2016 IBI CONFERENCE





Systemic issues of opioid abuse

Presenters

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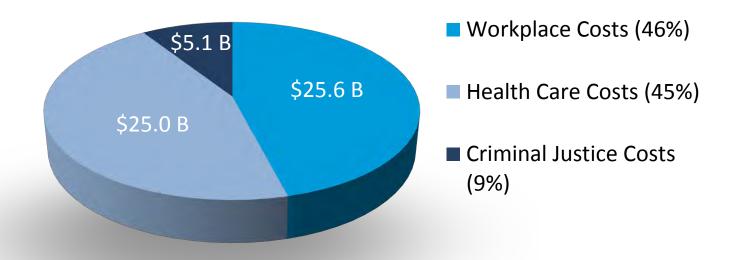
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Agenda

1	DEFINE THE OPIOID PROBLEM IN THE USA (STATISTICS & COSTS)
2	SHARE IMPACTS: COMMUNITY, EMPLOYERS, FAMILY
3	BEST PRACTICES
4	SEDGWICK INITIATIVES AND LESSONS LEARNED
5	KAISER INITIATIVES AND LESSONS LEARNED
6	KEY POINTS

Crisis impact of prescription opioids

Total costs to US society \$55.7 billion (2011)



- Opioid abusers have a 8.7 times greater health care cost
- \$72.5B/year is the estimated cost of drug diversion to health insurers

Societal costs of prescription opioid abuse, dependence, and misuse in the United States, 2011 Pain Med. 2011 Apr;12(4):657-67. Birnbaum HG1, White AG, Schiller M, Waldman T, Cleveland JM, Roland CL.,

Alarming statistics

78 PEOPLE DIE EVERYDAY

According to the CDC



of all the opioids dispensed in the world are dispensed in the U.S. (4.6% of population)



of all the hydrocodone dispensed in the world is dispensed in the U.S.

28,647

estimated annual opioid fatalities in the U.S.

(2014)

Twice the number of heroin fatalities and four times the number of cocaine fatalities

2014

9% increase in prescription opioid deaths

26% increase in heroin deaths

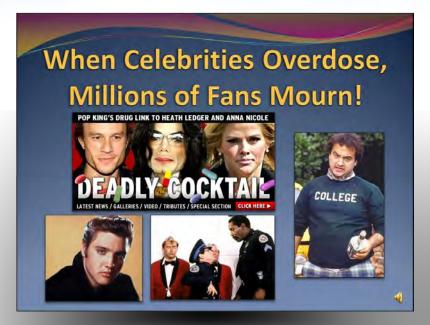
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Prescription opioids lead to heroin



- Opioid addictions lead to increased heroin use
- Overdoses have tripled in past 4 years
- Readily available
- Inexpensive
- Good replacement for prescription opioids
- Very addictive
- Physical dependence
- Withdrawal
- Associated with infectious diseases such as HIV and Hepatitis (Indiana)

Famous cases



Philip Seymour Hoffman mourned at private funeral

By Ray Sanchez, Kristen Hamill and Rande laboni, CNN updated 2:27 PM EST, Fri February 7, 2014



1.4 million ED visits for misuse or abuse of pharmaceuticals 2011
169,868 non-heroin opiate substance abuse admissions in 2012
11 million self-reported nonmedical users in 2011

Center for Disease Control: http://www.cdc.gov/homeandrecreationalsafety/overdose/facts.html
Substance Abuse and Mental Health Services Administration Treatment Episode Data Set (TEDS) 2002 – 2012
National Admissions to Substance Abuse Treatment Services

Possible explanations

- 1 of every 3 Americans have chronic pain
- Congress passed a law in late 2000 declaring a Decade of Pain Control and Research which was signed by the president
 - Actively supported by the American Pain Society
- Manufacturers misled physicians about indications and implications
- Addictive properties not well understood or communicated
- Doctors allow dosages to escalate in response to complaints of pain
 - No objective measure for pain
- Once addicted difficult to address (low success rate)
 - Time factor
 - Inpatient detoxification
 - Huge expense

Impact on claim duration and costs

Louisiana study (11,000 claims)

