

The power of partnership

The Opioid Epidemic

Florida League of Cities-2017 Annual Conference



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Opioids – The Facts

4.5M

Americans have a substance use disorder with Rx pain killers

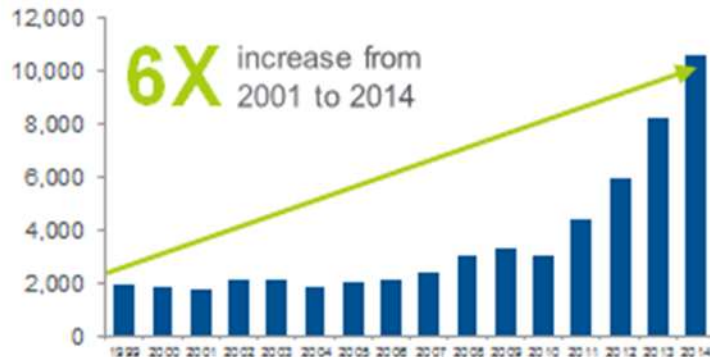
586K

Americans have a substance use disorder with heroin



It is estimated that **23% of individuals** who use heroin **develop an opioid addiction.**

Heroin-related deaths are rising



Drug-related emergency room visits have soared over the last decade

423%

increase in U.S. ER costs from 2004 to 2011

Reasons for drug-related emergency visits

21% increase due to **illicit drug use**

56% increase due to **misuse/abuse of pharmaceuticals**

46% increase due to **adverse reactions**



1. Kolodny A, et al. (2015). The prescription opioid and heroin crisis: A public health approach to an epidemic of addiction. Annual Review of Public Health, 36:559-574. 2. Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (2015). Behavioral health trends in the United States: Results from the 2014 National Survey on Drug Use and Health. Rockville, MD: Substance Abuse and Mental Health Services Administration. 3. Centers for Disease Control and Prevention, Today's Heroin Epidemic, July 7, 2015. 4. Hedegaard H, Chen L, Warner M. Drug-poisoning Deaths Involving Heroin: United States, 2000–2013. National Center for Health Statistics Data Brief No. 190, March 2015. 5. National Institute on Drug Abuse. (2014). Drug Facts: Heroin. Bethesda, MD: National Institute on Drug Abuse. 6. Meier B, Marsh B, The Soaring Cost of the Opioid Economy. NY Times, Sunday Review, June 22, 2013. 7. Meier B, Marsh B, The Soaring Cost of the Opioid Economy. NY Times, Sunday Review, June 22, 2013. 8. Rates reflect increases in illicit drug use and misuse/abuse of pharmaceuticals from 2004 to 2011, and increases in adverse reactions from 2005 to 2011, as reported in: Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (2013). Treatment Episode Data Set (TEDS): 2001-2011. State Admissions to Substance Abuse Treatment Services. BHSIS Series S-68, HHS Publication No. (SMA) 14-4832. 7. National Institute on Drug Abuse/Substance Abuse and Mental Health Services Administration. The Blending Initiative. Buprenorphine Treatment for Young Adults: Fact Sheet. Retrieved from http://www.drugabuse.gov/sites/default/files/files/BupTx_YngAdlts_Factsheet.pdf

Opioid Landscape and Trends

- Previously a robust pipeline of long acting opioids entered the market
- Market for illicit use dramatically intensified creating a demand for “off market” recipes/productions
- Pricing for short acting and older long acting opioids became generically available
- Social awareness and acceptability to opioid use
- Treatment for dependency was expensive and clinically challenging
- Due to cost, clinically effective alternatives required prior authorization and other perceived barriers

Opioid Epidemic

Approximately 4.5 million estimated US citizens are addicted to prescription opioids¹



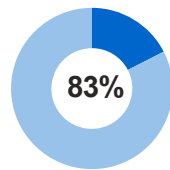
80% US consumption of all world prescription opiate supply²



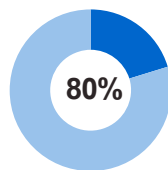
56 Billion US prescription opioid abuse cost³



25% Of all workers' compensation costs relate to opioids⁴



of Patients received scripts from 1 or 2 Providers



of Patients filled scripts at 1 or 2 Pharmacies

How are Opioids affecting YOU?

