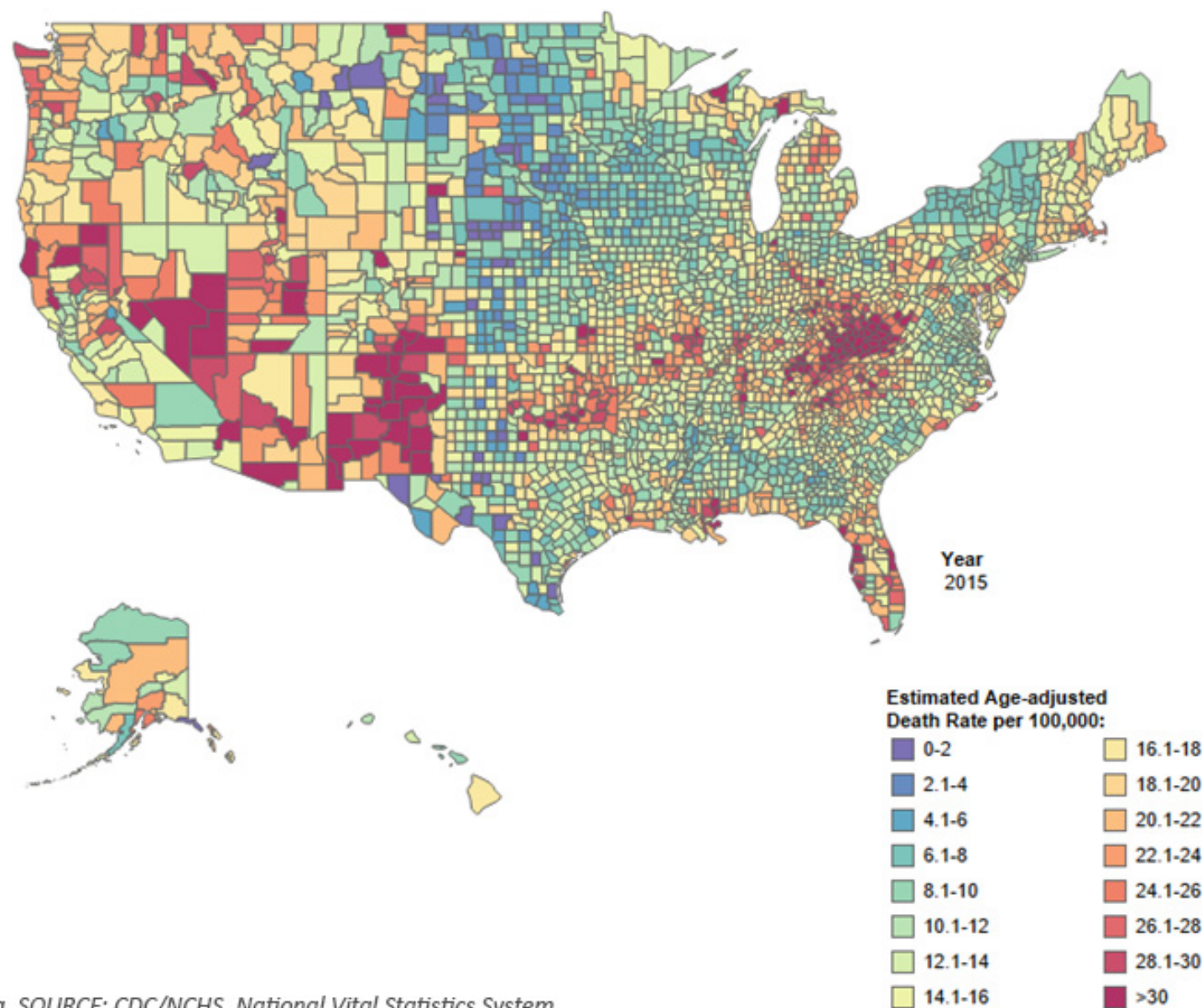




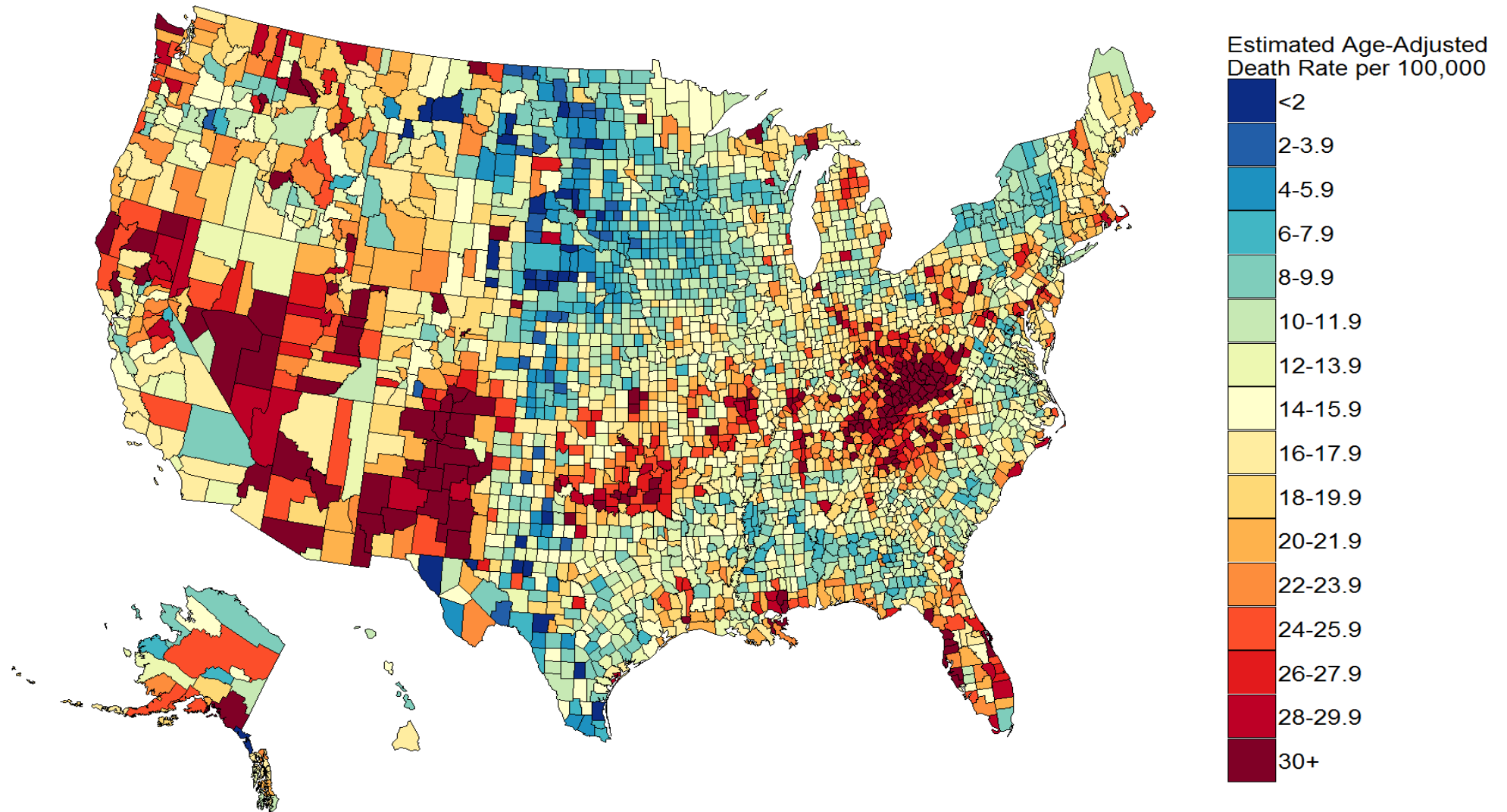
Impact of Policy and Regulatory Responses to the Opioid Epidemic on the Care of People with Serious Illness

Hemi Tewarson, Director, Health Division
National Governors Association Center for Best Practices

Estimated Age-adjusted Death Rates for Drug Poisoning by County, United States: 2015



