

OPIOIDS & SOONERCARE

Kaitlyn Wood, MHA

Research Analyst, Pharmacy Department



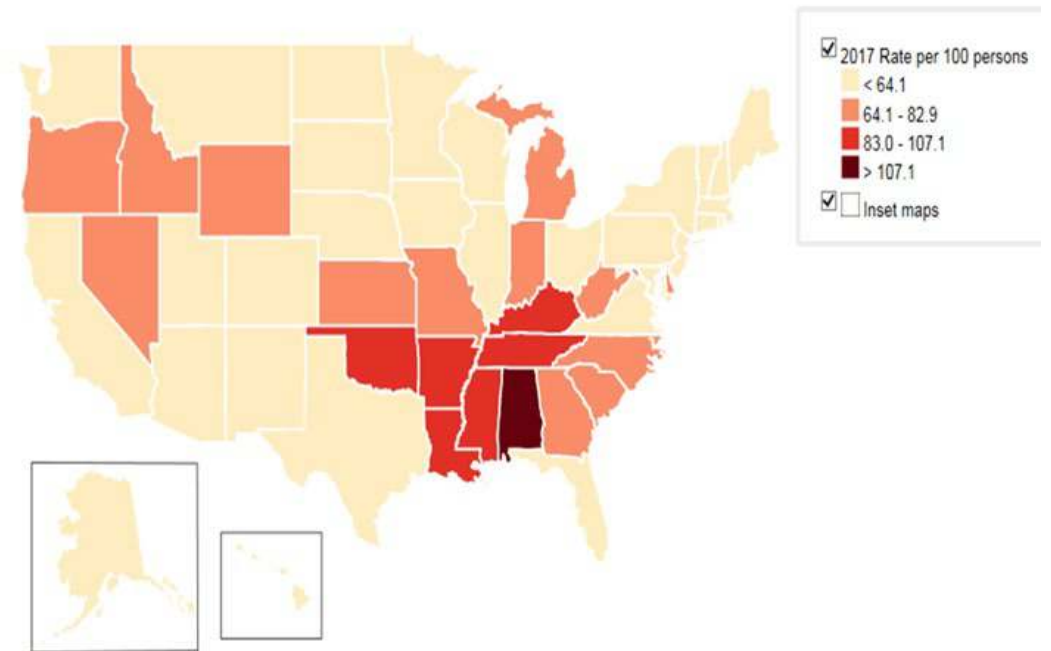
AGENDA

- Opioid Use in Oklahoma.
- Opioid Initiatives.
 - MAT prescriptions.
 - Prescribing guideline page.
- Prescriber Reminders.
 - Lock-in program.
 - Check the PMP.

OPIOID USE IN OKLAHOMA

OKLAHOMA STATISTICS

- In 2017, there were 388 overdose deaths involving opioids.
 - 14.6 deaths per 100,000 persons.
- Neonatal Opioid Withdrawal Syndrome has increased to 8.0 per 1000 hospital births in 2014 from 1.5 per 1000 in 2004.



Source: <https://www.cdc.gov/drugoverdose/data/prescribing.html> .
Accessed: August 19, 2019

MEDICAID PATIENTS HIGH RISK

- Research shows inappropriate prescribing practices are high among Medicaid patients when compared to privately insured.
- In a 2010 study, 40% of Medicaid enrollees with prescriptions for pain relievers had at least one indicator of potentially inappropriate use of prescribing.



