

**America's Health  
Insurance Plans**

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September 22, 2017

National Association of Attorneys General  
1850 M Street, NW, 12<sup>th</sup> Floor  
Washington, DC 20036

**RE: Prescription Opioid Epidemic**

On behalf of America's Health Insurance Plans (AHIP), thank you for your leadership to combat the opioid epidemic. Opioid abuse and addiction are an urgent public health crisis. We share your urgency – and we share your commitment to solve it together.

You requested additional efforts and policy changes by health plans to increase the use of non-opioid pain management therapies to address the misuse of, and addiction to, opioids. AHIP member plans are committed to alleviating the root causes that contribute to opioid misuse and addiction.

Combatting drug abuse and addiction is just one important part of the health care coverage and related services that AHIP members provide. Our members improve and protect the health and financial security of consumers, families, businesses, communities, and the nation. We are committed to market-based solutions and public-private partnerships that improve affordability, value, access, and well-being for consumers.

The Attorneys General note that the opioid epidemic is the preeminent public health crisis of our time and AHIP agrees. A new CDC study released this week found that opioid abuse is now reducing U.S. life expectancy overall – reversing consistent increases from 1970 to 2014<sup>1</sup>. The consequences of opioids are profound, and they impact individuals and families no matter where they live, how much they earn, or how old they are. No one should live with pain, but no one should live with the consequences of opioid addiction either.

We share your belief that our industry and our members are key parts of the solution. Health plans embrace a comprehensive approach to tackling opioid abuse and addiction, while ensuring access to effective, treatment for patients.

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<sup>1</sup> Contribution of Opioid-Involved Poisoning to the Change in Life Expectancy in the U.S. from 2010-2015, Sept. 2017, Journal of American Medical Association: <http://jamanetwork.com/journals/jama/article-abstract/2654372>

## **How Health Plans are Combating the Opioid Epidemic**

Our health plan members continue to expand and refine a comprehensive, multi-faceted approach to preventing and managing opioid misuse and related conditions. Already, health plans are leading a wide range of efforts to address and solve the opioid crisis and making valuable contributions to combat this epidemic.

Health plans work closely with doctors and nurses on the safest, most proven, and most effective approaches to pain management. 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. For example:

- **Anthem** is working closely with physicians to control opioid prescribing by promoting adherence to the Centers for Disease Control (CDC) prescribing guidelines. Leveraging their access to pharmacy claims data, they can alert providers when prescription patterns are falling outside of those guidelines. Recently, they achieved their goal of reducing prescribed opioids filled at pharmacies by 30 percent – two years ahead of schedule.
- **Independence Blue Cross** has developed a number of initiatives to prevent and fight opioid addiction, such as restricting initial prescriptions of low-dose opioids to five days or less and working closely with physicians on prescribing. In 2017, the number of their members taking opioids also fell by 30 percent, and the number of opioid prescriptions has fallen by more than a third.
- **UPMC Health Plan** is combatting the opioid epidemic by integrating behavioral health and primary care. They offer a unique Special Program Assistance for Providers to help educate providers on health management, behavioral health case management, referral coordination, and transfers to a psychiatrist.
- **Centene, Harvard Pilgrim and AmeriHealth Caritas**, among others, are also pursuing avenues of non-pharmacologic pain management and offering coverage for therapies such as acupuncture when determined medically necessary.

Additionally, other efforts to partner with providers to tackle this epidemic and ensure patients are getting the care they need include:

- Encouraging the use of evidence-based care through medical management practices including non-narcotic medications, which research has shown can provide just as much relief as opioids.

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- Promoting safe prescribing, careful patient monitoring, and open and honest discussion with patients about pain and how to manage it – from lifestyle changes to over-the-counter options and clearly understanding the dangers of opioids.
- Exploring and improving access to non-pharmacologic pain treatments that have been proven effective in reducing pain. Every patient is different and every situation is different. Depending on the individual patient, therapies like exercise, mind-body interventions (yoga), psychological interventions (cognitive therapy), massage, and acupuncture can be an effective first line of treatment for many before moving on to pharmaceuticals when necessary.
- Leveraging data analytics to proactively identify patients who may be at-risk for addiction, and intervene early if indications of abuse are identified.
- Providing access to evidence-based substance use disorder therapies and innovative, holistic treatment plans to help patients get and stay sober.

