

# The Challenges of Managing Opioids

July 17, 2018

## Speakers

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- Sameer Awsare, MD, FACP, Kaiser Permanente Medical Group

## Goals

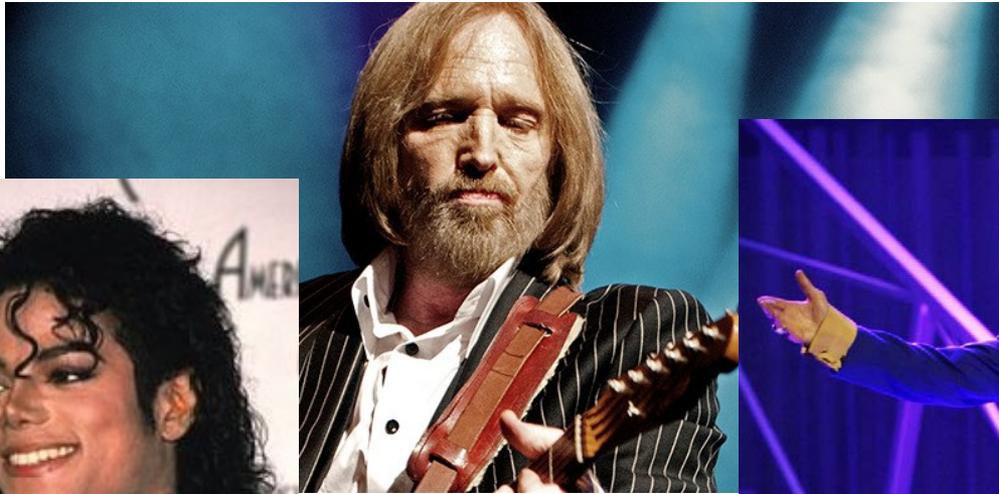
- Provide background on the cause of the opioid crisis and its impact on employers/CalPERS
- Share CalPERS and KP's perspective on managing the crisis
- Discuss strategies that employers/CalPERS can utilize to manage opioids in their populations

# Impact of Opioids in the US

- Every 19 minutes one person dies from Rx drug abuse
- 183,000 deaths from Rx opioid-related overdoses 1999-2015
- In 2012, 169,868 treatment admissions due to opioid abuse
- More than 1000 people per day treated in ED for misuse of opioids
- 12 million nonmedical users

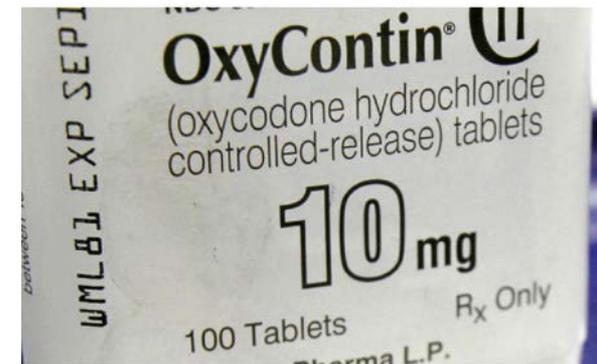
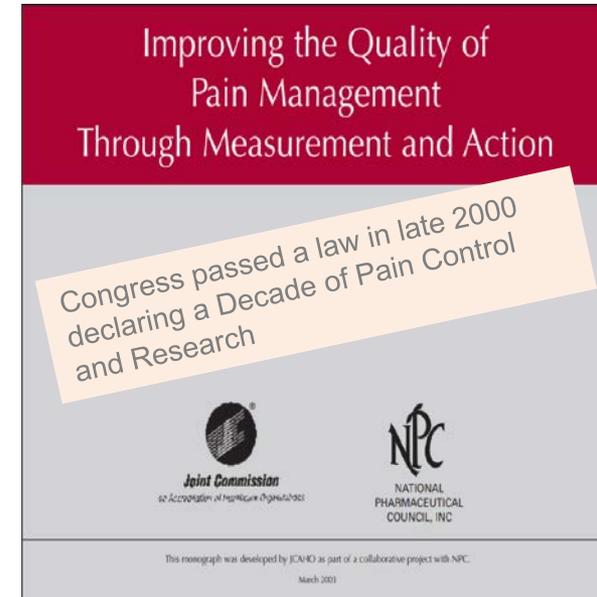


Opioid overdoses killed more than 42,000 people in the U.S. in 2016. Famous cases:



# How did this happen?

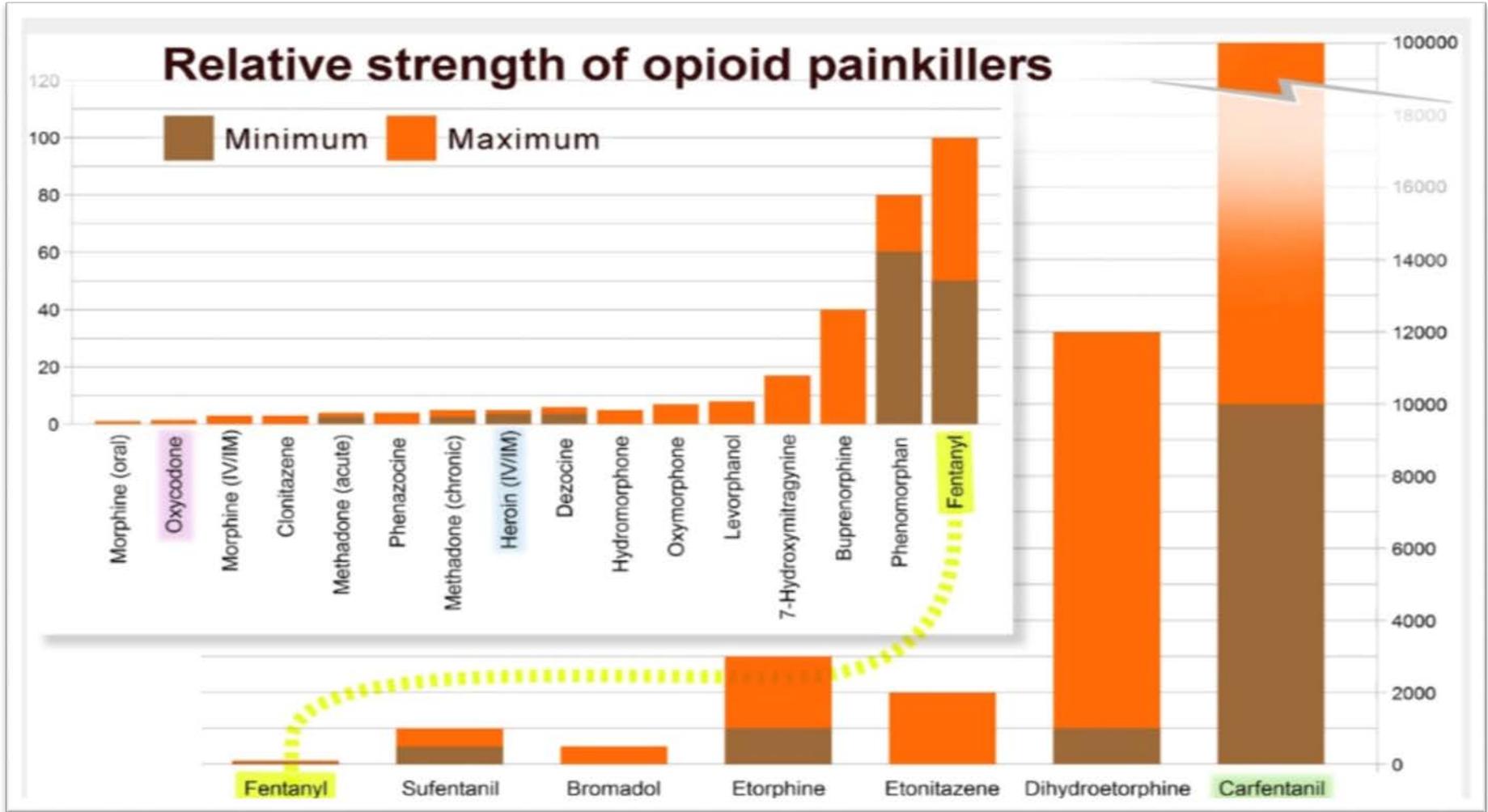
- 1 of every 3 Americans has **chronic pain**
- Pharmaceutical companies leveraged **two small studies** to encourage MDs to prescribe opioids for non-cancer pain
- At the time, physicians were **told opioids were not addictive**
- Physicians **allowed dosages to escalate** in response to complaints of pain (30% every 6 months)
- Once dependent/addicted to opioids – **difficult to stop**



