



Pension and Health Benefits Committee Agenda Item 7

November 14, 2017

Item Name: Curbing the Opioid Epidemic in California

Program: Health Benefits

Item Type: Information

Executive Summary

This agenda item provides an update of activities by California Public Employees' Retirement System (CalPERS) team members to support the use of evidence-based medicine via the Smart Care California workgroup. One of the focus areas of the workgroup is to reduce opioid overuse.

Strategic Plan

This item supports CalPERS' 2017-22 Strategic Goal "Transform health care purchasing and delivery to achieve affordability."

Background

Prescription opioids are helpful in the treatment of pain, but can cause adverse effects including death. The federal Centers for Disease Control and Prevention (CDC) reported that "prescription opioid-related overdose deaths increased sharply during 1999–2010 in the United States in parallel with increased opioid prescribing."¹ The CDC data indicates that the average daily morphine milligram equivalents of opioids prescribed per capita in the United States increased from 180 in 1999 to 782 in 2010, then decreased to 640 in 2015.² Nevertheless, CDC noted that in the United States "the amount of opioids prescribed in 2015... is nearly 4 times higher than in Europe in 2015."³

Under the objective "Reduce the overuse of ineffective or unnecessary medical care," the CalPERS 2017–22 Strategic Plan contains a measure "Opioid prescription volume" with a target "Establish a baseline followed by a downward trend."⁴

¹ Guy GP Jr, et al. Vital Signs: Changes in Opioid Prescribing in the United States, 2006-2015. MMWR Morb Mortal Wkly Rep. 2017 Jul 7;66(26):697-704. At <https://www.cdc.gov/mmwr/volumes/66/wr/mm6626a4.htm>.

² The calculation of MME involves applying "conversion factors" to opioid dosages to account for their potency relative to morphine. For example, one milligram of codeine is approximately equivalent to 0.15 milligrams of morphine, and one milligram of hydromorphone is approximately equivalent to four milligrams of morphine. Source: CDC. Calculating Total Daily Dose Of Opioids For Safer Dosage. At https://www.cdc.gov/drugoverdose/pdf/calculating_total_daily_dose-a.pdf.

³ Schuchat A, Houry D, Guy GP Jr. New Data on Opioid Use and Prescribing in the United States. JAMA. 2017 Aug 1;318(5):425-426.

⁴ <https://www.calpers.ca.gov/docs/forms-publications/2017-22-strategic-plan.pdf>

Analysis

In 2015, the Department of Health Care Services (DHCS), Covered California, and CalPERS founded Smart Care California, a public-private workgroup whose goal is to promote safe, affordable health care.⁵ The Integrated Healthcare Association coordinates the partnership with funding from the California Health Care Foundation. Seven workgroup meetings have been held to date.

The workgroup has focused on three areas, each with a different lead agency. DHCS is the lead for encouraging safe and appropriate use of opioids for pain; Covered California is the lead for reducing low-risk, first-birth Cesarean sections; and, CalPERS is the lead for improving approaches to low back pain.⁶

The workgroup's activities in the area of opioids include:

- Reviewing resources for reducing opioid overuse targeted to different audiences (e.g., consumers/patients, prescribers, and purchasers)
- Discussing which measures of opioid prescriptions are most useful
- Promulgating a statewide dashboard on opioid indicators from California Department of Public Health
- Surveying Medi-Cal, CalPERS, and Covered California health plans regarding approaches to opioids
- Developing strategies for implementing evidence-based opioid prescribing guidelines

CalPERS team members continue to work with Smart Care California and with health plan partners to assess the problem of opioids among CalPERS members, to take appropriate actions, and to report relevant data. Kelly Pfeifer, MD, Director, High-Value Care, California Health Care Foundation, will present this item.

Budget and Fiscal Impacts

Not Applicable.

Benefits and Risks

Not Applicable.

Attachments

Attachment 1 – Curbing the Opioid Epidemic in California (slides)

Attachment 2 – Reducing Opioid Overuse Dashboard for Smart Care California

⁵ <http://www.ihc.org/our-work/insights/smart-care-california>

⁶ The lead responsibilities of DHCS and Covered California were inadvertently switched in the March 14, 2017, Pension and Health Benefits Committee Agenda Item 9 at <https://www.calpers.ca.gov/docs/board-agendas/201703/pension/item9-00.pdf>.

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