

Risk Management Policy for Plan Members and Opioid Prescriptions



ADOPTION OF CENTERS FOR DISEASE CONTROL (CDC) GUIDELINES WHEN OPIOIDS ARE PRESCRIBED FOR HEALTH PLAN MEMBERS

Purpose:

More than 100 million Americans experience chronic pain each year—more than diabetes, cancer and heart disease combined. Much of the pain experienced by Americans could be prevented or better-managed. Chronic pain is the number one cause of adult disability in the United States and musculoskeletal pain—especially joint and back pain—is the most common single type of chronic pain. Lost productive time from common pain conditions among active U.S. workers costs an estimated \$61.2 billion annually, largely due to reduced performance while at work. Approximately 4 in 10 Americans say pain interferes with their mood, activities, sleep, ability to do work or enjoyment of life.

In addition, overdose deaths from prescription opioids now exceed deaths from both heroin and cocaine combined. Drug overdoses, predominately from opioids, now exceed car crashes as the leading cause of unintentional death. More than twice as many Americans have died from this prescription opioid overdose epidemic than during the Vietnam War.

In an effort to provide safety and health wellness to our health plan members, we have adopted the policy as recommended by the U.S Surgeon General, Jerome Adams to ensure that health providers are following the Centers for Disease Control (CDC) guidelines for opioid prescribing.

This will be implemented through awareness education to members provided through the “***Know the Risks***” campaign and to prescribing providers through conformance awareness as identified by predictive analytics designed to monitor outcomes and costs incurred from opioid prescribing to our health plan members.

Statement of Policy:

Network providers shall prescribe opioids only when necessary, and when opioids are deemed necessary, strict measures shall be taken to ensure the safety of health plan members – including:

- a. When pain control is needed, non-opioid therapies shall be considered first.
- b. When opioids are used, the lowest effective dose shall be used for the shortest reasonable duration.
- c. The nature of this policy shall place the burden of enforcement on three entities:
 1. Employer – The employer shall take steps to educate employees about the dangers of opioid medications and work with network providers to ensure that opioids are used only when necessary and that steps are taken to limit the dosage and duration of therapy.
 2. Network Providers – Providers shall be tasked with following CDC guidelines when opioids are prescribed for health plan members.



3. Employees – Employees shall serve as watchdogs to ensure that their providers are following CDC guidelines when opioids are prescribed and encouraged to notify Risk Management if their providers appear not to be following these guidelines.

Procedure:

- I. Adoption of CDC guidelines when opioids are prescribed for employees – as part of company risk management program. Key elements of CDC guidelines include:
 - a. Use of non-opioid therapy as initial means of treatment;
 - b. Use of pain management agreements when opioids are used;
 - c. When opioids are prescribed, the lowest reasonable dose should be used for the shortest reasonable duration;
 - d. Use of urine drug screens as part of continued opioid treatment;
 - e. Referral to, or consultation with a pain management specialist when pain is deemed chronic (after 90 days of opioid therapy).
- II. Employee education – Employees will be educated about the dangers of opioid prescription therapy. Employees will be advised to expect their provider to follow the above listed guidelines if/when they are prescribed opioids. Additionally, employees will be asked to help monitor provider compliance with CDC guidelines.
- III. Provider education – Network providers will be educated about CDC guidelines for opioid prescribing, and informed that (Employer) has adopted CDC guidelines when opioids are prescribed for their employees. Providers will be informed that employees have been **made** aware of this policy and will expect these guidelines to be followed when opioids are prescribed for them or members of their family.
- IV. Employee prescription drug claims shall be analyzed on a scheduled basis to identify network providers that appear to be following CDC guidelines when opioids are prescribed, and those that appear not to be following CDC guidelines. A “rating” will be assigned to all network providers based on their compliance to CDC guidelines for opioid prescribing as evidenced by prescription drug claim analysis through predictive analytics.
- V. Providers will regularly be made aware of their current “rating”. Providers that do not appear to be following CDC guidelines will be given additional educational material pertaining to CDC guidelines. Providers that do not appear to be following CDC guidelines for opioid prescribing may receive personal communication from an agent of (Employer). The nature of this communication will be to stress the importance of following these guidelines to keep employees safe AND that (Employer) has adopted these guidelines and expects them to be followed when providing care to their employees.