DURATION OF CLAIM

795 DAYSUse of short acting opioid

1,600 DAYS
Addition of BZD

1,721 DAYS
Use of long acting opioid

2,168 DAYS
Addition of BZD

COST OF CLAIM (MEDICAL + INDEMNITY)

\$43,438
Use of short acting opioid

\$123,311 Addition of BZD

\$139,734

\$211,097 Addition of BZD

Use of long acting opioid

Sedgwick study (800,000+ claims)

SEDGWICK BOOK OF BUSINESS



of injured workers take opioids



of drug spend is on opioids



week increase in duration caused by opioids

^{*,} Lavin, Xuanguang Tao, Larry Yuspeh, and Edward Bernacki. "Impact of the Combined Use of Benzodiazepines and Opioids on Workers' Compensation Claim Cost." Journal of Occupational and Environmental Medicine 56.9 (2014): 973-78.

Best practice for initial/acute opioid therapy

RISK ASSESSMENT

"TRIAL" OF THERAPY

BASELINE URINE DRUG SCREEN

OPIOID AGREEMENT

Best practice chronic opioid therapy

non cancer

FOCUS ON FUNCTIONALITY

CONDUCT RANDOM DRUG SCREEN CHECK THE PDMP WEBSITE

DRUG HOLIDAY

PILL AND Patch count

60% OF PATIENTS TAKING OPIOIDS FOR AT LEAST THREE MONTHS ARE STILL ON OPIOIDS 5 YEARS LATER

Studies show that the overall effectiveness of opioids in addressing pain is modest at best and the effect on function is minimal

SERIOUS CONSEQUENCES INCLUDE

- overdose
- Emergency Department visits
- immunosuppression
- decreased testosterone

- medication abuse
- diversion
- behavioral and social issues

Addressing the crisis

















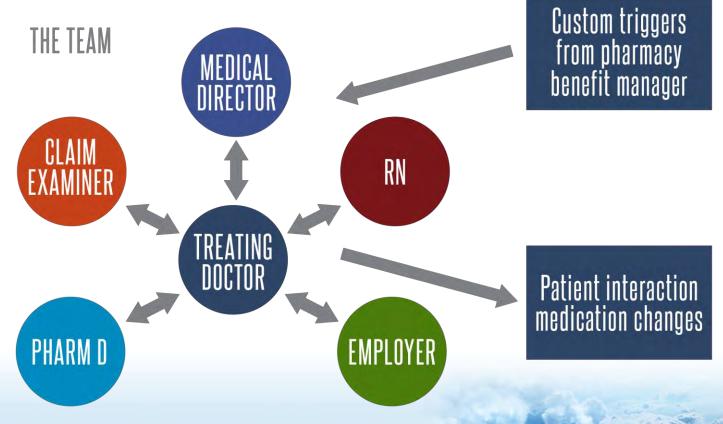
Methods to address the crisis



Holistic, integrated approach

SEDGWICK PROGRAM

- Early prevention: utilization review at the point of sale
- Trend identification: complex pharmacy management
- Address well developed cases



Results: complex pharmacy management

2014	% Decrease
Average # medications	15%
Morphine equivalent dose	40%
RX cost	35%

2015	% Decrease
Average # medications	27%
Morphine equivalent dose	43%
RX cost	53%

UDS 2014	Results	
Consistent	68%	
Illicit	2%	
Below range	2%	
Prescribed drug not found	17%	32%
Non prescribed drug found	11%	

UDS 2015	Results
Consistent	64%
Illicit	5%
Below range	5%
Prescribed drug not found	17%
Non prescribed drug found	9%

36%

Pharmacy utilization review

- BEFORE DISPENSED BY A PHARMACY
- PREVENTS INAPPROPRIATE MEDICATIONS
- OPPORTUNITY TO DISCUSS ISSUES WITH TREATING PHYSICIANS

2014

Results

% Approved	% Negotiated/ withdrawn	% Denied
58.1%	4.3%	37.6%

2015

Results

	% Negotiated/ withdrawn	% Denied
58%	2%	41%

Observations and lessons learned

- Many physician are not calculating Morphine Equivalent Dosage (MED)
- The best physicians are managing from the very first script
- Ceiling thresholds
- Dangerous combination of medications
- Need enhanced focus on function
- Integrate functional therapies
- Evidence-based guidelines/State guidelines
- Physician site visits for non-compliance