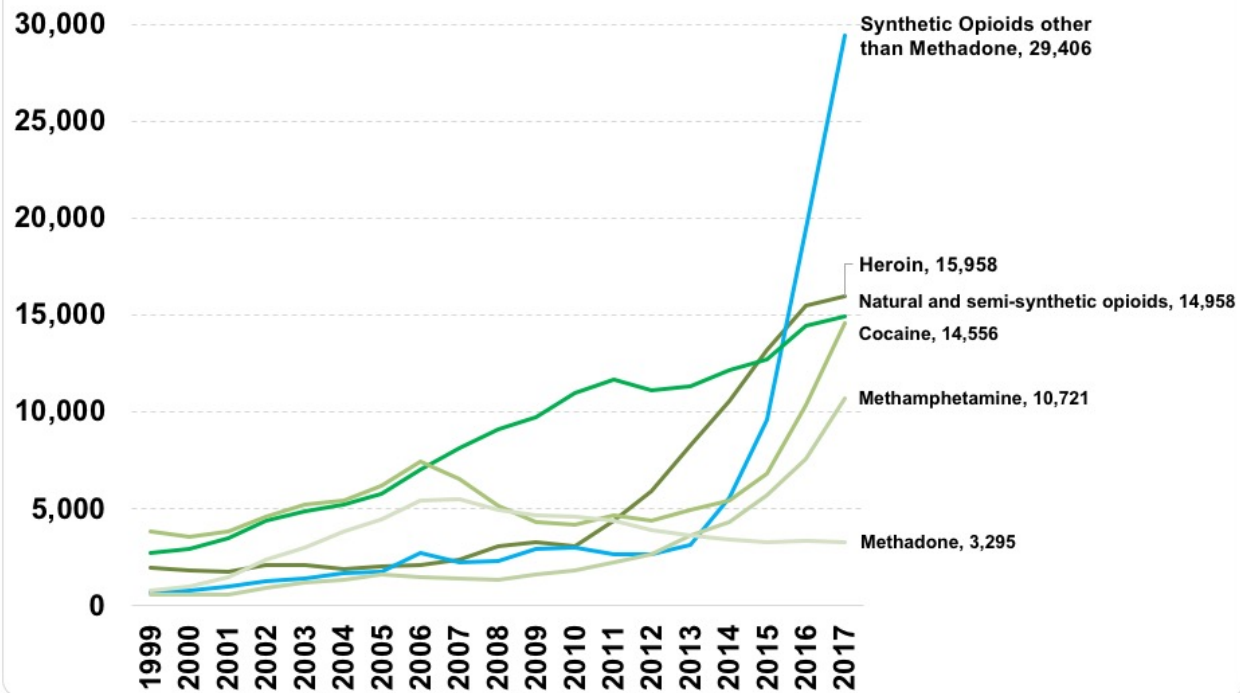
2016



SOURCE: National Center for Health Statistics, National Vital Statistics System, mortality data (<http://www.cdc.gov/nchs/deaths.htm>).

SUGGESTED CITATION: Rossen LM, Bastian B, Warner M, Khan D, Chong Y. Drug poisoning mortality: United States, 1999–2016. National Center for Health Statistics. 2017. (Available from: <https://www.cdc.gov/nchs/data-visualization/drug-poisoning-mortality/>).

Drugs Involved in U.S. Overdose Deaths, 1999 to 2017



AN EVOLVING EPIDEMIC

Overdose Deaths from Heroin and Synthetic Opioids are **Surpassing** Prescription Opioids



The dramatic rise in the supply of illicitly manufactured fentanyl and its analogs has been mirrored by an equally dramatic rise in deaths involving synthetic opioids other than methadone.

Finding Solutions to the Prescription Opioid and Heroin Crisis: A Road Map for States

National Governors Association

NGA OPIOID ROAD MAP RELEASED JULY 2016



Developed by the NGA Center for Best Practices Health Division, this roadmap is a tool to help states respond to the opioid crisis across the continuum, from prevention through treatment and recovery, with effective public health and public safety strategies.



