

MINUTES OF THE MEETING OF THE  
INDIANA STATE DEPARTMENT OF HEALTH  
EXECUTIVE BOARD  
September 12, 2018

The meeting of the Executive Board of the Indiana State Department of Health (ISDH) was called to order at 10:00 am in the Robert O. Yoho Board Room of the ISDH building by Brenda Goff, Chairperson. The following Board members were present for all or part of the meeting:

Naveed Chowhan, MD, FACP, MBA (via phone)  
Brenda Goff, HFA (Chair)  
John Gustaitis, MD  
Robin Marks, DVM  
Joanne Martin, DrPH, RN, FAAN  
Richard Martin, DDS  
Patricia Spence, PE  
Stephen Tharp, MD (Vice Chair)

Members not attending:

Blake Dye  
Suellyn Sorensen, PharmD, BCPS  
Tony Stewart, MBA, FACHE, HFA  
Kristina Box, MD, FACOG (Secretary)

The following staff members were present for all or part of the meeting:

Trent Fox, Chief of Staff  
Eldon Whetstone, Assistant Commissioner, Health and Human Services  
Judy Lovchik, Assistant Commissioner, Public Health Preparedness & Laboratory Services  
Miranda Spitznagle, Director, Tobacco Prevention & Cessation  
Mohan Ambaty, Director, Office of Technology & Compliance  
Eric Hawkins, Director, Epidemiology Resource Center  
Megan Griffie, Maternal and Child Health  
Kelly MacKinnon, Office of Legal Affairs  
Hilari Sautbine, Director, Vital Records  
Manda Clevenger, Office of Legal Affairs  
Deana Smith, Office of Legal Affairs  
Krista Click, Director, Food Protection  
Mike Mettler, Director, Environmental Public Health  
Burton Garten, Health Care Quality & Regulatory  
Katie Hokanson, Director, Trauma & Injury Prevention  
Dennis Stover, Director, HIV, STD & Viral Hepatitis

Guest:

Andy VanZee, Indiana Hospital Association

**Call to Order**

Brenda Goff, Chairperson stated that a quorum was present and called the meeting to order at 10:00 am. She then asked if Board members had any known conflicts of interest to declare. Hearing none she proceeded with the meeting.

## **Minutes**

Ms. Goff asked for discussion and/or corrections to the minutes of the July 11, 2018 Executive Board meeting. Hearing none she entertained a motion for approval. On a motion made by Dr. Tharp, seconded by Joanne Martin and passed unanimously by roll call vote, the Board approved the minutes as presented.

## **Official Business of the State Department of Health**

### **Secretary's Report**

Trent Fox, Chief of Staff, reported that Dr. Box could not attend because she had multiple speaking commitments. He introduced staff that are in different roles at the ISDH. Hilari Sautbine, formerly Office of Legal Affairs, is now the Director of Vital Records/State Registrar. Eldon Whetstone, formerly WIC Director, is now the Assistant Commissioner for Health and Human Services Commission. Mohan Ambaty, formerly Office of Technology & Compliance Deputy Director is now the Director.

### **Public Health Protection and Laboratory Services Commission**

#### **Final Adoption of Rule 410 IAC 7-25 Repeal of On Farm Poultry Processor Exemption, LSA #18-160**

Judy Lovchik, Assistant Commissioner for Public Health Preparedness and Laboratory Services Commission introduced Krista Click, Director, Food Protection Program to present Rule 410 IAC 7-25 Repeal of On Farm Poultry Processor Exemption for final adoption. The Notice of Intent to Adopt a Rule was published in the *Indiana Register* on April 4, 2018, starting the one-year period to adopt this rule. A final version of the rule was presented to the Executive Board on January 10, 2018, for review and discussion. No changes have been made to the proposed rule since it was posted in the *Indiana Register* on June 20, 2018. Staff recommends the Board approve this rule for final adoption.

Ms. Goff asked for comments from the Board, staff and/or public. Hearing none, she entertained a motion for final adoption. On a motion made by Dr. Tharp, seconded by Dr. Marks and passed unanimously by roll call vote, the Board approved Rule 410 IAC 7-25 Repeal of On Farm Poultry Processor Exemption for final adoption.