## The Addictive Nature of Opioids

- 5% of people who take prescription painkillers for **just 3 days** were still on the drugs a year later
- About 15% of people who take prescription painkillers for **6-8 days were still taking them a year later**. At 2 weeks, that number jumps to more than 25%
- 1 out of 3 who take these meds for **1 month become long-term users**

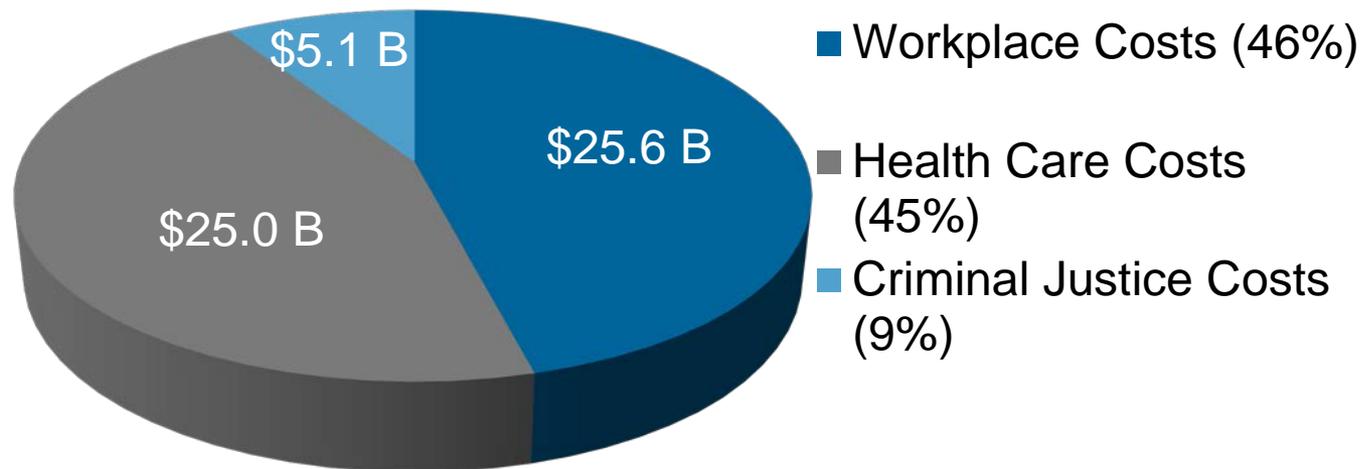
# The Challenges of Managing Opioids





# Crisis Impact of Prescription Opioids (I)

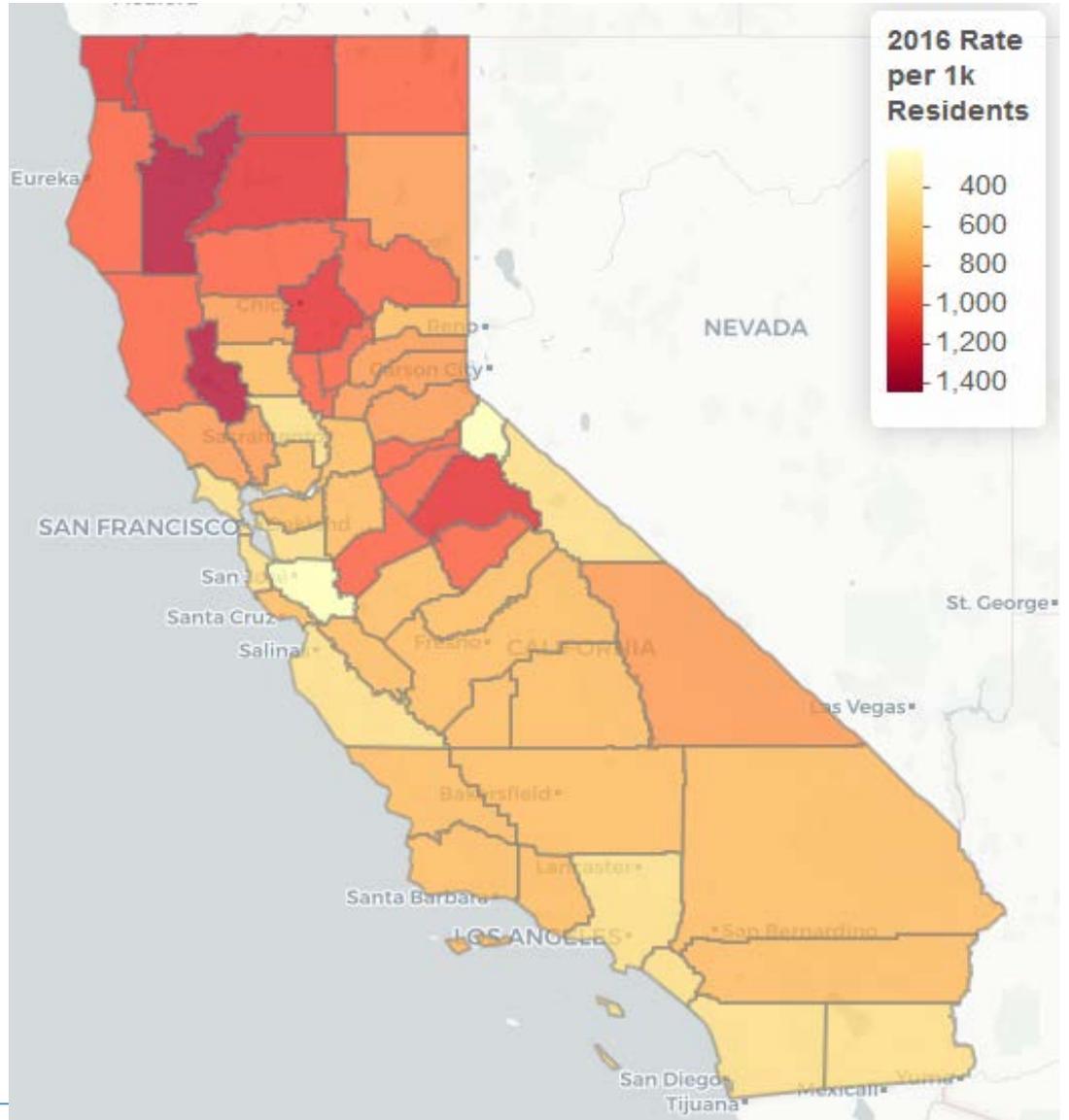
- Total cost to US society **\$55.7 billion** (2011)