Opioid Spend for BoB in 2017 is

Spend vs. 2016 is

BoB Utilizers per 5,000 Lives is

Top-10 Opioids being dispensed are:

- OXYCODONE/ACETAMINOPHEN
- HYDROCODONE/ACETAMINOPHEN
- OPANA ER (CRUSH RESISTANT)
- NUCYNTA
- OXYCODONE HCL
- FENTANYL
- XTAMPZA ER
- NUCYNTA ER
- MORPHINE SULFATE ER
- OXYCONTIN

Data does not include drugs to treat opioid addiction or overdose.

1. Annual Revenue of Public Health 2015; 36: 559-574) 2. National Institute on Drug Abuse, May, 2014. 3. Pain Medicine 2014; 15: 1450-1454) 4. HR Today. Combatting the Prescription Drug Crisis. March 1, 2016. Accessed at: <https://www.shrm.org/hr-today/news/hr-magazine/0316/pages/combating-the-prescription-drug-crisis.aspx> on 09.23.2016.

Opioid Management Strategies

Opioid Overutilization Prevention and Treatment Support

Evidence Based Medicine	Use evidence based guideline to promote appropriate care
Care Coordination and Alignment	Enterprise effort to align initiatives and drive key performance initiatives
Data and Information	Use data to define at risk populations, drive prescriber interventions and support member care
Member Support	Provide holistic member focused care through Prevention Strategies and Treatment Support



Quarterly review of pharmacy claims



Identify inappropriate use



Inform physicians of at risk members

CDC Guideline Recommendations- March 2016

- Use non-opioid analgesics and other therapies instead of opioids
- Prescribe opioids at the lowest effective dosage for as short of duration as possible
- Routinely discuss potential benefits and harms of opioids with patients
- Regularly assess improvements in pain and function
- Prescription drug monitoring programs
- Monitor patients for signs of opioid use disorder and arrange treatment if needed

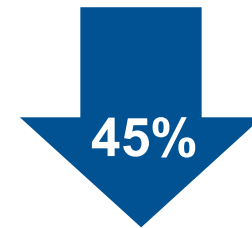
CDC Guideline for Prescribing Opioids for Chronic Pain — United States, 2016
Recommendations and Reports / March 18, 2016 / 65(1);1–49

Multi-Tiered Opioid Management Plan

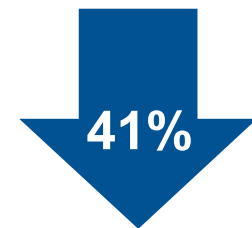
Reducing the abuse of opioids, while ensuring the safe and effective treatment of pain should be the goal. A multi-tiered approach to combat this epidemic should be utilized.

High Utilization Narcotic Program

Program Results¹



in providers



in prescriptions



Opioid Multi-tiered Approach:

Reduce unnecessary opioid use through promotion of more clinically appropriate treatments:

- Prior authorization for long-acting opioids.
- Limitation of use of transmucosal fentanyl products to members who have pain due to cancer or are receiving palliative care.
- Adherence to CDC guideline recommendations for long-acting opioid supply limits (<90 MED) for non cancer, non end of life pain.
- Cumulative dose review for outlier opioid utilizers.

Monitor prescription and utilization behaviors by:

- High utilization narcotic program.
- Pharmacy lock-in.
- High cost claimant program.
- Identification of prescriber outliers.
- Concurrent prescription of unsafe or inappropriate combinations: opioid + medications for the treatment of opioid dependence, opioids + benzodiazepines.
- Fraud/waste/abuse detection and referral.



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1. 2015 UnitedHealthcare Q3 claims data

2. Member Successes defined as the count of unique members no longer meeting criteria in the most recent quarter.

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