

EDITORIAL



State Capitol
WEEK IN REVIEW
by Senator Jimmy Hickey Jr.



LITTLE ROCK – Last year 426 Arkansas residents died from a drug overdose, according to death certificates filed with the state Health Department. That is an increase in fatal drug overdoses from 2017, when 417 people in Arkansas died from drugs.

The data is from the most recent annual report issued by the Prescription Drug Monitoring Program, which is administered by the Health Department.

The program was created by the legislature in 2011 to curtail the rapidly growing abuse of controlled substances, such as painkillers and opioids. Since 2011 the legislature has steadily expanded the program's reach.

Under state law, every time a controlled substance is dispensed to an individual, it must be reported to the monitoring program within seven days. In 2017 the legislature made it mandatory for prescribing physicians to check with the program before prescribing opioids and controlled substances.

Law enforcement, medical fraud investigators and authorities from the military and other states can access the data in the Arkansas prescription drug monitoring program. Early this year, the number of users who have access to the program went over 20,000 for the first time.

One goal is to reduce "doctor shopping" by people who abuse prescription drugs. The practice is defined as visiting multiple physicians in order to obtain numerous prescriptions for the same drug.

The program flags instances of "doctor shopping" if a patient sees five doctors and goes to five pharmacies within a 90 day period, all in order to purchase the same drug. In large part due to the flagging of this form of abuse, since the beginning of 2017, Arkansas has seen an 80 percent decrease in "doctor shopping."

Arkansas shares data with 34 other states that also have a prescription drug monitoring program. Importantly, Missouri does not have a program and does not share data with Arkansas. All of our other neighboring states share information on prescription drugs, however.

The number of queries by law enforcement usually ranges from 180 to 190 per quarter. The number of queries from boards that license physicians, nurses and other health professionals, will vary to a greater degree, for instance, from 30 or 40 or 50 per quarter.

Queries from physicians, pharmacists and health care professionals average about 19,000 a month.

Opioids were the most widely prescribed drug in Arkansas in 2018, with 3.2 million prescriptions ordered and more than 186 million pills sold. That is a decrease from 2016, when 236 million opioid pills were sold in Arkansas.

Opioids treat pain and include hydrocodone, oxycodone and morphine.

The second most sold controlled drugs in Arkansas in 2018 were prescriptions for anxiety, panic attacks, insomnia, seizures and muscle spasms. The drugs include

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ARKANSAS GOVERNOR

Asa Hutchinson



Expanding Access for Those in Crisis

LITTLE ROCK – Today I want to talk about what we are doing in Arkansas to expand access to mental health services and for those in need of drug-addiction counseling.

In the two years since we transformed Medicaid coverage, the number of counselors has risen from 31 in 2017 to 207 this last year. That is an increase of 567 percent. The number of behavioral health agency sites has increased from 253 to 311.

What that means for Arkansas is that more people have quicker access to the professional assistance they need.

Arkansas has not been exempt from the devastating impact of opioid addiction that is stealing the future from tens of thousands of people around our nation. In addition to the obvious ill effects of the abuse of drugs and alcohol, that lifestyle often leads to mental-health issues. Arkansas is blessed with leaders in the Department of Human Services, the Department of Health, and the General Assembly who understand that we have to find creative ways to help our neighbors. They know that if we don't act, the epidemic will swamp families and entire communities.

The goal of the 2017 Medicaid transformation was to expand counseling for drug addiction and broaden access to mental-health services. The transformation led to several improvements in the system. We eliminated the rule that limited the number of providers that Medicaid could reimburse for services. We increased the rate of reimbursement to increase the number of counselors. This leveled the playing field for the small service providers.

The new rules also allowed counselors to work in the same building as doctors. This has improved the chance for successful treatment because a doctor is free to send a patient to a counselor down the hall rather than simply hope the patient will drive across town a week later to keep an appointment.

I talked about this tremendous growth at a news conference this week. I also announced that DHS has launched a helpline with trained staff members who will steer to the appropriate source those who are seeking help with mental-health issues and drug addiction.

The helpline complements Arkansas's system of Crisis Stabilization Units, which offers a person in the midst of a mental-health crisis the option of immediate treatment rather than a trip to jail. Arrest isn't always the best option for a person who is suffering a mental-health crisis. Staff members at the CSUs are trained to assess the needs of those in crisis, provide immediate aid, and then guide them to the appropriate help.