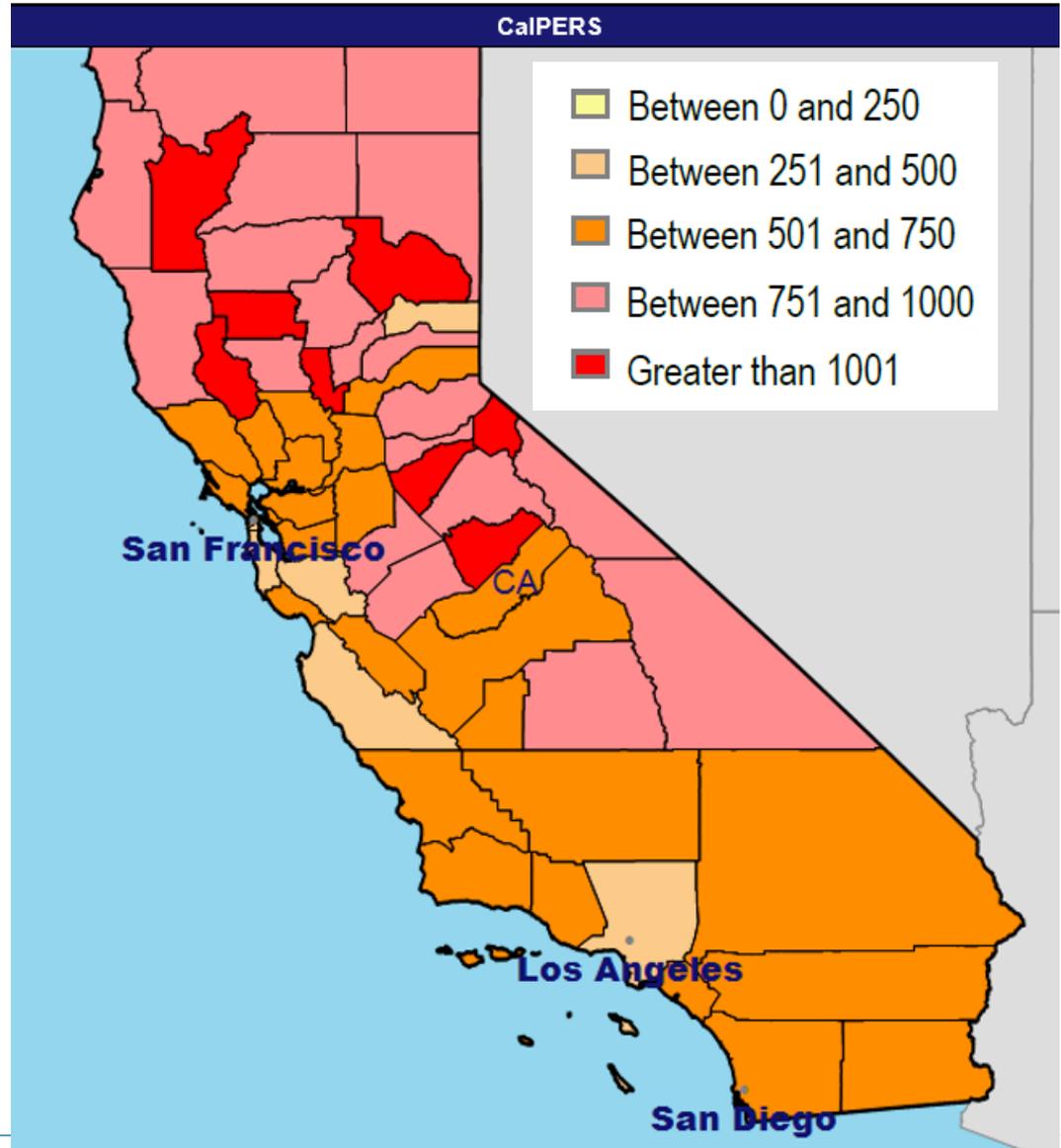
## Crisis Impact of Prescription Opioids (II)

- 70% of employers have been affected by problems related to prescription drug abuse including, absenteeism, impaired performance, and workplace injury
- Opioid abusers have a 8.7 times greater health care cost
- The cost of drug diversion to health insurers is estimated to be \$72.5B/year.