### **Office of Legal Affairs**

Kelly MacKinnon, Office of Legal Affairs, explained that four rules that were approved for final adoption at the July 11, 2018 Board meeting have to be voted on again due to a technical problem with the promulgation process. State law requires an on-line rulemaking docket which contains certain information. Unfortunately, the ISDH failed to include a date by which comments needed to be submitted; therefore, the rules had to be recalled from the Attorney General and the comment period reopened. The ISDH did not receive any comments during the new comment period so the rules are the same as when they were presented at the July 11, 2018 meeting.

#### **Final Adoption of Rule 410 IAC 17-10-1 and 17-12-1 Home Health Agency Criminal History Background Check, LSA #17-483**

As presented at the July 11, 2018 meeting: Randy Snyder, Director, Acute Care Division presented amendments to Rules 410 IAC 17-10-1 and 17-12-1 Home Health Agency Criminal History Background Check for final adoption. The amendments are in accordance with P.L. 51-2016. The Notice of Intent to Adopt a Rule was published in the *Indiana Register* on November 1, 2017 starting the one-year period to adopt this rule. A draft version of the amendments to the rule were presented to the Executive Board on November 1, 2017 for review and discussion. No changes have been made to the rule amendments since it was posted in the *Indiana Register* on May 16, 2018. Staff recommends the Board approve the amendments to this rule for final adoption.

Action taken at September 12, 2018 meeting: Ms. Goff asked for comments from the Board, staff and/or public. Hearing none, she entertained a motion for final adoption. On a motion made by Dr. Tharp, seconded by Dr. Richard Martin and passed unanimously by roll call vote, the Board approved the amendments to Rule 410 IAC 17-10-1 and 17-12-1 for final adoption.

Final Adoption of Rule 410 IAC 37 Hyperbaric Oxygen Treatment (HBOT) Pilot Program, LSA #17-564

As presented at the July 11, 2018 meeting: Eldon Whetstone, Interim Assistant Commissioner, Health and Human Services Commission presented Rule 410 IAC 37 Hyperbaric Oxygen Treatment (HBOT) Pilot Program for final adoption. Approval of this rule will implement the grants for veterans' hyperbaric oxygen treatment services. The Notice of Intent to Adopt a Rule was published in the *Indiana Register* on November 29, 2017 starting the one-year period to adopt this rule. A draft version of the rule was presented to the Executive Board for review and discussion on November 8, 2017. No changes have been made to the rule since it was posted in the *Indiana Register* on May 16, 2018. Staff recommends the Board approve the rule for final adoption.

Action taken at September 12, 2018 meeting: Ms. Goff asked for comments from the Board, staff and/or public. Hearing none, she entertained a motion for final adoption. On a motion made by Dr. Tharp, seconded by Joanne Martin and passed unanimously by roll call vote, the Board approved Rule 410 IAC 37 for final adoption.

Final Adoption of Rule 410 IAC 36 Developmental Disability Bracelet and Identification Card, LSA #17-445

As presented at the July 11, 2018 meeting: Eldon Whetstone, Interim Assistant Commissioner, Health and Human Services Commission presented Rule 410 IAC 36 Developmental Disability Bracelet and Identification Card for final adoption. This rule establishes application requirements for persons obtaining an Indiana developmental disability bracelet and identification card. The Notice of Intent to Adopt a Rule was published in the *Indiana Register* on October 4, 2017 starting the one-year period to adopt this rule. A draft version of the rule was presented to the Executive Board for review and discussion on November 8, 2017. No changes have been made to the rule since it was posted in the *Indiana Register* on June 6, 2018. Staff recommends the Board approve the rule for final adoption.

Action taken at the September 12, 2018 meeting: Ms. Goff asked for comments from the Board, staff and/or public. Hearing none, she entertained a motion for final adoption. On a motion made by Dr. Richard Martin, seconded by Patricia Spence and passed unanimously by roll call vote, the Board approved Rule 410 IAC 36 for final adoption.

Final Adoption of Rule 410 IAC 3-3 Newborn Screening, LSA #18-158

As presented at the July 11, 2018 meeting: Eldon Whetstone, Interim Assistant Commissioner, Health and Human Services Commission presented amendments to Rule 410 IAC 303 Newborn Screening for final adoption. The amendments to this rule will update the list of conditions screened for, change the time period for specimen collection, add requirements for newborn pulse oximetry measurement and update the newborn screening fee. The Notice of Intent to Adopt a Rule was published in the *Indiana Register* on March 28, 2018 starting the one-year period to adopt this rule. A draft version of the amendments to this rule were presented to the Executive Board for review and discussion on November 8, 2017. Martha Allen, Director, Maternal and Child Health stated that some language was changed based on feedback from the lab, however, this was only clarifying technical terms so it did not alter the intent of the rule. There was one concern raised by a pediatrician on how this change would affect his ability to require a new mother to remain in the hospital for 48 hours following birth and the ISDH clarified that the change in no way dictates the newborn length of stay but rather the timing of the test. Support for adding SCID and SMA to the newborn screening panel was submitted during the public hearing. No other changes were made to the proposed rule since it was posted in the *Indiana Register* on May 9, 2018.

