of school-based mental health programs for children. Participants were to include DHHR Deputy Secretary Jeremiah Samples; Christina Mullins of DHHR's Office of Maternal, Child & Family Health; Andrea Darr, director of the WV Center for Children & Justice; Sgt. D.S. Paxton, chaplain and director of executive projects for the Charleston Police Department; and Michele Blatt, assistant superintendent of the state Department of Education. ...

... Multiple organizations have joined forces to present, "Caring for babies who are drug addicted – from hospital to home," from 10 a.m. to 2 p.m. June 8 at Camden Clark Hospital in Parkersburg. Call (304) 485-0650 for information, or email kim.kramer@childhswv.org. Continuing education credit is available. ...

... The state of Maryland has joined the Interstate Medical Licensure Compact, effective on July 1, 2019. A bill passed Maryland's General Assembly on April 9 and was signed into law May 8, eventually making our border state the 25th to join the IMLC. Of our other border states, Pennsylvania has passed an IMLC law, but it is not yet fully implemented; legislation also has been introduced in Kentucky. The compact creates a streamlined process that allows physicians to become licensed in multiple states, thereby enhancing the portability of a medical license. The IMLC creates another pathway for licensure and does not otherwise change a state's existing Medical Practice Act. ...

... As we round the corner to June, a plethora of bills passed by the 2018 Legislature and signed into law by Gov. Jim Justice reach their effective date. Among them is **SB 36**, which seeks to reduce the processing time of DNA lab tests. The bill allows the WV State Police to contract with the Marshall University Forensic Science Center to process lab work related to the testing of offender samples for the Combined DNA Index System (CODIS), and DNA testing in criminal paternity cases, criminal casework, and identification of human remains. It also sets out parameters by which law enforcement and correctional officers can use reasonable force to obtain DNA samples, and allows for the collection of non-blood sampling of DNA (mouth swabs). In addition, the bill creates the Sexual Assault Forensic Examination Commission, which will establish a group of subject matter experts to outline best practices for the submission, retention, and disposition of sexual assault forensic examination kits that are collected by health care providers. The commission will develop legislative rules that will determine time frames for submission of rape kits in the possession of law enforcement and protocol for the storage of rape kits and DNA samples. "The average waiting time for the testing of a rape kit is 440 days, which is just terrible and unacceptable," bill sponsor Sen. Mike Woelfel noted in a news release. The new law goes into effect June 5. ...

... Mon Health System named Thomas Senker interim CEO, effective April 5, while a national search continues. Former President and CEO Darryl Duncan took a "leave of absence," according to the *Dominion Post*, after more than two dozen physicians complained about his leadership style, leading to the resignations of several key administrators. Interim Chief Operating Officer Dottie Oaks, who came out of retirement last November to lend a hand during a "transitional period," resigned in March. Senker previously had served as president and CEO of Mon Health from 1983 to 1999. ...

Our Next Issue

The next issue of *Health Care Highlights* will be published on July 2, following the next round of interim committee meetings, June 24-26. **We are glad to have you in our subscriber network! Subscription information is available by calling (304) 590-3778 or by email to awessels@sterlingwv.com. Please respect the publication's privacy rights as other use of the newsletter's material is protected by copyright and requires written permission from the editor.**