OHCA RESPONSE

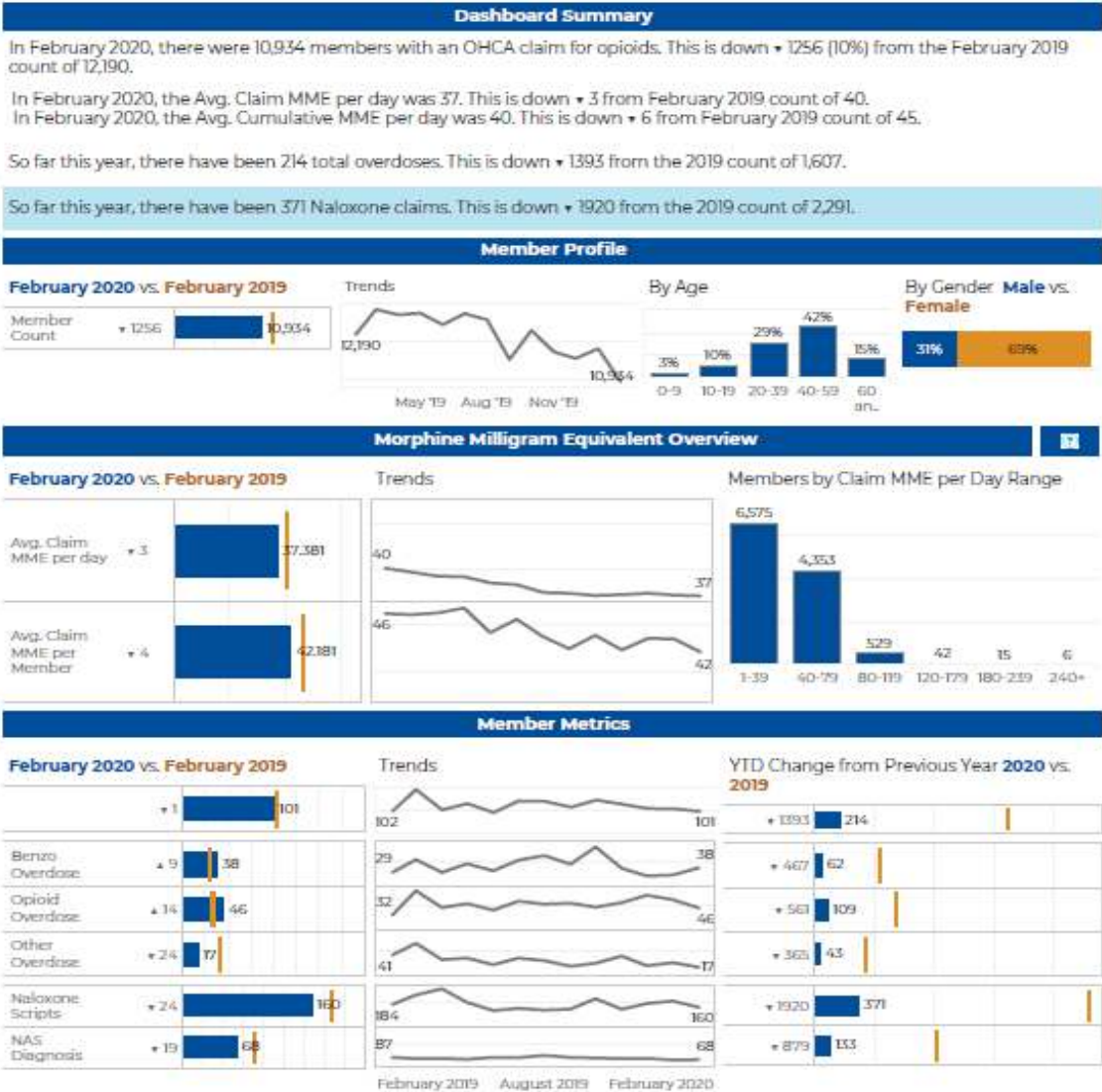
MORPHINE MILLIGRAM EQUIVALENT

- Morphine is considered the gold standard for the treatment of pain and is used as the basis for comparison via morphine milligram equivalent.
- The MME provides a conversion factor for one opioid to another and gives a standard for comparison.
- The CDC encourages caution for doses exceeding 50 MME per day.

MME CHANGES

- In January 2019, OHCA began incorporating MME into the claims processing system.
- Overlapping opioid claims are totaled to include a member's aggregate MME per day.
- The cutoff is 90 MME per day (effective October 2019).

MME DASHBOARD



MEDICATION ASSISTED TREATMENT

- In an effort to combat prescription drug abuse, OHCA is working to reduce barriers related to substance use treatment:
 - Prior authorization requirement on certain products were removed on July 31, 2019.
 - Prescribers must have an active DEAX number on file with OHCA to prescribe MAT products.
 - Continued PA requirements can be checked at: <http://okhca.org/MAT>.

MAT PRODUCTS

No Prior Authorization Required	Prior Authorization Required
<ul style="list-style-type: none"> • Suboxone[®] (buprenorphine/naloxone SL films)(BRAND PREFERRED) • buprenorphine/naloxone SL tablets (Generic ONLY) • Vivitrol[®] (naltrexone injection) 	<ul style="list-style-type: none"> • Bunavail[®] (buprenorphine/naloxone buccal films) • Zubsolv[®] (buprenorphine/naloxone SL tablets) • buprenorphine SL tablets (Subutex[®]) • Probuphine[®] (buprenorphine implant) • Lucemyra[™] (lofexidine) • Sublocade[™] (buprenorphine ER injection) • buprenorphine/naloxone SL films (generic)

SL = sublingual; PA = prior authorization; ER = extended-release


MAT AND PROVIDERS

- To ensure your DEAX is on file, email prescriber information to: providerenrollment@okhca.org.
- For more information on obtaining a waiver and DEAX number, visit: <https://www.samhsa.gov/medication-assisted-treatment/buprenorphine-waiver-management/qualify-for-practitioner-waiver>.