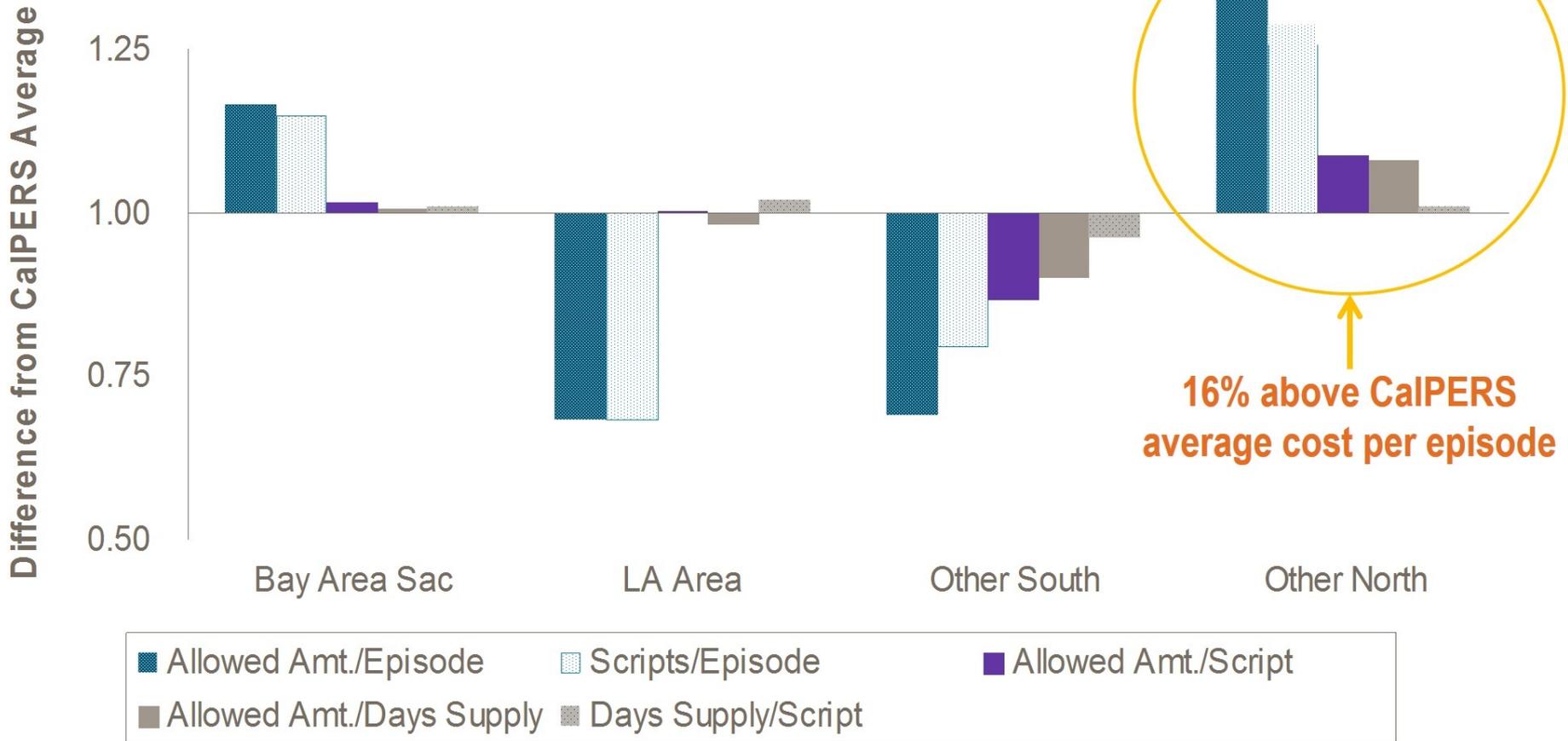
# California Opioid Prescriptions: Crude Rate per 1,000 Residents by County, 2016



# CalPERS Opioid Prescriptions: Crude Rate per 1,000 Residents by County, 2016



# Osteoarthritis among CalPERS Members: Regional Variation in Treatment with Oxycodone, 2008



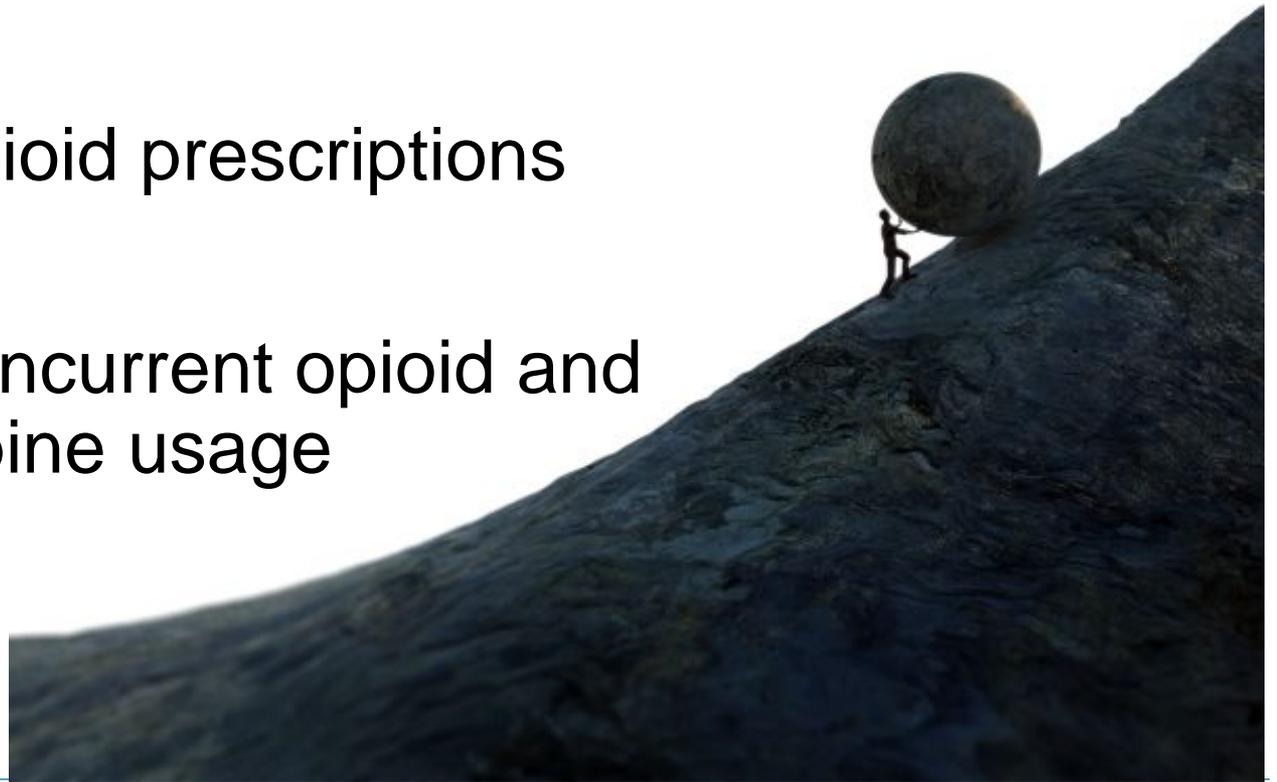
## Among CalPERS Top Ten Non-Specialty Drug Expenses, 2012-2016...

