

Payer Initiatives to Work with Patients on Chronic Opioid Therapy

As the opioid epidemic has spread throughout the country, health insurance providers have provided leadership in helping to address our nation's opioid crisis. These efforts have included prevention, early intervention, and substance use disorder (SUD) treatment and support as outlined in the [STOP Playbook](#).

Health plans provide tools and information to their members and network providers to avoid use of high-dose and long-term opioids for pain, and to taper people off of high-risk opioid prescriptions when clinically appropriate. For their members who suffer from SUD, insurance providers connect them with treatment options including medications and behavioral health services to support long-term recovery.

While health insurance providers are undertaking efforts to mitigate the ongoing crisis, they recognize that opioids can be a valuable tool in treating pain in certain circumstances. Based on clinical best practices, insurance providers want to prevent patients from being treated with chronic opioid therapy where possible. However, as opioids were widely prescribed for many years, millions of Americans are on opioid therapy that may not be consistent with clinical guidelines. To address challenges facing these patients, health plans provide access to evidence-based non-opioid pain management to avoid abruptly dropping patients from their pain medication or putting them at unnecessary risk of negative health outcomes.

Differentiating between SUD and Chronic Opioid Therapy

Clinical experts at health plans make a distinction between patients on long-term opioid therapy with a physical dependence on opioids who adheres to a physician's orders and patients suffering from SUD. Insurance providers work with their provider networks to differentiate between the two circumstances, with different pathways for each situation. For patients on chronic opioid therapy, insurance providers help reduce the risk associated with opioid medications and encourage the use of non-opioid pain management strategies, both non-opioid pharmaceuticals such as NSAIDs and non-pharmaceutical

options such as physical therapy and acupuncture. For those with SUD, treatment requires interventions for the chemical dependency and behavioral health support services.

Effective Pain Management

Because opioids for pain management carry significant risk, insurance providers work with their members and providers to reduce those risks. Ideally, patients should work with their clinicians to find effective pain management without opioids. However, where opioids are used for long-term pain management, insurance providers use informatics and data analytics to identify providers who prescribe high-risk doses of opioids compared to the CDC Guideline for Prescribing Opioids for Chronic Pain and to their peers. Insurance providers work with clinicians to adjust prescribing practices, to educate and develop corrective action plans, and to offer resources to help ensure patients receive safe, effective care.

Additionally, insurance providers make sure that patients who are on chronic opioid therapy have dose-reduction plans in place, access to overdose-reversal medication naloxone, and limited concurrent use of benzodiazepines, which can significantly increase the risk of adverse effects. Insurance providers also work across providers and pharmacies to prevent patients from receiving opioids (or other high-risk medicines) from multiple providers or pharmacies, and in some cases identify, de-credential and shut down "pill mills."

Some plans leverage Centers of Excellence for opioid prescribing and others have instituted drug testing to promote adherence to care plans. Insurance providers also support the use of virtual care to assist in connecting patients to pain specialists and behavioral health providers and for providers to connect with large, tertiary hospitals via Project ECHO.

Through these and other strategies that engage patients and clinicians, health insurance providers work to protect the safety of their members while ensuring that pain management goals are achieved.