MAT HANDOUT


SUBSTANCE USE STEWARDSHIP

OHCA is proactively engaged in efforts to combat drug abuse.
For more information about the opioid epidemic in Oklahoma, Medication Assisted Treatment and a list of available treatment centers, visit okimready.org or okhca.org/opg.




Medicated Assisted Treatment (MAT) Changes

Prior authorization for MAT is no longer required on preferred products. Providers must have a DEAX number on file with OHCA. To ensure that your number is on file, please email your DEAX number to providerenrollment@okhca.org. Download specific prior authorization criteria at okhca.org/MAT.




No Prior Authorization Required

- Suboxone® (buprenorphine/naloxone SL films) – BRAND PREFERRED
- Buprenorphine/naloxone SL tablets – GENERIC ONLY
- Vivitrol® (naltrexone injection)




Pregnant Members

Members who are pregnant may receive single ingredient buprenorphine tablets.




Morphine Milligram Equivalent and MAT

OHCA is committed to reducing opioid use disorder and overdoses. Medications for MAT will continue to be exempt from the opioid morphine milligram equivalent (MME) limit implementation.




Prior Authorization Required

- Bunavail® (buprenorphine/naloxone buccal films)
- Zubsolv® (buprenorphine/naloxone SL tablets)
- Subutex® (buprenorphine SL tablets)
- Probuphine® (buprenorphine implant)
- Lucemyra™ (lofexidine)
- Sublocade™ (buprenorphine ER injection)
- Buprenorphine/naloxone SL films (generic)






Naloxone Companion Prescription

Naloxone, the opioid overdose antidote, should be prescribed with all MAT prescriptions. Providers are encouraged to co-prescribe this life-saving drug to all at-risk patients.



Check Before You Write

Per Oklahoma law (HB 1948) providers should check the prescription monitoring program every time before prescribing MAT.

Oklahoma **HealthCare** Authority   

To download this infographic or order additional copies, visit okhca.org/publications.

LOCK-IN PROGRAM

- SoonerCare pharmacy-administered program.
- Locks a member into one pharmacy AND one prescriber.
 - Pharmacy claims will deny if not from designated providers.
 - Multiple medications monitored.

LOCK-IN PROGRAM REFERRAL

- Members are referred anonymously via the pharmacy lock-in form (PHARM-16). FAX 866-802-4384 or call the Pharmacy Lock-in Program at 800-522-0114, Option 4.
- Any health care provider, emergency department, pharmacy, case worker or ancillary staff that may be concerned about a member with substance abuse issues.
- Upon inclusion into the Patient Review and Restriction Program, members are locked in for a period of two years, with monthly review and yearly re-evaluation.

OPIOID PRESCRIBING GUIDELINES WEBPAGE

- www.okhca.org/opg.
- Resources and Handouts.
- Pain Management Toolkit.

The screenshot shows the Oklahoma Health Care Authority's website. The browser address bar displays <http://okhca.org/providers.aspx?id=15481>. The page title is "OHCA - Opiate Prescribing...". The navigation menu includes "Fast Facts - All Documents", "Employee Self Service", "BI launch pad", "PHARMACY - Home", "System for Award Manag...", and "NPPES NI". The main content area is titled "Opioid Prescribing Guidelines" and includes a link to "To save, download, or print the Medication Assisted Treatment infographic, click here." Below this is an infographic titled "SUBSTANCE USE STEWARDSHIP" which outlines various steps for providers, including "Assess patient risk", "Prescribe responsibly", and "Monitor and follow up". Another link is provided: "To save, download, or print the Morphine Milligram Equivalent (MME) infographic, click here." Below this is a circular infographic titled "the problem" and "the facts" which displays statistics such as "78% of patients with chronic pain are prescribed opioids", "38.4% of patients with chronic pain are prescribed opioids", and "36% of patients with chronic pain are prescribed opioids".