- 2012: OxyContin - Ranked #5
- 2013: OxyContin - Ranked #5
- 2014: OxyContin - Ranked #10
- 2015: OxyContin - Ranked #10
- **2016: No longer in the Top 10**

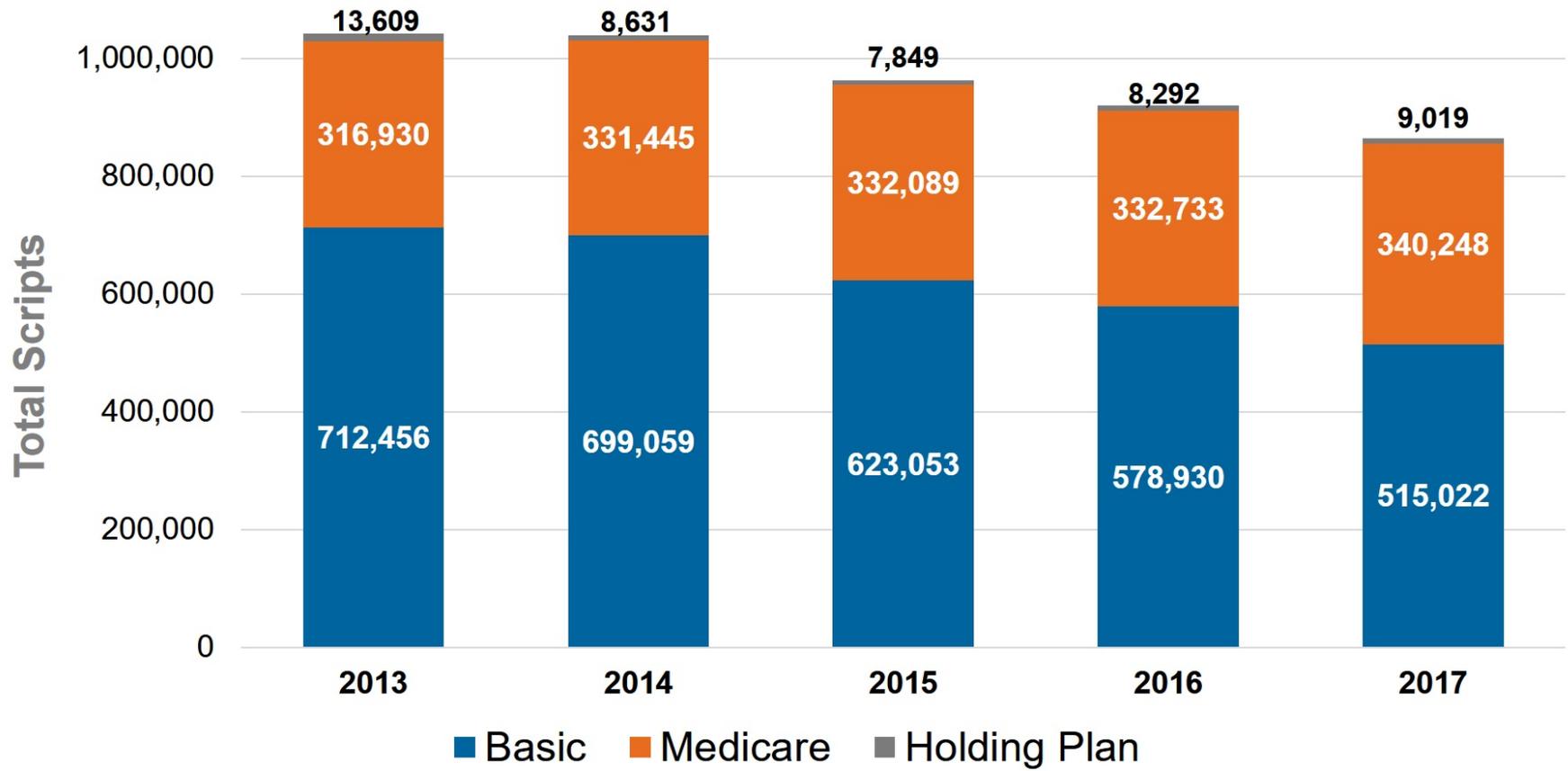


# Challenges We Face From Opioids

- Reduction of members with opioid prescriptions
- Reducing opioid prescriptions
- Reducing concurrent opioid and benzodiazepine usage



# Opioid Prescriptions for CalPERS Members in Medicare vs Basic Plans, 2013 to 2017





# Opioid Usage for CalPERS Basic Members with Lower Back Pain, Fiscal Year 2016

Opioid Usage	Allowed Amount	Scripts
Members with Lower Back Pain	\$3,465,275	41,583
All Members	\$27,197,507	411,745
Lower Back Pain Members Percent	12.7%	10%

Top 6 Opioids by Allowed Amount	Allowed Amount	Scripts
OxyContin	\$1,094,459	1,513
Hydrocodone/ Acetaminophen	\$438,677	17,569
Oxycodone/ Acetaminophen	\$302,243	4,906
Morphine Sulphate ER	\$214,243	2,195
Fentanyl	\$197,235	1,685
Nucynta ER	\$121,239	191

# Importance of Partnerships



SMART CARE  
CALIFORNIA  
*Less Waste. Less Harm. Better Care.*



# CalPERS Opioid-Related Strategic Measures Under Development

- Morphine Milligram Equivalents (MME)
- Use of Opioids at High Dosage
- Use of Opioids from Multiple Providers



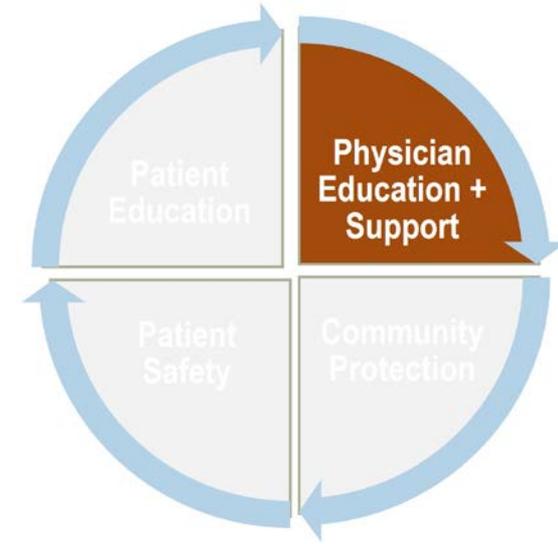
# Kaiser Permanente's Approach to Opioid Management

