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**REFERRAL CRITERIA WORKGROUP  
CONTROLLED SUBSTANCES BOARD  
Room 121A, 1400 East Washington Avenue, Madison  
Contact: Dan Williams (608) 266-2112  
May 11, 2018**

*The following agenda describes the issues that the Workgroup plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a description of the actions and deliberations of the Workgroup. A quorum of the Board may be present during the Workgroup meeting.*

**AGENDA**

**9:00 A.M.**

**OPEN SESSION - CALL TO ORDER – ROLL CALL**

**A. Adoption of Agenda (1)**

**B. Controlled Substances Referral Criteria Workgroup – Discussion and Consideration (2-3)**

1. Review of the Statutory Language
2. Discussion of Objective of Referrals
3. Discuss Referral Options
  - a. Medical Examining Board
  - b. Pharmacy Examining Board
  - c. Board of Nursing
  - d. Dentistry Examining Board
  - e. Optometry Examining Board
4. Wrap Up: Next Steps

**C. Informational Item(s) (4-6)**

**D. Public Comments**

**ADJOURNMENT**

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MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 1400 East Washington Avenue, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board's agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Interpreters for the hearing impaired provided upon request by contacting the Affirmative Action Officer, 608-266-2112.

## AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request:  <b>Dan Williams</b>		2) Date When Request Submitted:  Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: <b>Controlled Substances Board</b>			
4) Meeting Date: <b>11/10/2017</b>	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page?  <b>Controlled Substances Referral Criteria                  Workgroup – Discussion and Consideration                  (see agenda below)</b>	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled?  <input type="checkbox"/> Yes <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:  <p style="margin-left: 40px;"> <b>MOTION:</b> Leonardo Huck moved, seconded by Yvonne Bellay, to create a Work Group of Peter Kallio, Timothy Westlake, Doug Englebert, and Philip Trapskin to develop criteria for analyzing prescribing and dispensing practices that should be brought to the Board’s attention. Motion carried unanimously.                 </p>			

## Referral Options For Discussion

### Practitioner

- Practitioner correlated with dispensing records or patients with >90MME that have no data indicating they have reviewed the PDMP
- Non-oncology Practitioner with patients exceeding 200 MME
- Practitioner with patients getting controlled substance prescriptions from more than 5 other physicians without checking PDMP
- Practitioner with patients filling prescriptions at 5 or more pharmacies
- Dentists prescribing oxycodone beyond 7 days
- Optometrists prescribing HCPs beyond 7 days

### Pharmacists/Pharmacies

- Pharmacies with no data submissions
- Pharmacies with errors that are not fixed that are older than 30 day, 60 day, 100 day
- Pharmacists that dispensed to patients getting controlled substance prescriptions from more than 5 other pharmacies that overlap

## **Feds suspect Milwaukee area pain clinic could be 'pill mill' feeding the opioid crisis**

Bruce Vielmetti, Milwaukee Journal Sentinel Published 10:21 a.m. CT April 5, 2018 | Updated 3:14 p.m. CT April 7, 2018

(Photo: Rick Wood / Milwaukee Journal Sentinel)

As the opioid crisis was spiking in Wisconsin, a pain management clinic in Wauwatosa was prescribing thousands of oxycodone tablets for cash-paying patients who likely didn't need them and appeared to be reselling the pills, according to investigators.

Two nurse practitioners who admitted improperly prescribing at the clinic were merely reprimanded by the state Board of Nursing. A physician who worked briefly at the clinic says he was fired after refusing to prescribe and recommending to owners they discharge most of the patients.

The U.S. Drug Enforcement Administration investigation was revealed in court records.

U.S. Attorney Matt Krueger declined to say whether there is a criminal investigation.

Wauwatosa Pain Management Clinic was founded in 2013 by Justin Hanson, a roofer without any medical training, and Lisa Hofschulz, a nurse practitioner licensed to prescribe drugs, the court records say.

Former employees told agents that Hanson exerted heavy pressure to prescribe the pills, even for patients whose urine screens showed they weren't taking them or had run out of their last allotment before they should have if they had been using them as prescribed.