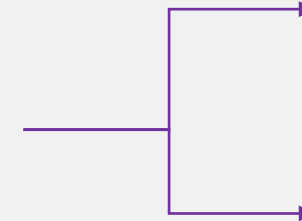
GOVERNORS PERSPECTIVE

State Strategies

States are addressing the opioid epidemic with a number of different strategies



REDUCING THE FLOW OF PRESCRIPTIONS

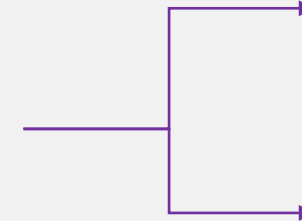


LIMITING FIRST TIME
OPIOID
PRESCRIPTIONS

PROMOTING CLINICAL
GUIDELINES FOR SAFE
PRESCRIBING



TRANSFORMING PAIN MANAGEMENT

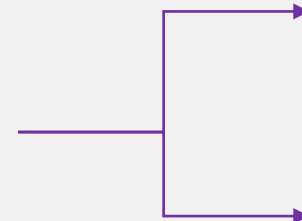


SUPPORTING AND
ENHANCING
COMMUNITY-BASED
COLLABORATION

INCREASING NON-
OPIOID TREATMENT
BENEFITS



EXPANDING TREATMENT ACCESS



EXPANDING ACCESS TO
MEDICATION ASSISTED
TREATMENT AND MEDICAID
COVERAGE OF TREATMENT
SERVICES

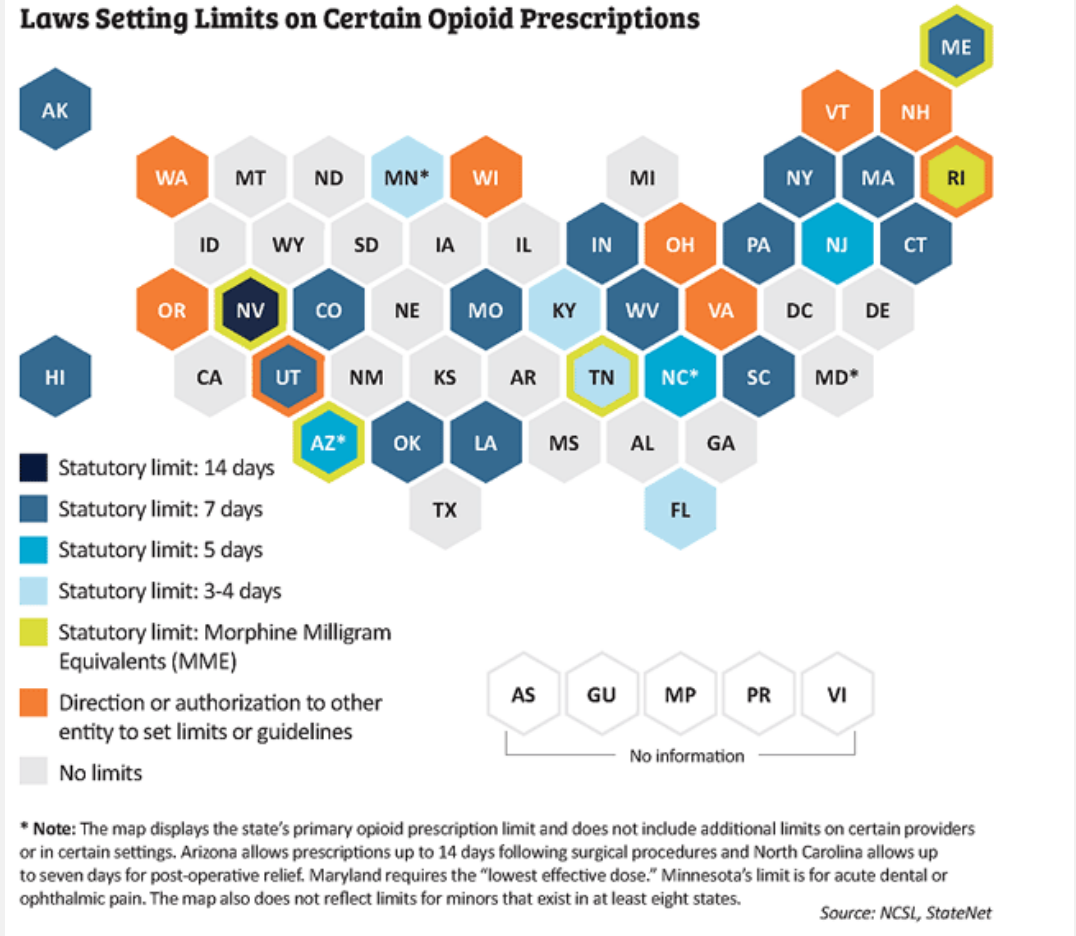
BUILDING THE
WORKFORCE

SERIOUS ILLNESS CARVE-OUTS

State Prescribing Policies

Debuting in 2016, Massachusetts passed the first law in the nation limiting opioid prescriptions. By October 2018, 33 states have enacted legislation with some type of pill limit, guidance, or requirement related to opioid prescribing. Nearly half the states with limits specify that they apply to treating acute pain, and most states set exceptions for chronic pain treatment, cancer and palliative care.