Action taken at the September 12, 2018 meeting: Ms. Goff asked for comments from the Board, staff and/or public. Hearing none, she entertained a motion for final adoption. On a motion made by Dr. Tharp, seconded by Patricia Spence and passed unanimously by roll call vote, the Board approved Rule 410 IAC 36 for final adoption.

## Readoption of LSA #18-328 Rules:

Kelly MacKinnon reported the following rules are set to expire at the end of the year. An overview of each rule was provided. Following readoption approval, a notice of readoption will be filed with the *Indiana Register* and the rules will not expire on January 1, 2019 but will continue in effect for another seven years or until amended.

410 IAC 3-3	Newborn Screening
410 IAC 3.6	Women, Infants, and Children Program Rules, Penalties, and Sanctions for WIC Vendors
410 IAC 5.2	Radiography, Nuclear Medicine, and Radiation Therapy Licensing
410 IAC 6-8.3	Residential On-Site Sewage System
410 IAC 6-10.1	Commercial On-Site Sewage System
410 AIC 12-2	State Metrology Laboratory Fees
410 IAC 26	Abortion Clinics
410 IAC 27	Birthing Centers

Ms. Goff asked for comments from the Board, staff and/or public. Hearing none, she entertained a motion for readoption. On a motion made by Joanne Martin, seconded by Dr. Tharp and passed unanimously by roll call vote, the Board approved all of the above rules for readoption.

## Other

### Update on ISDH Response to Opioid Epidemic

Katie Hokanson, Director, Trauma and Injury Prevention and Dennis Stover, Director, HIV/STD/Viral Hepatitis provided an update on the ISDH response to the opioid epidemic.

The Overdose Response Project consists of monitoring drug OD ESSENCE data; strengthening partnerships; developing an overdose response plan; conducting a tabletop exercise to test the plan; and contributing to overdose response toolkits. Currently there are six counties participating in the project and ten more are being added.

To date the ISDH has distributed naloxone rescue kits to 62 local health departments statewide through four grant proposals. The ISDH has provided a total of 27,269 kits to these local health departments. Also, 5,216 kits have been distributed to first responders in 49 rural counties.

The ISDH has personally led 53 naloxone training events with a total of 501 individuals being trained in naloxone administration. These trainings were provided to 42 local health departments; three counseling centers; two groups of lay responders; two university trainings, one at the Labor of Love Summit, one at a volunteer organization, one at a hospital and one internally at the ISDH.

Coroners are required to verify suspected drug-related facilities by testing urine, blood, vitreous samples. Standard panels identify approximately 50 commonly prescribed medications and illicit drugs.

As of July 1, 2018 the ISDH began offering free toxicology testing to all 92 county coroners. The Division of Trauma and Injury Prevention is using federal funds to pay for all 92 county coroners to use a comprehensive panel through the NMS toxicology lab until August 2019. To date 80 county coroners are enrolled or in the process of being enrolled into the free testing offered by NMS Labs. Seven county coroners have yet to notify the department of their choice. Five have declined to participate in the free testing program offered and will use another vendor. However the ISDH will have access to their results.

In summary, she explained the ISDH has built a surveillance system that dramatically increases timeliness of verifying drug-related mortality data. The use of enhanced toxicology has been signed into Indiana law and went into effect July 2, 2018. The ISDH is continuing to develop new ways to use this data to fight the opioid epidemic.

The State Unintentional Drug Overdose Reporting System (SUDORS) is a new and ongoing collection and assessment of comprehensive fatal drug overdose data and requires individual data sharing agreements with coroners. The goal is to obtain more timely, comprehensive and circumstantial fatal overdose data to deliver toxicology results. A report from this system will be released at the end of 2018.

Katie provided an update on the Overdose Fatality Review (OFR) Teams. The pilot program was January to June of 2018. The Prescription Drug Overdose Supplemental Grant funded qualitative research on the process and effectiveness of overdose fatality review. The Child Fatality Review (CFR) Program is working with local CFR teams to incorporate overdose review. The ISDH is collaborating with IU Fairbanks School of Public Health to conduct the research component. The participating counties are: Knox, Montgomery, Tippecanoe, and Vanderburgh.

