GENERAL ASSEMBLY OF VIRGINIA -- 1997 SESSION

ENROLLED

HOUSE JOINT RESOLUTION NO. 565

Continuing the Joint Subcommittee to Study the Commonwealth's Current Laws and Policies Related to Chronic, Acute, and Cancer Pain Management.

Agreed to by the House of Delegates, February 4, 1997 Agreed to by the Senate, February 19, 1997

WHEREAS, the joint subcommittee was established by Senate Joint Resolution No. 72 (1994), continued by House Joint Resolution No. 583 (1995), and revised by House Joint Resolution No. 256 (1996), providing the bases for many explanations, presentations, and demonstrations on pain management modalities; and

WHEREAS, specifically, the study committee was continued in 1995 to seek cooperative efforts and private assistance in conducting a pain management summit; and

WHEREAS, on December 6, 1995, the Pain Management Symposium: Attitudes, Obstacles and Issues was held, without expense to the Commonwealth, with great success, having over 200 health care providers in attendance; and

WHEREAS, in 1996 the joint subcommittee was continued to examine the issue of chronic pain as the most economically significant symptom in terms of lost employment days, disabling conditions, and long-term human suffering and to close out the work required for the symposium; and

WHEREAS, during the 1996 interim, the joint subcommittee earnestly sought data from various entities on the economic implications of chronic pain management; and

WHEREAS, such data was not forthcoming; and

WHEREAS, the joint subcommittee is requesting, through other resolutions, that the Virginia Workers' Compensation Commission and the Department of Medical Assistance Services conduct, during the 1997 interim, pilot studies on the effects of pain management; and

WHEREAS, the joint subcommittee was also directed to examine issues related to off-label drug use in 1996 and did, after discussing other states' laws on this subject as well as various models, recommend amendments to the Code of Virginia to accommodate these issues; and

WHEREAS, the joint subcommittee also studied issues in 1996 concerning drug diversion and provider fear of investigations by regulatory and law-enforcement agencies; and

WHEREAS, several amendments to the drug laws are being proposed by the joint subcommittee as a result of this study; and

WHEREAS, the joint subcommittee discovered in the course of examining drug diversion issues and their relationship to chronic pain management that no national guidelines exist for chronic pain management; and

WHEREAS, the joint subcommittee has determined that the surplus funds from the symposium must be used to educate the medical community in pain management; and

WHEREAS, the joint subcommittee has requested the Medical Society of Virginia to accept these funds and to cooperate with the joint subcommittee by developing chronic pain guidelines for Virginia; and

WHEREAS, the development of these guidelines may well provide a vehicle for Virginia to set the standard for the rest of the country; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Subcommittee to Study the Commonwealth's Current Laws and Policies Related to Chronic, Acute, and Cancer Pain Management be continued for another year in order to receive data on the economic effects of pain management which is to be collected through pilot studies and to cooperate with the Medical Society of Virginia in supporting the development of chronic pain guidelines for Virginia. The members duly appointed pursuant to SJR No. 72 (1994) shall continue to serve, except that any vacancies shall be filled as provided in the enabling resolution. Staffing shall continue to be provided by the Division of Legislative Services. The additional pain management expert, chosen from among the members of the steering group which served for the symposium, will also continue to serve as provided in HJR No. 256 (1996).

In its deliberations, the joint subcommittee shall continue to examine third party reimbursement for pain treatment, as well as the issues set forth in SJR No. 72 (1994).

The direct costs of this study shall not exceed \$4,350.

All agencies of the Commonwealth shall provide assistance to the joint subcommittee, upon request.

The joint subcommittee shall submit its findings and recommendations on all aspects of pain management to the Governor and the 1998 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative HJ565ER

documents.

Implementation of this resolution is subject to subsequent approval and certification by the Joint Rules Committee. The Committee may withhold expenditures or delay the period for the conduct of the study.