To continue to address this issue and create an open, ongoing dialogue with our members, AHIP has sponsored an opioid workgroup, which meets regularly. This group represents plans across the country that serve millions of customers in every insurance market, from large national providers to small, Medicaid-only plans. It's led by health plan physicians, care providers, and other experts who share their expertise on the most effective strategies to combat opioid abuse and reduce the number of opioid prescriptions.

Recently, the opioid workgroup responded to the establishment of the President's Commission on Combating Drug Addiction and the Opioid Crisis<sup>2</sup>. In our letter to Governor Chris Christie, we highlighted how health plans are already tackling this issue and how different stakeholders from the health industry, law enforcement, policymakers, and others can work together to solve this crisis. Additionally, we developed a Q&A document on opioids<sup>3</sup>, used to inform and support a dialogue between patients and their doctors exploring the best options for managing and relieving pain.

### **Incentivizing Opioid Alternatives**

Health plans agree that there must be incentives in place to promote the use of non-opioid alternatives – and there are. We are aligned with your belief that pursuing strong, effective

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<sup>2</sup> AHIP Letter to President's Commission on Combating Drug Addiction and the Opioid Crisis, May 2017: <https://www.ahip.org/wp-content/uploads/2017/05/Combating-Drug-Addiction-and-the-Opioid-Crisis-5-2-2017.pdf>

<sup>3</sup> The Facts on Pain Care and Prescription Opioids, March 2017: <https://www.ahip.org/wp-content/uploads/2017/05/Combating-Drug-Addiction-and-the-Opioid-Crisis-5-2-2017.pdf>

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incentive structures will deliver considerable benefits. Although sometimes incorrectly characterized as a barrier, one of the most effective tools health plans have available to combat this epidemic is medical management<sup>4</sup>.

Health plans use medical management practices to design and develop value-based approaches that ensure necessary treatments, confirm treatment regimens ahead of time, dispense appropriate amounts of prescription drugs, and utilize the most cost-effective therapies. This ensures that patients receive the safest, most-effective care at the most affordable cost. Medical management can take several forms such as requiring prior authorization before a plan will approve payment for a drug, step-therapy in which plans require an evidence based systematic approach to therapy, and prescription tiering, in which certain drugs or drug classes are preferred over others.

These methods allow plans to:

- Limit the number of pills dispensed using a single prescription.
- Limit the duration of opioid therapy.
- Flag providers whose prescription practices are outliers.
- Require adherence to evidence-based protocols such as the current CDC guidelines.

By combining effective education, prevention, behavioral health care, and evidence-based treatment, health plans are making real, measurable progress in addressing addiction. Working closely with doctors, nurses, and other care providers, plans are providing people with better pathways to healing – without putting their lives in danger because of opioids.

There is no question that more must be done. To effectively solve the opioid crisis, it must be addressed comprehensively by all stakeholders – from law enforcement and the justice system, to social services agencies and state Medicaid programs, to health care providers, pharmacists, health plans, and pharmaceutical companies. Only through collaboration and cooperation can we address – and solve – this crisis, and further improve efforts for prevention, education, intervention and treatment.

Thank you for initiating a solutions-based dialogue on combatting this crisis together. AHIP welcomes the opportunity to work with you, and we stand ready to collaborate on potential policy solutions, pursue new partnerships, and support the Attorneys General on your mission to protect patients.

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<sup>4</sup> AHIP Issue Brief, Medical Management: Promoting Access to Safe, Appropriate, Cost-Effective Care, Jan. 2017: <https://www.ahip.org/medical-management-promoting-access-to-care/>

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Sincerely,

A handwritten signature in black ink, appearing to read "Richard Bankowitz". The signature is fluid and cursive, with a large initial "R" and "B".

Richard Bankowitz, MD, MBA, FACP

Chief Medical Officer, America's Health Insurance Plans