Results of the 28 reviewed cases include:

- Average age – 40.54 years
- 14 cases had documented mental health history
- 18 cases had documented history of incarceration
- 5 cases had history of suicide attempt and
- 1 drowning death and 2 suicides

The next steps are:

- Dedicated OFR Coordinator
- Funding training event for OFR teams
- Identify appropriate team leadership
- Training teams in thorough case review
- Utilization of CRS with personalized data fields
- Development of CAT teams from LCC's

Outreach and education consists of webcasts, drug overdose prevention weekly e-mail, and a drug overdose prevention mobile booth.

Screening, Brief Intervention and Referral to Treatment (SBIRT) Training is an evidence-based tool used to identify health-risk behaviors including substance abuse. This is made possible through the Indiana Prevention Resource Center (IPRC) within the Department of Applied Health Science at Indiana University. To date, five training sessions have been completed and plans for 2019 trainings are in progress.

Other Divisions within the ISDH that are working collaboratively to address the opioid epidemic are:

Child Fatality Review; Chronic Disease, Primary Care & Rural Health; Epidemiology Resource Center; HIV/STD/Viral Hepatitis; Immunization; Maternal and Child Health; Office of Minority Health; Oral Health; Emergency Preparedness; Office of Women's Health; and Vital Records.

Dennis Stover, Director, HIV/STD/Viral Hepatitis provided an update on the syringe service programs (SSPs). The Division has been working to address issues that are arising due to the opioid crisis by looking at data on syringe service programs. Aggregate data from all SSPs through August 31, 2018 is as follows:

- Total participants – 5,708
- Male – 3,281
- Female – 2,406
- Transgender – 21
- Ages 30 to 39 years access these programs the most
- Syringes supplied all time – 2,295,853
- Syringes returned all time – 1,868,131
- Total average return rate all time – 81.4%
- Total number of visits – 22,925
- Total number of referrals to substance abuse treatment/mental health services since December 20, 2016 – 6,274

- Most commonly reported drugs of use include: heroin, stimulants (including methamphetamine), oxymorphone, and ‘other opioids’ not including heroin and oxymorphone

### Update on Hepatitis A Strike Team

Eric Hawkins, Director, Epidemiology Resource Center reported that as of Friday, September 7, 2018 Indiana has 450 cases of hepatitis A. The outbreak is still predominately among individuals that use illicit drugs, have experienced homelessness, are a close contact to a known case, and who are or recently were incarcerated. To date, 196 cases have been hospitalized and there is one reported death in this outbreak. The main control measures that we have continued to recommend are good personal hand hygiene and vaccination.

The local health departments have done an excellent job during this response in providing vaccine to individuals that fall into the high-risk categories. To supplement these efforts, ISDH has put together a strike team that currently consists of three nurses. The strike team is going on-site to assist the local health department with hepatitis A vaccination clinics at locations specifically identified to target high-risk individuals. In the last three weeks the strike team has assisted with clinics in five counties and within those counties, multiple locations/clinics have been held. There are 14 additional counties that are already on the schedule to receive assistance from the strike team. Eight counties have refused strike team assistance for a variety of reasons. An additional four counties have yet to respond about scheduling vaccination clinics. In these three weeks, the strike team has vaccinated 211 individuals. A total of 22,190 doses of hepatitis A vaccine have been distributed by ISDH to local health departments. Over 66,000 doses have been given to Indiana residents in 2018 through private providers, pharmacies, and local health departments. The ISDH website at <https://www.in.gov/isdh/27791.htm> contains the most current info for Indiana.

### Indiana Tobacco Quitline Update

Miranda Spitznagle, Director, Tobacco Cessation and Prevention reported the Indiana Tobacco Quitline is continuing its promotion of two weeks of medication (NRT) through September to correspond with the CDC Tips from Former Smokers Campaign. Quit Now Indiana has a new website and material which can be accessed as [www.QuitNowIndiana.com](http://www.QuitNowIndiana.com).

### Distribution

Ms. Goff thanked staff for the Professional new Hire and Separation Reports, Summary of Final Orders and Consent Decrees, and Variance Waiver Approvals.

### Adjourn

Hearing no additional comments from the Board, staff and public, Ms. Goff adjourned the meeting at 11:33 am. The next meeting is scheduled for November 14, 2018.