# Four-Pronged Approach to Opioid Safety



# Physician Education + Support

- Detailed clinical workflows for acute and chronic pain
- EMR tools
- Effective collaboration with colleagues (pain specialists, psychiatrists, pharmacists, physical therapists, case managers, etc.)
- Monthly MD reports
- Pharmacy initiatives/collaboration



Using calculator

- ▼ Chronic Opioid Use
  - ▼ Chief Complaint
    - CHRONIC PAIN
  - ▼ Visit Diagnosis
    - New Starts: Add Diagnosis to Problem List after signing SmartSet
    - MONITORING OPIOID THERAPY [V58.83]
  - ▼ Progress Notes
    - CHRONIC OPIOID THERAPY (New Start or Follow Up)
  - ▼ Opioid Agreement Letter Problem List Diagnosis
    - Complete Opioid Agreement Letter at start of Chronic Opioid Therapy
    - Add Diagnosis to Problem List after signing SmartSet.
    - OPIOID MEDICATION AGREEMENT LETTER [V68.89]
  - ▼ Patient Risk Score Problem List Diagnosis

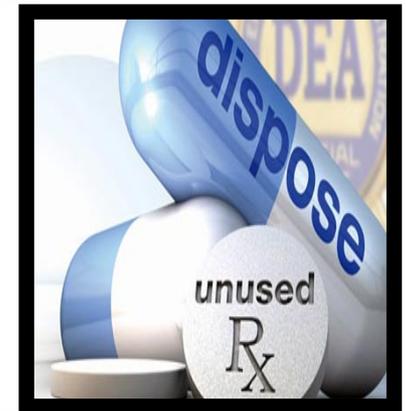
## Community Protection (I)

- Eliminate brand-name opioids whenever possible
- Decreased total quantity of opioids in the community through reduced prescribing
- Increased access to medication take back bins in our pharmacies



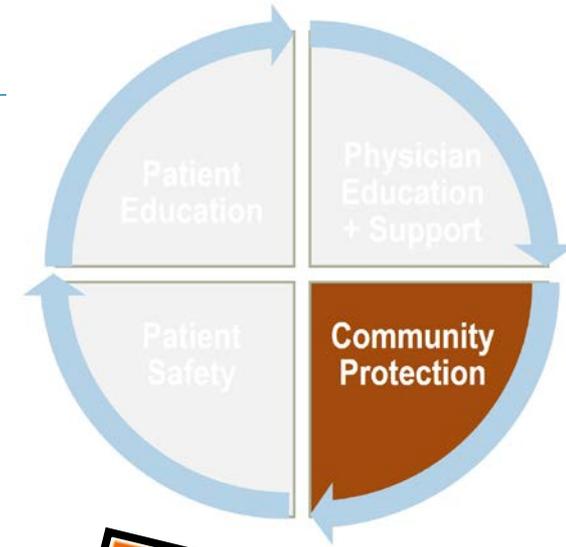
California lawmaker proposes limiting opioid prescriptions to 3 days

AB 1998 seeks to help solve the opioid crisis



# Community Protection (II)

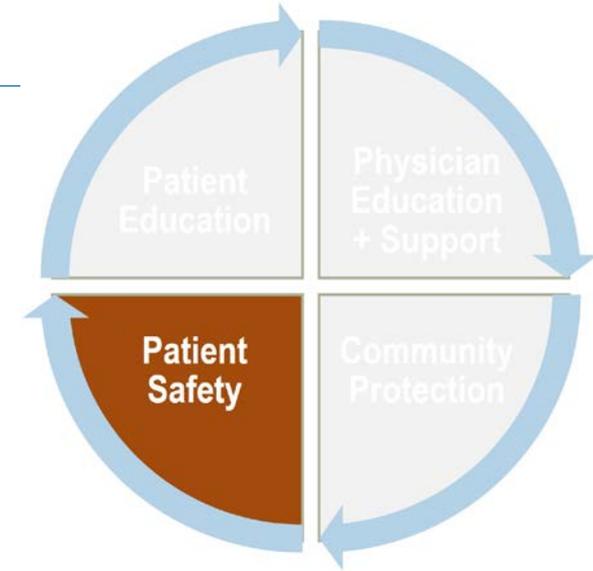
- Consistent monitoring of Urine Drug Screen and state prescription monitoring database prevents diversion
- Strategic partnerships with various community initiatives aiming to improve opioid safety
- Collaborations with government, academic, and non-profit organizations to promote best practices for opioid safety





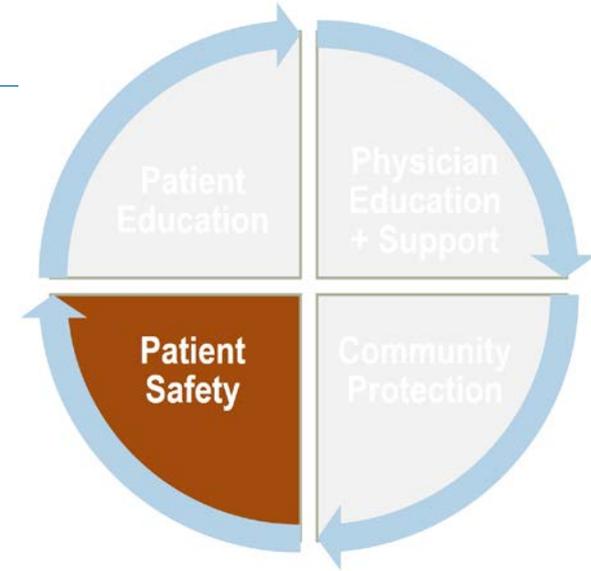
## Patient Safety (I)

- Provide effective pain management alternatives that empower patients to manage their pain
  - cognitive behavioral therapy
  - group classes
  - mindfulness training
  - Tai Chi
  - acupuncture