PRESCRIBER REMINDERS

PRESCRIPTION DRUG MONITORING PROGRAM (PDMP)

- The prescription monitoring program is a proactive tool that assists medical professionals in making informed decisions about a patient's prior drug use history.
- Prescribers are required to check PDMP every time prior to prescribing opioids or MAT drugs.
- Medical professionals can login into the PDMP by visiting: Oklahoma.pmpaware.net/login.

PDMP EXAMPLE



Oklahoma PMP Aware
Bureau of Narcotics
For Assistance Call,
(855) 965-4767

Report Prepared: 04/03/2019

Investigative Patient Report

Date Range: 10/01/2018 – 12/31/2018

Investigation Type:
Case Number:
Primary Drug Category:
Drug Product Name:
Case Notes:
Agency:
Contact: Burl Beasley
Role: State Medicaid Program
Phone: 4055227103
Email: burl.beasley@okhca.org

DOB: Gender: Patient Address One

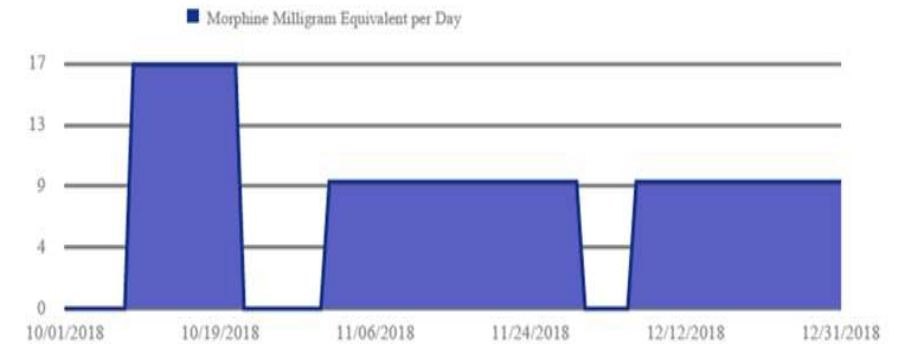
Linked Records				
Name	DOB	ID	Gender	Address
Cheryl Johnson		1		
Cheryl Jones		2		
Cherri Johnson		3		
Cheryl Jones Johnson		4		

Report Criteria

First Name: Last Name: DOB: Rx Date From: 2018-10-01, Rx Date To: 2018-12-31

Summary				
Summary	Opioids* (excluding buprenorphine)	Buprenorphine*		
Total Prescriptions	11	Current Qty	0.0	Current Qty 0.0
Total Private Pay	1	Current MME/day	0.0	Current mg/day 0.0
Total Prescribers	4	30 Day Avg MME/day	0.0	30 Day Avg mg/day 0.0
Total Pharmacies	4			

Morphine MgEq/day



*Per CDC guidance, the MME conversion factors prescribed or provided as part of medication-assisted treatment for opioid use disorder should not be used to benchmark against dosage thresholds meant for opioids prescribed for pain. Buprenorphine products have no agreed upon morphine equivalency, and as partial opioid agonists, are not expected to be associated with overdose risk in the same dose-dependent manner as doses for full agonist opioids. MME = morphine milligram equivalents. mg = dose in milligrams. The MME graph is only displayed when a request is made by Fill Date range.

Prescriptions

Filled	ID	Written	Drug	QTY	Days	Prescriber	Rx #	Pharmacy	Refills	Daily Dose	Pymt Type
12/28/2018	3	12/28/2018	ZOLPIDEM TARTRATE 10 MG TABLET	30.0	30	Jill Smith	311896	CVS	0		Private Pay
12/28/2018	3	12/28/2018	ALPRAZOLAM 2 MG TABLET	60.0	30	Jill Smith	311897	Express RX	0		Comm Ins
12/07/2018	1	12/07/2018	ACETAMINOPHEN-COD #3 TABLET	60.0	30	Ryan Smith	189620	CVS	0	9.0 MME	Medicaid
12/01/2018	2	11/28/2018	ZOLPIDEM TARTRATE 10 MG TABLET	30.0	30	Cooper Wordsmith	449440	Walmart	0		Medicaid
12/01/2018	2	11/28/2018	ALPRAZOLAM 2 MG TABLET	60.0	30	Ryan Smith	449441	Ritescript	0		Medicaid
11/01/2018	2	11/01/2018	ALPRAZOLAM 2 MG TABLET	60.0	30	Samantha Stewart	448487	Walmart	0		Medicaid