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Legislative UPDATE

DeAnn Vaught
STATE REPRESENTATIVE



Arkansas recently set a new record low for unemployment. The unemployment rate for July was 3.4 %, breaking the previous record of 3.5% last month. There are 19,200 more jobs in our state than this time last year.

But the story of our work force does not end there. As we approach Labor Day, it's worth taking a look at our state's largest occupations, what occupations are in demand, and what occupations are paying the most.

This information is released annually in the Department of Workforce Services Arkansas Labor Market and Economic Report.

Retail salespersons was estimated to have the most employees across the state with 37,050 employed in 2017 with an average wage of \$24,990. Combined food preparation and serving workers was the second largest occupation with 35,520 employed, earning an average wage of \$19,620.

When it comes to occupations in demand, the report is divided into three categories: high skill, moderate skill, and basic skill.

The most in-demand high skill occupations in our state are operations managers, registered nurses, clergy, elementary school teachers (except special education), accountants and auditors.

The most in-demand moderate skill occupations are truck drivers, nursing assistants, bookkeeping and auditing clerks, teacher assistants, and licensed practical and licensed vocational nurses.

The most in-demand basic skill occupations are food preparation and food serving workers, cashiers, retail sales, farmers and other agricultural managers.

Internists topped the occupations paying the most list with an annual salary of \$247,280. Obstetricians and Gynecologists, with an average annual salary of \$235,130 ranked second.

The entry wage estimate for employers of all sizes was \$20,160 for 2017. The median wage estimate for employers with 250-499 employees was \$32,317, while wages for experienced workers averaged \$50,710 for employers in all size categories.

Our labor market is expected to continue to grow. You can find more detailed information on the labor market in various regions of the state by reading the report we have linked on our website www.arkansashouse.org.

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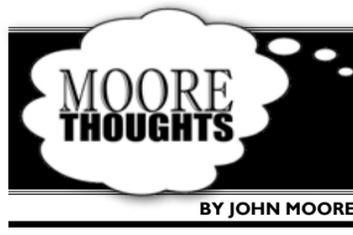
The Little River News will not accept or publish any letters related to an upcoming election later than three weeks prior to an election. Rebuttal letters related to a previous letter to the editor will be published two weeks prior to an election. No election related letters will be run the week prior to a given election.

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Making Cents



BY JOHN MOORE



The first coins minted by the U.S. Government were struck in 1783. The use of coins as a means of payment dates to the 5th or 6th Century BCE.

For over 50 years beginning in the 1960s, coins were a means of connecting with my dad.

"Always check your change. Look for wheat pennies, Indian head pennies, buffalo nickels, and any dimes dated 1964 or before," my dad would frequently remind me.

Wheat pennies are called that because of the sheaf that appears on the back of the cents minted between 1909 and 1958. Indian head pennies were made from 1859 to 1909. Buffalo nickels were minted between 1913 and 1938. Pre-64 dimes have a higher silver content.

My job was to find good, collectible coins and bring them to him to add to the coin collection that was kept in the hall closet.

It was an affordable hobby that, in a way, was a never-ending treasure hunt between a dad and his son.

Beginning when I was old enough to carry money, I learned about coins, including the mintmarks - which indicate where the coin was made. The most common mintmark we see today

is Denver, even though the U.S. Mint still also produces coins at San Francisco, Philadelphia, and West Point. There used to be a mint in New Orleans.

The rarity of a coin and where it was minted often have a great impact on its collectability and value. For example, I was told to look for steel pennies. These were pennies made during World War II. Steel was used because copper was needed for the war effort.

A 1943 steel penny with a double mint strike from Denver can be especially valuable.

Over the years it became a contest between the two of us to see who could find the best coin each week.

When I would go to the 7-11 to buy candy to snack on, or gasoline for my lawn business, I would thoroughly

look through my change. I would even ask the clerk if there were any wheat pennies in the till and if so, could I have those instead of newer pennies.

On rare occasions, I would hit the jackpot by arriving at a store following someone who had finally cracked open their piggy bank after it had sat for years. Virtually all of the coins in the register would be at least 30 years or older.

I always assumed that was what had happened. Another guess was that someone had inherited a relative's coin collection and just had no loyalty to the person who left it to them or they simply had no idea that some of the coins were worth far more than face value.



Columnist John Moore always checks his change for old coins. Pictured are three from his collection.

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