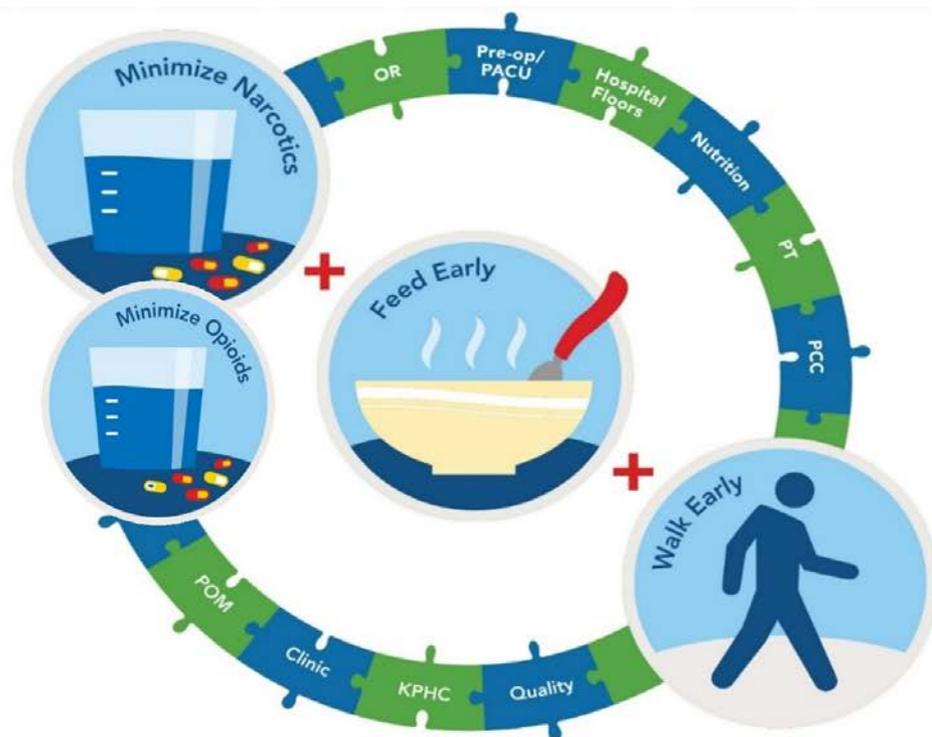
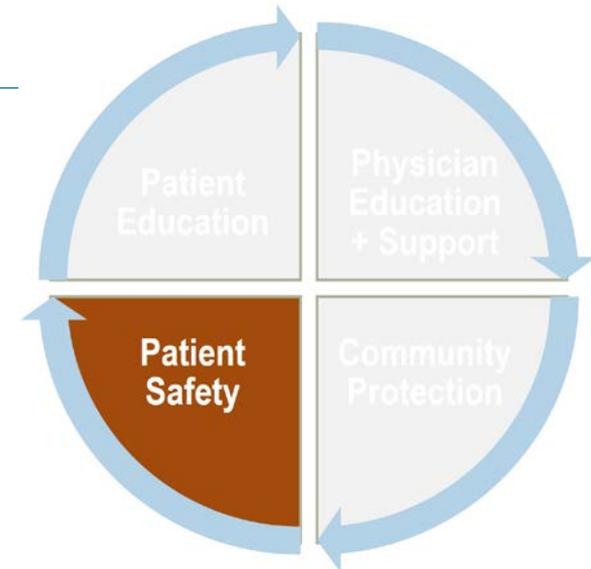
## Patient Safety (II)

- Prescribe lower doses and shorter courses when opioids are medically necessary
- Taper higher dose patients in a personalized manner or stop opioids when clinically indicated
- Decrease # of patients on opioids + benzos
- Prescribe naloxone for appropriate patients using chronic opioids



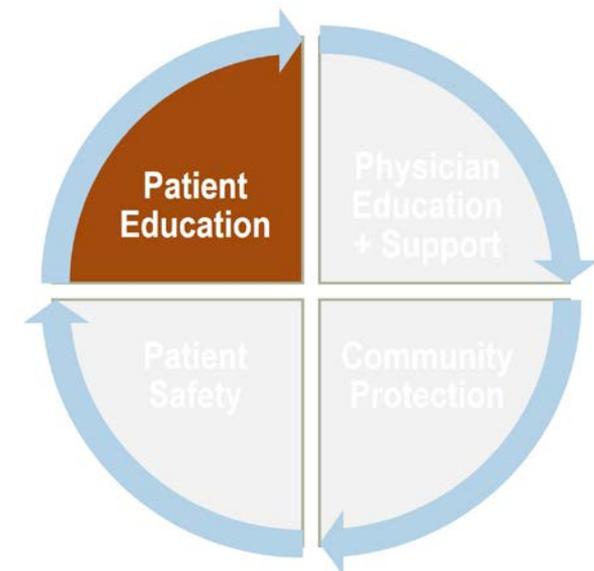
# Patient Safety (III)

- Enhanced recovery after surgery - orthopedic surgery protocols



# Patient Education

- Detailed informed consent (medication agreement) detailing risk/benefits of chronic opioid therapy and behavioral expectations
- In person and online opioid resources for members
- Periodic and consistent visits with physician to discuss pain condition and opioid medication



### My Doctor Online

10 results found for **opioids**

#### [Facts About Opioid Therapy for Chronic Pain](#)

Opioids are strong pain relief medications. They are used to reduce acute or chronic pain so you can get back to your regular activities....