PDMP EXAMPLE



Oklahoma PMP Aware
Bureau of Narcotics
For Assistance Call,
(855) 965-4767

Report Prepared: 04/03/2019

Investigative Patient Report

Date Range: 10/01/2018 – 12/31/2018

Investigation Type:
Case Number:
Primary Drug Category:
Drug Product Name:
Case Notes:
Agency:
Contact: Burl Beasley
Role: State Medicaid Program
Phone: 4055227103
Email: burl.beasley@okhca.org

DOB:		Gender:	Patient Address One		
Linked Records					
Name	DOB	ID	Gender	Address	
Cheryl Johnson		1			
Cheryl Jones		2			
Cherri Johnson		3			
Cheryl Jones Johnson		4			

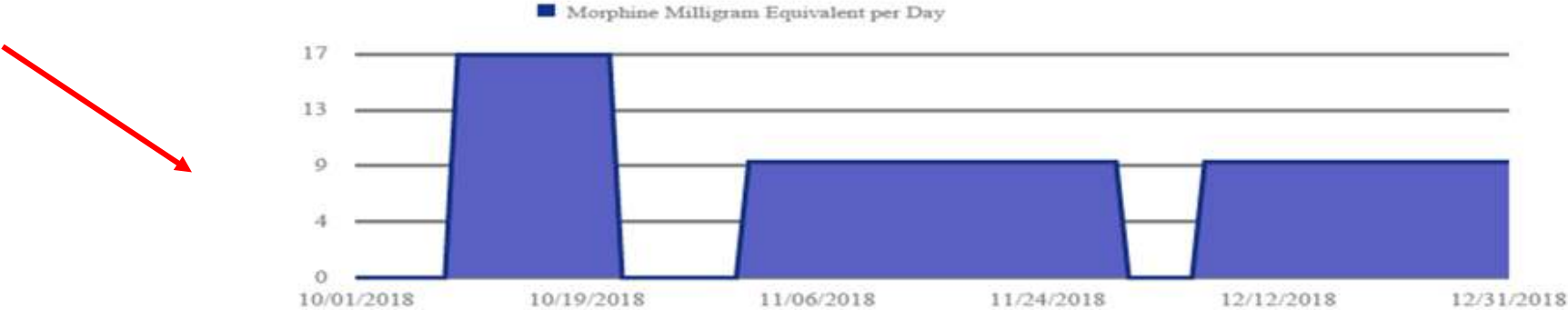
Report Criteria

First Name: Last Name: DOB: Rx Date From: 2018-10-01, Rx Date To: 2018-12-31

Summary					
Summary		Opioids* (excluding buprenorphine)		Buprenorphine*	
Total Prescriptions	11	Current Qty	0.0	Current Qty	0.0
Total Private Pay	1	Current MME/day	0.0	Current mg/day	0.0
Total Prescribers	4	30 Day Avg MME/day	0.0	30 Day Avg mg/day	0.0
Total Pharmacies	4				

PDMP EXAMPLE

Morphine MgEq/day



**Per CDC guidance, the MME conversion factors prescribed or provided as part of medication-assisted treatment for opioid use disorder should not be used to benchmark against dosage thresholds meant for opioids prescribed for pain. Buprenorphine products have no agreed upon morphine equivalency, and as partial opioid agonists, are not expected to be associated with overdose risk in the same dose-dependent manner as doses for full agonist opioids. MME = morphine milligram equivalents. mg = dose in milligrams. The MME graph is only displayed when a request is made by Fill Date range.*

Prescriptions											
Filled	ID	Written	Drug	QTY	Days	Prescriber	Rx #	Pharmacy	Refills	Daily Dose	Pymt Type
12/28/2018	3	12/28/2018	ZOLPIDEM TARTRATE 10 MG TABLET	30.0	30	Jill Smith	311896	CVS	0		Private Pay
12/28/2018	3	12/28/2018	ALPRAZOLAM 2 MG TABLET	60.0	30	Jill Smith	311897	Express RX	0		Comm Ins
12/07/2018	1	12/07/2018	ACETAMINOPHEN-COD #3 TABLET	60.0	30	Ryan Smith	189620	CVS	0	9.0 MME	Medicaid
12/01/2018	2	11/28/2018	ZOLPIDEM TARTRATE 10 MG TABLET	30.0	30	Cooper Wordsmith	449440	Walmart	0		Medicaid
12/01/2018	2	11/28/2018	ALPRAZOLAM 2 MG TABLET	60.0	30	Ryan Smith	449441	Ritescript	0		Medicaid
11/01/2018	2	11/01/2018	ALPRAZOLAM 2 MG TABLET	60.0	30	Samantha Stewart	448487	Walmart	0		Medicaid

E-PRESCRIBING OF CONTROLLED SUBSTANCES

- E-prescribing of CII and CIII-V is permitted by Oklahoma state law and is now mandatory as of January 2020.
- E-prescribing helps reduce Rx drug abuse and creates tamper-proof transactions, which result in a reduction of diversion and fraud.
- If you have questions regarding e-prescribing, please contact OBNDD (<https://www.ok.gov/obnndd>).

