

HOUSE JOINT RESOLUTION NO. 172

Continuing the Joint Subcommittee Studying the Commonwealth's Current Laws and Policies Related to Chronic, Acute, and Cancer Pain Management as the Joint Subcommittee Monitoring the Implementation of Certain Guidelines for Use of Opioids in Chronic Pain.

Agreed to by the House of Delegates, March 12, 1998

Agreed to by the Senate, March 10, 1998

WHEREAS, the Joint Subcommittee Studying the Commonwealth's Current Laws and Policies Relating to Acute and Cancer Pain Management was established pursuant to Senate Joint Resolution No. 72 (1994), continued by House Joint Resolution No. 583 (1995), and revised by House Joint Resolutions No. 256 (1996) and No. 565 (1997); and

WHEREAS, the joint subcommittee has been very active, conducting an intensive study of pain management in 1994, conducting a symposium on pain management in 1995 without the use of state funds, bringing together law-enforcement and medical experts to discuss pain management issues in 1996, and supporting, in 1997, in cooperation with the Medical Society of Virginia, the development of chronic pain guidelines; and

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

WHEREAS, because of the scarcity of any data, the joint subcommittee initiated a Medicaid study of the effects of chronic pain management in certain conditions, e.g., lower back pain; and

WHEREAS, the Medicaid study provided some interesting, but inconclusive, results; and

WHEREAS, the joint subcommittee also requested a study of medical school curricula in 1997 that has resulted in a new attitude of cooperation; and

WHEREAS, the publication in October 1997 of the Report of the Medical Society of Virginia Pain Management Subcommittee conveyed the chronic pain guidelines to physicians across Virginia; and

WHEREAS, the joint subcommittee has granted the excess funds from the 1995 symposium to the Medical Society of Virginia to conduct educational programs or otherwise promote awareness of the need for pain management instruction; and

WHEREAS, the Board of Medicine has been an active participant in these educational activities and will publish the chronic pain guidelines in its newsletter; and

WHEREAS, although the joint subcommittee has accomplished much, the attitudes of fear and avoidance which so often result in undertreatment of chronic, acute, and cancer pain still abound; and

WHEREAS, in the coming year, the effects of the newly developed chronic pain guidelines will be important to monitor; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Subcommittee Studying the Commonwealth's Current Laws and Policies Related to Chronic, Acute, and Cancer Pain Management be continued for another year as the Joint Subcommittee Monitoring the Implementation of Certain Guidelines for Use of Opioids in Chronic Pain. The total membership of the joint subcommittee shall be 15 members and shall include 4 new members as provided for in this resolution. The members duly appointed pursuant to SJR No. 72 (1994) shall continue to serve. Any vacancies shall be filled as provided in the enabling resolution, except that appointments of the members of the House of Delegates to fill vacancies shall also be in accordance with the principles of Rule 16 of the House Rules. The four additional members of the joint subcommittee shall be appointed as follows: two members of the House of Delegates to be appointed by the Speaker of the House in accordance with the principles of Rule 16 of the House Rules; and two members of the Senate to be appointed by the Senate Committee on Privileges and Elections. 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 monitor the implementation of the chronic pain guidelines and shall continue to examine third party reimbursement for pain treatment, as well as the issues set forth in SJR No. 72 (1994). The joint subcommittee shall limit its meetings to one in the coming year.

The direct costs of this study shall not exceed \$1,950.

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 1999 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative 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.