



Strategies to Minimize the Risk of Opioid Overuse and Misuse

2023 | *Optimizing the Impact of the Opioid related POD, COU, UOP, and HDO HEDIS® Measures*



Purpose of the Training

To recognize the intent of the measures and share strategies to impact quality care and outcomes for our members.



Why Is HEDIS® Important to Providers?

- Value-Based Service and other Pay-for-Performance incentive programs
- Focuses on preventative care and supports better patient outcomes
- The focus on quality outcomes can help members get the most from their benefits, which ultimately means better use of limited resources.
- It is a validated set of measurements by which one can measure the effectiveness of treatment interventions.

BH HEDIS® Measures



POD

- Pharmacotherapy for Opioid Use Disorder

COU

- Risk of Continued Opioid Use

UOP

- Use of Opioids from Multiple Providers

HDO

- Use of Opioids at High Dosage

Why It Matters

- Decrease opioid-related overdoses
- Reduce stigma and increase treatment engagement
- Increase use of approved medications to treat Opioid Use Disorder
- Positive economic impact



Pharmacotherapy for Opioid Use Disorder (POD)



Measure Components

- Medicaid & Medicare
- Ages 16 and older
- Diagnosed with an Opioid Use Disorder (OUD)
- Received medication to treat the OUD and stayed on the medication for at least 180 days between July 1- June 30

Intent

- To replace the opioid drug of dependence with a longer-lasting, medically-prescribed opioid and reduce risk of overdose from illicit opioids and increase treatment engagement

Risk of Continued Opioid Use (COU)



Measure Components

- Medicaid & Medicare Members
- Ages 18 and older
- Had 15 or more calendar days covered by an opioid medication during the 30-day period
- Had 31 or more calendar days covered by an opioid medication during the 62-day period

Intent

- To decrease opioid prescriptions to under 15 days supply for 30-day treatment periods
- To identify members who were prescribed an opioid medication and may be at risk for opioid overuse and misuse.

**A lower rate indicates better performance*

Use of Opioids From Multiple Providers (UOP)



Measure Components

- Medicaid & Medicare Members
- Ages 18 years and older
- Who were prescribed at least two or more opioid dispensing events on different dates of service
- With ≥ 15 days supply from four or more different prescribers and pharmacies

Intent

- This measure provides health plans with a tool to identify members who may be at high risk for opioid overuse and misuse. This measure is not necessarily single prescriber prescribing practices.

**A lower rate indicates better performance*

Use of Opioids at High Dosage (HDO)



Measure Components

- Medicaid & Medicare Members
- Ages 18 years and older
- Who were prescribed two or more opioid medications at a high dosage for ≥ 15 days during the measurement year

Intent

- To assess for potentially high-risk opioid analgesic prescribing practices and identify members at risk for opioid overuse and misuse

**A lower rate indicates better performance*

Strategies to Minimize the Risk of Opioid Overuse and Misuse

Only prescribe opioids when medically necessary, in the lowest effective dose, for the shortest duration necessary

Identify alternatives for pain management when clinically appropriate

Discuss safety and risk associated with long-term use, high dosages and use of multiple opioids from different providers

Reference the CDC Guideline for Prescribing Opioids for Chronic Pain

Review the Prescription Drug Monitoring Program State Registry prior to initiating opioid therapy and every 3 months

Coordinate care and communication between all providers



Strategies to Minimize the Risk of Opioid Overuse and Misuse



Discuss Medication Assisted Treatment (MAT) options for patients with OUD

Engage the patient and caregivers in decision making and a relapse prevention plan

Closely monitor pharmacotherapy for OUD patients to avoid any gap in treatment of 8 or more consecutive days

Offer mutual help options like peer recovery support, harm reduction, 12-step fellowships (AA, NA, etc.)

Reach out proactively within 24 hours if the patient does not keep scheduled appointment to schedule another



Thank You!

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Overuse and Misuse:**
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References

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