Maximizing the Use of Prescription Drug Monitoring Programs: CDC Health Systems Interventions

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Overdose Death Rates Involving Opioids, by Type, United States, 2000-2017

- Any Opioid
- Other Synthetic Opioids (e.g., fentanyl, tramadol)
- Commonly Prescribed Opioids (Natural & Semi-Synthetic Opioids and Methadone)
- Heroin

RISE IN OPIOID OVERDOSE DEATHS IN AMERICA

A Multi-Layered Problem in Three Distinct Waves

399,000 people died from an opioid overdose (1999–2017)

1990s mark a rise in prescription opioid overdose deaths

2010 marks a rise in heroin overdose deaths

2013 marks a rise in synthetic opioid overdose deaths

Rx OPIOIDS
Include natural, semi-synthetic, and methadone and can be prescribed by doctors

HEROIN
An illegal opioid

SYNTHETIC OPIOIDS
Such as fentanyl and tramadol are very powerful and can be illegally made

Learn more about the evolving opioid overdose crisis: www.cdc.gov/drugoverdose
Preventing Opioid Overdoses and Opioid-Related Harms

- Conduct surveillance and research
- Empower consumers to make safe choices
- Partner with public safety
- Support providers, health systems, and payers
- Build state, local, and tribal capacity
Support Health Systems and Providers

- Promote use of the CDC Guideline for Prescribing Opioids for Chronic Pain
- Train healthcare providers on implementation of Guideline
- Provide tools to help integrate into clinical practice
Primary care providers

Patients 18 years or older with chronic pain

Outpatient settings

Outside of active cancer, palliative, and end of life care
Organization of Guideline Recommendations

12 recommendations grouped into 3 conceptual areas:

• Determining when to initiate or continue opioids for chronic pain
• Opioid selection, dosage, duration, follow-up, and discontinuation
• Assessing risk and addressing harms of opioid use
Comprehensive Implementation Approach for the CDC Prescribing Guideline

Translation & Communication

Education & Training

Insurer Interventions

Health System Interventions
Translation & Communication

**App includes:**
- MME Calculator
- Prescribing Guidance
- Motivational Interviewing
Provider Resources

- Guidance
- Clinical Tools
- Mobile App
- Trainings (CME)
- Digital & Print Resources

To learn more:
https://www.cdc.gov/drugoverdose/prescribing/resources.html
Clinician Education & Training

Online training modules & webinars for clinicians

Free Interactive Trainings:
1. Addressing the Opioid Epidemic: Recommendations from CDC
2. Treating Chronic Pain Without Opioids
3. Communicating with Patients
4. Reducing the Risk of Opioids
5. Assessing and Addressing Opioid Use Disorder
7. Determining Whether to Initiate Opioids for Chronic Pain
8. Implementing CDC’s Prescribing Guideline into Clinical Practice
9. Opioid Use and Pregnancy
10. Motivational Interviewing
11. Collaborative Patient-Provider Relationship in Opioid Clinical Decision Making

To learn more: www.cdc.gov/drugoverdose/training/index.html

Clinical Outreach and Communication Activity (COCA) Free Webinars:
1. Overview of Guideline
2. Nonopioid Treatments for Chronic Pain
3. Assessing Benefits and Harms of Opioid Therapy
4. Dosing and Titration of Opioids
5. Opioid Use Disorder—Assessment and Referral
6. Risk Mitigation Strategies
7. Effective Communication with Patients

To learn more: https://www.cdc.gov/drugoverdose/training/webinars.html
Interactive Trainings

Module 3: Communicating with Patients

Addressing Conflict: Addressing Patient Concerns and Expectations

You would be right to say, "We know more about the risks of opioids now than we used to, and we now know that a high dosage of opioid medication poses significant risk, especially for the long term. Let's work together to find a safer pain management plan for you that involves less opioids." However, this is where conflict often begins.

Melissa pleads, "Please, please refill my opioid medications; if I didn't have them I surely couldn't manage my job and my family!"

Confronting Melissa directly by refusing to continue her current opioid prescription will only heighten the conflict.

Instead, acknowledge the patient’s open-ended questions if you need understanding.

Module 3: Communicating with Patients

Addressing Conflict: Addressing Patient Concerns and Expectations (Cont’d)

"How is the medication helping you? Do you have any side effects?"

"I agree that stopping your prescription abruptly would not be a good idea. Given that, what do we need to do going forward?"

"Well, it does make me drowsy, and I am constantly constipated. Sometimes I completely forget things I am supposed to be doing."

"But, it is helping me deal with the pain, and that's why I can't imagine not having it."

"You're not just going to take away my pain pills, are you?"

Next, you want to validate her concerns and emotions while sharing how her situation isn’t unique or troubling.

Be empathetic and help to normalize her situation.
Health Systems Interventions

- Clinical Quality Improvement and Care Coordination
- EHR and PDMP (prescription drug monitoring program) Data Integration
- Clinical decision support (CDS) tools embedded into electronic health records (EHRs)
Quality Improvement (QI) and Care Coordination Resource

- Companion resource to facilitate implementation of the Guideline recommendations into practice
- Intended to help healthcare systems and providers integrate QI measures and care coordination into their clinical practice

https://www.cdc.gov/drugoverdose/pdf/prescribing/CDC-DUIP-QualityImprovementAndCareCoordination-508.pdf
Quality Improvement (QI) Measures

• 16 clinical QI opioid measures align with the 12 Guideline recommendation statements
• Support safe and effective opioid prescribing and pain management and treatment—rather than performance management
• Should be tailored to individual practice policies on opioid prescribing and pain management, or reflect state laws or regulations
• Organized into two categories:
  1) New opioid prescriptions
  2) Long-term opioid therapy
Resource Toolkit

• Examples of comprehensive management approaches
  • Kaiser Permanente’s Patients on Chronic Opioid Therapy for Chronic Non-Cancer Pain Safety Guideline

• Oregon Pain Guidance’s Opioid Prescribing Guidelines

• Example policies

• Sample treatment agreements

• Telemedicine consultation initiatives

• Examples of training resources and educational resources

• Challenges or barriers to implementing long-term opioid management strategies and potential solutions

• Diagnostic tools and patient questionnaires
CDC Resources

CDC Opioid Overdose Prevention Website
www.cdc.gov/drugoverdose

State Efforts
https://www.cdc.gov/drugoverdose/states/index.html

CDC Guideline for Prescribing Opioids for Chronic Pain
https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm

Resources for Patients
https://www.cdc.gov/drugoverdose/patients/index.html

Resources for Providers
https://www.cdc.gov/drugoverdose/providers/index.html

Clinical Decision Support Resources
• Implementation Guide Output: http://build.fhir.org/ig/cqframework/opioid-cds/
• Source for the implementation guide: https://github.com/cqframework/opioid-cds
• Supporting Java packages for the CQL-to-ELM translator and CQL Engine: https://github.com/cqframework/opioid-cds-logic
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Please note that the findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.
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