NALOXONE COMPANION

- Law passed in 2013 to allow use of naloxone outside a medical setting.
- Naloxone should be prescribed for patients taking MAT medications or patients that are high risk for opioid overdose.
 - Receive rotating opioid medication regimens.
 - Have been discharged from emergency medical care following opioid poisoning or intoxication.
 - Take certain extended-release or long-acting opioid medications.
 - Are completing mandatory opioid detoxification or abstinence programs.

CONTACTING PHARMACY DEPARTMENT

PHARMACY HELPDESK

- Phone number: (800)-522-0114, option 4.
- Hours:
 - Monday-Friday: 8 a.m. to 7 p.m.
 - Saturday: 9 a.m. to 5 p.m.
 - Sunday: 11 a.m. to 5 p.m.

PHARMACY DEPARTMENT

If you have a question or need assistance, you can always email us at pharmacy@okhca.org.



Oklahoma Health Management Program: Practice Facilitation

Trevor Neering, RN, BSN

Karen Johnston, RN, BSN, MS

Healthcare Intelligence

WHAT IS THE OKLAHOMA HEALTH MANAGEMENT PROGRAM?

- 2008 – The Oklahoma Health Care Authority contracted Telligen as the administrator of the Health Management Program
- Identify high-risk and at-risk SoonerCare Choice members
- Quality improvement



PRINCIPLES OF HEALTH COACHING

- Self-management support
- Medication adherence
- Coordinated care across the care continuum
- Liaison with family, healthcare providers and community resources



Resource Management Program

- Screen newly enrolled SoonerCare Choice population
- Reduce member's social determinants of health
- Assess behavioral health needs

Resource Navigators:

- Outreach
- Connect
- Collaborate

Practice Facilitation

- Practice assessment.
- Process improvement.
- Evidence-based care support.
- Quality improvement.
- Provider education.



Practice Facilitation Measures

- Asthma
- Behavioral Health
- Chronic Obstructive Pulmonary Disease
- Chronic Pain
- Coronary Artery Disease
- Diabetes
- Hypertension
- Pediatric Weight Assessment and Counseling for Nutrition and Physical Activity
- Tobacco Cessation

Pain Management Toolkit

- Treatment protocols
- Evidence-based guidelines
- Practice tools
- Process recommendations
- Research articles

Treatment Protocols

- Breaks down the recommendations into specific visit components
- Streamlines the guideline components into concrete tasks
- The treatment protocols are given to clinics as a pocket card to use as a to-do list and aid in following pain management recommendations.

Evidenced Based Guidelines and Research

- These sections of the tool kit are used to provide clinics with up-to-date recommendations
 - CDC
 - Oklahoma
 - State Board licensure requirements for MD's and DO's
 - Synopsis of Senate Bills 1446 and 848 requirements

Practice Tools

- This section includes a variety of assessment tools to help providers and staff evaluate their members risk of substance use disorder compared to the treatment benefit
 - Pain Assessment Documentation Tool –covers assessment of the 4 A's- analgesia, activity, adverse effects and aberrant behavior
 - Pain Assessment
 - Functional Assessment
 - Substance Use Risk Assessment
 - Behavioral Health Screening
 - Patient care plans

Process Recommendations

- Patient/Provider Agreement and informed consent templates
- Prescribing Monitoring Program information
- Non-Opioid Options- pharmacologic and non-pharmacologic
- Urine drug screenings and tests
- Naloxone kit information
- Additional patient and provider handouts to supplement ongoing education
- Tapering information

HMP Outcomes

- 90% of providers credit practice facilitation with having a positive impact on enrolled patients
- High-risk patients spent 48% fewer days in the hospital and had 28% fewer ER visits
- 83% of providers reported making changes to how they care for patients with chronic pain and opioid utilization
- 15% decrease in the number of patients receiving opioid prescriptions.



Contacting Telligen

Trevor Neering, RN, BSN
Manager, Practice Facilitation
tneering@telligen.com
(405) 810-3206