Less than two years after starting the business, Hanson bought out Hofschulz, sold her share to NuMale Medical and renamed the clinic Universal Pain Center, at 6001 W. North Ave. Brad Palubicki, president of NuMale, did not return a message left with the company.

Hofschulz, who has nurse practitioner licenses in Wisconsin, Georgia and Florida, started Clinical Pain Consultants, with an office in Mayfair Mall and one in Naples, Fla. Her attorney, Michael Chernin, said Hofschulz would not discuss operations at Wauwatosa Pain Management or her partnership with Hanson.

Patrick Knight, who represents Hanson, said he hasn't been involved in operations at the center since the fall and retains a less-than 20% stake in the business.

Knight said he's aware of the DEA looking at operations of not only Universal Pain but nearly every pain clinic now. He said no one from the government has approached him about talking with Hanson. Knight said he was aware that various agencies have reviewed the practices of some of Universal's former prescribers.

Former employees of Universal Pain Center told investigators that patients would usually pay about \$300 for an initial visit and then \$200 for follow-ups when they would get prescription refills.

Investigators believe the patients willingly paid more than they would have using insurance at other providers "because they reliably and consistently receive opioids there for which there is no legitimate medical purpose."

The model worked, according to the court records. In its first two months of business, Wauwatosa Pain Management deposited \$177,949 in cash to one of its accounts. Four and a half months later in 2014, more than \$502,000 in cash was deposited to another account for the business.

One of the several young prescribers who was working for Hanson was later reprimanded by the state Board of Nursing. Rachel McCauley told board investigators she wrote prescriptions for people she suspected were not taking the pills, but selling them, and that she felt only about half the patients she saw at Hanson's clinic had legitimate needs for oxycodone, which she estimated made up 65% of all her prescriptions.

A drug ring prosecution in Washington County last year got many of the opioid pills it resold from the pain clinic, pills the Campbellsport-based operation would resell in Fond du Lac and Washington counties.

Doctors are cutting back on opioid prescriptions but not by nearly enough, federal health officials say.

Investigators in that case said records from the Wisconsin Prescription Drug Monitoring Program showed that the woman who led the drug ring, Lori Merget, got 180 30mg oxycodone pills and 90 60mg Oxycontin pills each month from Julie Driscoll at 2222 N. Mayfair Road or Theresa L. Wendt at Universal Pain Center, 6001 W. North Ave.

Merget pleaded guilty in July to the delivery of narcotics and possession of heroin with intent to distribute. Four other counts were dismissed. She was sentenced to eight years in prison.

According to the federal court records, Driscoll is now the main prescriber at Universal Pain Center.

Wendt was also reprimanded by the nursing board last year and then suspended in January for violating the conditions of a consent order regarding her practice.

Both women, like McCauley and Hofschulz, are licensed as advanced practice nurse prescribers who can write prescriptions for narcotics.

The investigation revealed that during the first seven months of 2017, Driscoll ranked near the top in the state average number of Medicaid-covered oxycodone prescriptions. She was second in Medicaid-submitted claims with 3,561 and in pills prescribed — 548,435 — and first in the average number of pills per pharmacy claim.

To the DEA, those numbers suggest Driscoll is "likely prescribing Oxycodone to patients without a legitimate medical purpose." Driscoll did not return a message left at Universal Pain.

Another former nurse prescriber, identified only by her initials, at Universal told investigators she would get pressure from Hanson and the office manager to prescribe for every patient.

The patients, too, got upset when she didn't prescribe more oxycodone, sometimes telling her they had "an understanding" with Hanson that they were paying the \$200 per visit fee to continue getting high doses.

The former nurse prescriber had noticed many younger patients traveling great distances to the clinic, factors the federal investigators say suggests "drug seeking behavior."

A physician who worked only briefly at the clinic, identified only by initials, told investigators he was shocked at the high doses many patients were on and that he thought he could make changes at what appeared to him to be a "pill mill."

Sometimes, he said, the office manager would appear at appointments and try to negotiate a prescription for a patient. If the physician refused, the manager would refund the patient.

Eventually, the physician recommended 98% of the patients be discharged. Two days later, Hanson fired him.