Laws Setting Limits on Certain Opioid Prescriptions



Finding Solutions to the Opioid and Addiction Crisis

Focus Areas for States and Governor's Offices





STATE EXAMPLE

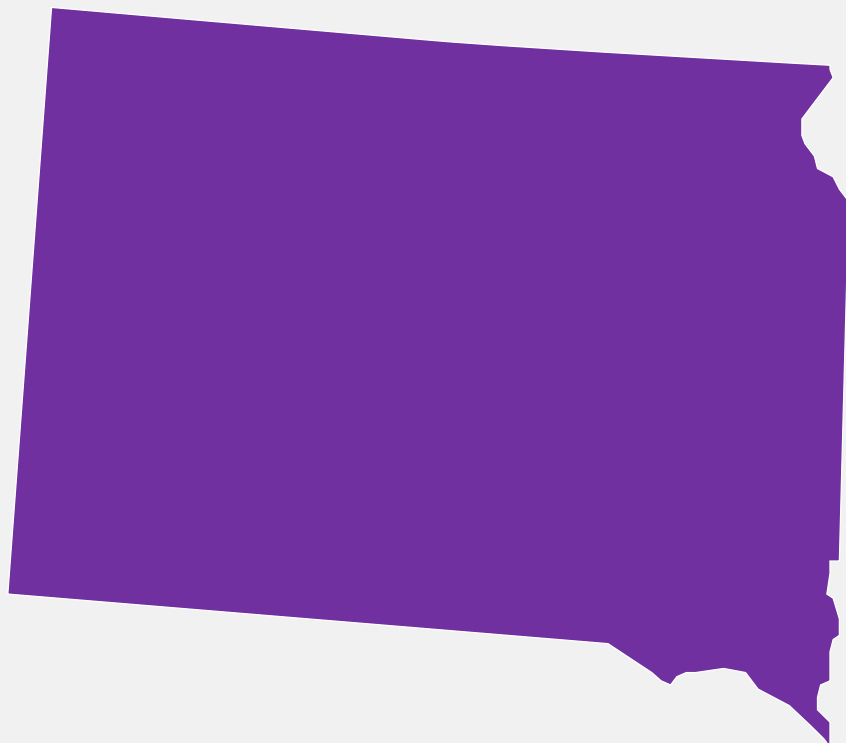
Ohio

Increasing Access to Non-Opioid Therapies in Medicaid

In 2017, Ohio submitted a state plan amendment to allow for coverage of acupuncture and chiropractic services when performed by a qualified chiropractor within their scope of practice for either low back pain or migraines.

The *Other Licensed Practitioner Services Option* allows states to cover new services (such as acupuncture) that are provided by licensed practitioners in the state.

Ohio has since broadened its rules to cover the practice when performed by licensed acupuncturists.



STATE EXAMPLE

South Dakota

Increasing Access to Non-Opioid Therapies in Medicaid

Implemented in 2013, South Dakota's health homes provide enhanced health care services to individuals with high-cost chronic conditions or serious mental illnesses.

South Dakota chose to target *musculoskeletal* conditions among the qualifying chronic conditions for program participation.

An initial evaluation of the program demonstrated \$5.6 million in savings during SFY16 with an average decrease of 1.2 claims per recipient

SAFE ACCESS TO OPIOIDS FOR PATIENTS WITH SERIOUS ILLNESS



EXCEPTIONS

State policymakers have included policy exceptions for patients with cancer and serious illness.



PAIN MANAGEMENT

States working with partners to address all the factors of pain through pharmacologic and nonpharmacologic treatment.



EDUCATION

Ongoing provider education on appropriate prescribing and the potential for patient misuse and abuse is essential.



QUESTIONS?

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