Health Plans are working to combat the Opioid Crisis

Concerns about opioid misuse, addiction, and overdoses have led health plans in California and nationally to take a leadership role in combatting this public health crisis.

For example, America’s Health Insurance Plans (AHIP) recently launched its Safe, Transparent Opioid Prescribing (STOP) Initiative. The STOP Initiative is designed to support widespread adoption of clinical guidelines for pain care and opioid prescribing.

Health plans have consistently supported the CDC’s opioid guidelines to promote evidence-based pain care and reduce unnecessary opioid prescribing. The STOP Measure takes these efforts much further by establishing an industry-wide approach to measuring performance against the CDC guidelines, tracking and reducing the number of opioid prescriptions.

Health plans work closely with doctors and nurses on the opioid issue. This includes practicing more cautious opioid prescribing, limiting overall dosages, and identifying alternative forms of pain management. Many health plans have already instituted new programs that are helping to dramatically reduce how much – and how often – opioids are prescribed.

What actions are health plans taking?

Some Medi-Cal plans are approaching the opioid crisis by beginning with short-acting opioids and limiting initial supplies. This is usually the first part of a multi-pronged strategy. Other plans take the approach of using drug utilization review programs that include specific triggers. A drug utilization review program refers to an ongoing review of prescribing, dispensing and use of medication.

Meanwhile, other plans combine pharmacy monitoring, patient education, and alternative pain management strategies. These are just a few of many actions that Medi-Cal plans are taking in California.

Many health plans have also made it a goal to reduce prescribed opioids filled at pharmacies dramatically over the last several years.

Some plans have narcotic safety initiatives in place that aim to help their members avoid opioid abuse and addiction. These efforts are resulting in significant reductions in opioid use among participants with non-cancer pain.

Some plans have implemented maximum opioid dose limits for up to 90 days for members just starting opioid therapy. Data suggests that 67% of patients who continue to use opioids beyond 90 days become long-term opioid users.

Other actions health plans in California have taken include:

- Using formulary controls (authorization review for certain drugs or doses, and removing certain drugs from plan formularies)
- Expanding access to non-opioid treatments for patients with chronic pain.
- Ensuring availability of “medication-assisted treatment” for addiction. Medication-assisted treatment is the use of medications in combination with counseling and behavioral therapies for the treatment of substance use disorders.
- Most health plans participate in opioid safety coalitions in their communities, which are broad groups of community stakeholders committed to decreasing opioid use and overdose deaths. Examples of opioid safety coalitions in California include: Sacramento County opioid task force, ‘SafeMedLA’ in Los Angeles County, and Inland Empire Opioid Crisis Coalition.

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