

Hydrocodone reclassified as a Schedule II Medication

PROVIDENCE – The R.I. Dept. of Health recently announced that hydrocodone, an opioid-type medication, was reclassified as a Schedule II medication effective October 6, 2014.

Hydrocodone and all its combinations collectively represented the most popular pain medication prescribed in Rhode Island. Vicodin is a common brand name that contains hydrocodone. A review of 2013 data reveals there were more than 22.6 million doses filled. Schedule II medications have stricter regulation, reflective of the increased risk these medications have.

A summary of some of the rules surrounding all schedule II medications:

- The prescription must be written and signed by the prescriber.
- The prescription cannot have refills.
- The prescription is not valid after 90 days from the date it was written.
- A verbal prescription is allowed only in emergency situations and a written prescription must follow within seven days. (The pharmacist will notify the Drug Enforcement Agency if a written prescription is not received.)
- Faxed, original prescriptions are only allowed for:

Home infusion/IV pain therapy
Long-term-care facilities
Hospice/terminally-ill patient

- Prescriptions have the following quantity limitations:
30-day supply

Practitioners may write up to three separate prescriptions (each for up to a one-month supply) and each prescription must be signed and dated on the date they were originally written. In addition, the practitioner must write the earliest date each of those subsequent prescriptions may be filled, with directions to the pharmacist to fill no earlier than the date specified on the face of the prescription.

These are not all the rules surrounding hydrocodone and its varying combinations; however, prescribers will be responsible for following all of the rules when prescribing hydrocodone.

It is likely this will have a significant impact on office practices as schedule II prescriptions cannot be phoned in to a pharmacy. HEALTH encourages e-Prescribing of Schedule II medications for safety and security. ♦

Kent launches colorectal robotic surgery service

PROVIDENCE – Care New England recently launched a new colorectal robotic surgery service at Kent Hospital.

CHARLES RARDIN, MD, director of minimally-invasive surgery (MIS) at Care New England, said, "Our program is designed to bring the benefits of MIS, which include shorter hospitalization, less pain, quicker recovery and reduction in some complication rates, to a wider group of people. The new technologies such as Firefly imaging, offer promise in the safety and efficiency of gallbladder removal, as well as in several different forms of surgery for cancer care."

Recent advances include a successful launch of a colorectal robotic surgery service at Kent, under the direction of **MELISSA MURPHY, MD**, who completed a colorectal fellowship at Brigham and Women's Hospital in Boston.

Kent is only the second hospital in New England and the first in Rhode Island to utilize a fully robotic stapling device in colorectal surgery. This technological advancement overcomes several limitations of traditional handheld stapling devices and promises fewer complications after surgery. Earlier this year, Care New England also launched a robotic cholecystectomy program for gallbladder removal at Kent.

After installing its da Vinci surgical robot last year, Kent has quickly established a ground-breaking robotics service. Surgeon **JOSEPH BRADY, MD**, became the first in Rhode Island to perform a single site gallbladder removal, allowing the entire procedure to be done through one small incision in the belly button. In addition, Dr. Brady and **BRIAN REED, MD**, became the first in Rhode Island to complete several other surgical procedures robotically, including: Nissen Fundoplication, for gastroesophageal reflux disease (GERD); inguinal hernia repair; and ventral hernia repair. ♦

OHIC awarded \$1.1M rate review grant

CRANSTON – The Office of the Health Insurance Commissioner (OHIC) is one of 21 states that have been awarded a \$1.1 million "Grant to States to Support Health Insurance Rate Review and Increase Transparency in the Pricing of Medical Services, Cycle IV" from the Center for Consumer Information & Insurance Oversight (CCIIO).

This funding opportunity will allow OHIC to continue to enhance and institutionalize Rhode Island's rate review program, as well as coordinate and streamline efforts to improve price transparency, and increase its ability to analyze vital information about the health care system.

Specific projects OHIC will execute are effective rate monitoring and market conduct review programs; standardization of issuer price transparency requirements; coordination of rate review with form review; increased form transparency and consumer support; and expansion of the All Payer Claims Database (APCD) analytic and reporting activities.

"Rate Review Cycle IV Grant funding will provide needed support as OHIC works to enhance the effectiveness of our rate review process, as well as increase our capacity to collect, analyze, and report relevant data," said Health Insurance Commissioner, Dr. Kathleen Hittner.

With this latest \$1.1 million award, Rhode Island has been awarded a total of \$8.6 million from the CCIIO Rate Review Grants. ♦