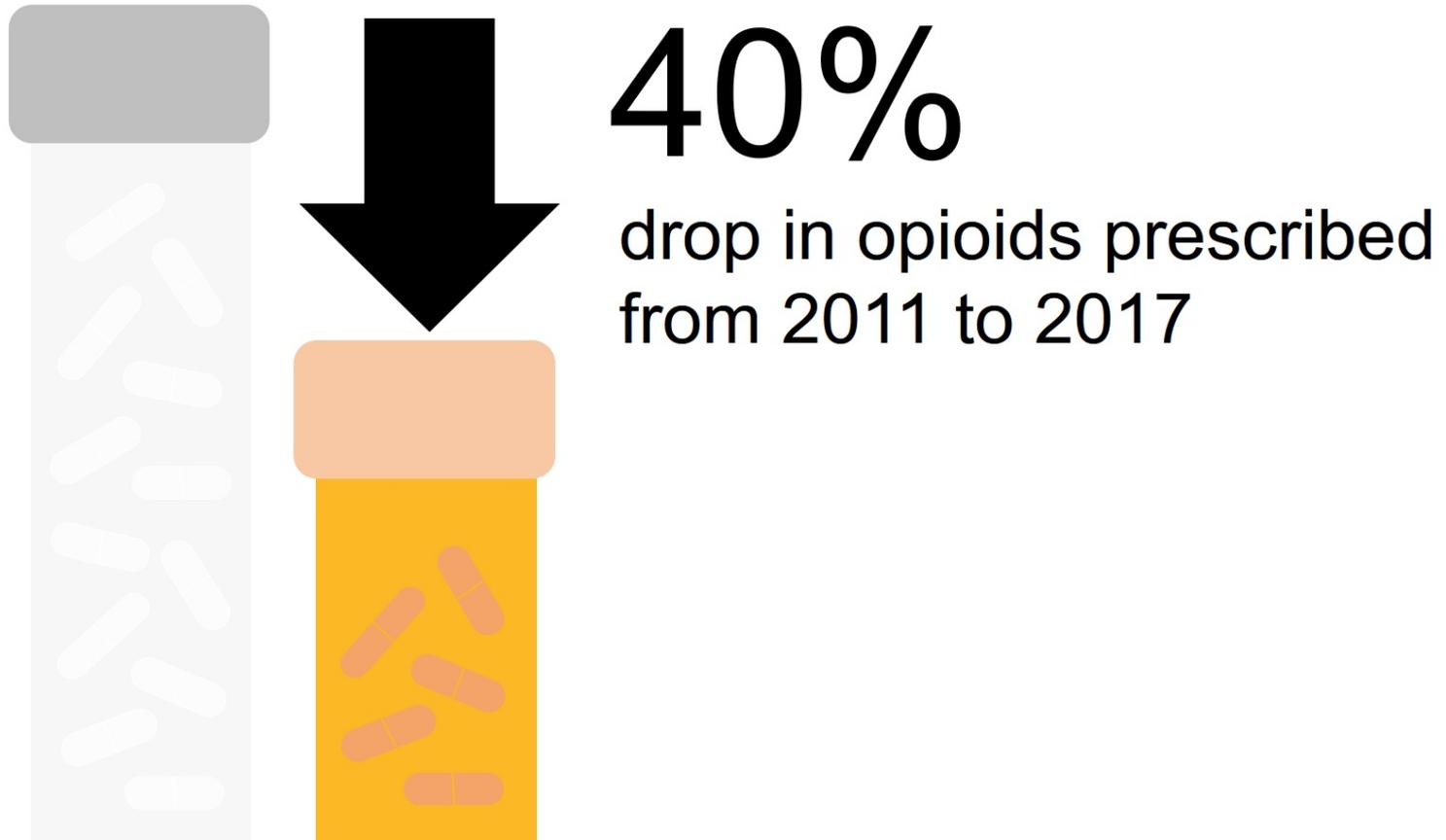
#### [Treating Chronic Pain with Opioid Therapy](#)

Opioid medications can help reduce the amount of pain you may feel. They don't work for every kind of pain, however. Long-term use of...

#### [Naloxone \(Evzio\) for Opioid Overdose](#)

Naloxone (Evzio) medication can be used for opioid overdose, such as misuse of medication like morphine or use of illegal...

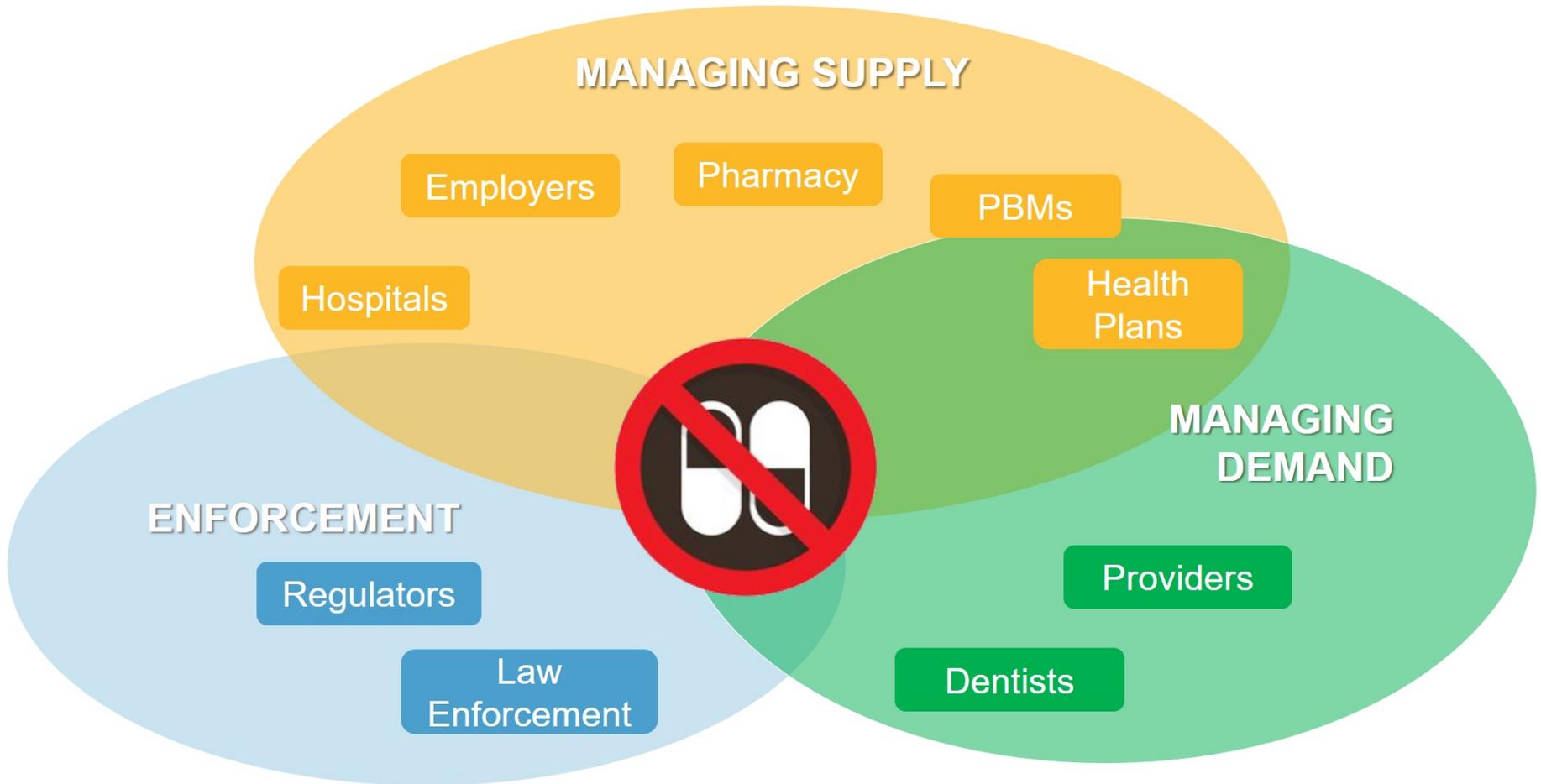
# We've made dramatic progress



## Successful Strategies

- Strong, visible leadership support
- Clarity and consistency of message across physicians & administration
- Interdisciplinary work group to oversee decisions
- Provide coaching, education and support
- Include patient-clinician communication strategies
- Use of physician specific data
- Identify individuals to help colleagues with tough cases
- Collaboration between the medical group and pharmacy

# A Multi-Stakeholder Strategy



# Questions and Discussion