

Balancing Access and Use of Opioid Therapy

6th Annual Research Symposium
October 3, 2016

EXECUTIVE SUMMARY

The Academy of Managed Care Pharmacy (AMCP) Foundation's 6th Annual Research Symposium, *Balancing Access and Use of Opioid Therapy: Challenges Confronting Health Plans, Payers, Prescribers and Others*, provided a forum for representatives of key stakeholders to address key issues and strategies to reduce opioid use disorders. Symposium presentations aligned with the AMCP Foundation's core mission to advance collective knowledge about the myriad of factors that influence patient care, helping to advance the national dialogue around the opioid epidemic with a solutions-oriented agenda that identified obstacles and opportunities for progress and areas of potential future policy and programmatic action.

Addressing the Epidemic of Opioid Use Disorder

As the total number of opioid-related overdose deaths continues to increase, the topic of opioid use and misuse is one of the top health care issues in the country. Early identification of problematic opioid use and engagement in appropriate levels of treatment are critical in preventing morbidity and mortality. In response, federal drug policy efforts have been focused on opportunities to improve opioid prescribing, increase the use of naloxone to reverse opioid overdose, and expand the use of medication-assisted treatment for opioid use disorders.

Opioid use disorder is a substantial public health and public safety issue. There are many patients whose pain conditions are not well managed, and they may not have access to the full complement of pain relief strategies and treatments. Concerns with prescribing trends include increases in dosages of opioids prescribed, longer durations of treatment, and prescribing for conditions that do not benefit from the treatment of opioids. These issues are addressed within the new CDC Guideline. For patients that meet criteria for substance use disorders, there is a need to expand

access to opioid use disorder treatment. The barriers to treatment are often significant, and for health care professionals, these barriers can be opportunities to discuss the benefits of treatment, and reinforce that opioid use disorder is a medical condition.

State-level efforts to expand access to naloxone are also increasing. Improving access is a critical component of risk reduction and expansion of naloxone access is an area where pharmacists can make a tremendous impact. Importantly, early identification of problematic opioid use and engagement in appropriate levels of treatment are critical in preventing morbidity and mortality.

Patient Perspectives

Many people experience acute pain and chronic pain episodes in their lifetimes. Often, patients and providers may not appreciate that there are non-pharmaceutical treatment options for both acute and chronic pain. Health care providers frequently find themselves in a delicate balance to both reduce potential harm and effectively care for patients with pain. Tools such as prescription drug monitoring programs (PDMPs) and patient review and restriction programs (PRRs) are mechanisms that identify patients at risk for harm and help coordinate patient care and improve outcomes. Evidence shows that providing access to complete information about patient exposure to controlled substances may make providers more comfortable with prescribing and dispensing these medications. Research has shown that PDMPs and PRRs are valuable tools to achieve harm reduction while ensuring patient access.

Provider Perspectives

From the perspective of a clinician, opioids are vital medicines for the relief of suffering at the end of life, for the treatment of acute pain, and for pain associated with active cancer. However, a sharp increase in opioid prescribing for chronic, non-cancer pain during the past two decades has been associated with large increases in opioid addiction and opioid deaths in the U.S. Prescribers are a very important piece of the puzzle in dealing with the opioid epidemic.

The opioid epidemic is a multidisciplinary issue. There are a number of principles of sound prescribing that support the safe and effective use of opioids for treatment of chronic pain. Currently, over 90 percent of primary care physicians do not routinely screen for substance use disorders. There is also a need to increase awareness across the entire spectrum of substance use disorders and appreciate that stigma is a significant barrier both within the general public and medical professionals. All health professionals should be trained on medications to treat substance use disorders, and pharmacists are key to the team to help address this epidemic.

Strategies to identify and support at-risk populations can be based on sophisticated patient-level analytic assessment, risk stratification and scoring that identifies patterns of use that suggest risk. There is ongoing work to develop a predictive algorithm for opioid use disorder. Other initiatives are working to assess the effectiveness of wearable health technologies to improve treatment for patients with chronic pain. Additional opportunities for providers to improve patient safety and decrease diversion exist through formulary management, pharmacy based screening, and closer collaboration with other providers.

One way to advance medical care in treating substance use disorders is to properly align the payment incentives, requiring that resources be reallocated. From a managed care perspective, it is important to track the medical spend offset across silos. If physicians practice evidence-based medicine, addiction treatment will increase the pharmacy spend but will decrease emergency department utilization, decrease hospital admissions, decrease ICU stays, the length of stay, and 30-day readmission rates.

Providers are continually challenged with balancing the need for opioids for pain management with the management of risks, which creates the potential for naloxone to promote opioid safety discussions with prescribers and patients. Naloxone should be considered an opioid safety tool. The CDC Guideline recommends that prescribers “consider offering naloxone when prescribing opioids to patients at increased risk for overdose,” within the broader context of assessing other clinical variables. Pharmacies and pharmacists also have an increasing role in providing patient access to naloxone.

Managed Care Pharmacy’s Leadership

AMCP is working to take a leadership role in addressing the opioid epidemic, advocating for solutions and engaging managed care stakeholders. AMCP convened a Partnership Forum on Breaking the Link Between Pain Management and Opioid Use Disorder that specifically tasked AMCP to conduct continuing education programs for pharmacists and other providers on opioid use disorder and treatment, develop a best practices toolkit, and promote quality standards for opioid use disorder treatment and prevention.

AMCP was also encouraged to collaborate with other organizations representing addiction treatment experts and managed care to review current practices and identify areas for substantial improvements in patient outcomes. The subsequent establishment of the AMCP Addiction Treatment Advisory Group (ATAG) led to the development of Findings and Considerations for the Evidence-based Use of Medications Used in the Treatment of Substance Use Disorder, providing specific recommendations for managed care pharmacy.

Managed care plays a central role in addressing the opioid epidemic and is uniquely positioned to positively contribute to solutions through population management, appropriate medication selection, care coordination, and provider education. Health plans can examine their coverage policies for both pain treatment and MAT and work to decrease the barriers to entry for both patients and providers. Managed care organizations are also encouraged to use data to risk stratify patients and inform providers about utilization issues. Data can also be leveraged to evaluate if implemented utilization policies are successful and to target patients that may be in need of medical intervention.

The U.S. society and our health care system will continue to seek solutions to the challenges of opioid use disorder. Managed care organizations can continue to focus on the role they can – and should – play in addressing this national health care emergency and developing meaningful solutions for patients, providers and payers.

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