Report of the Joint Committee on Opioid Use

September 2018





As a physician,

I am deeply committed
to caring for my patients.

It is important that I have the
flexibility to evaluate
and prescribe the treatments
which will meet the unique
needs of each person I serve.

LaDONA SCHMIDT, MD FAMILY MEDICINE

Hospital staffs and other health care providers across our state are actively partnering within our communities to address the complex issues surrounding opioid use.

RETA BAKER
PRESIDENT, MERCY HOSPITAL





Background

The Kansas Hospital Association and the Kansas Medical Society convened the Joint Committee on Opioid Use in March 2018. The group, comprised of physician and hospital leaders from across Kansas, has assessed current data related to medical and nonmedical use of opioids in Kansas, reviewed trends and strategies that may impact opioid use, and remains committed to continuing to provide our constituencies with resources to prevent and reduce inappropriate use of opioids in Kansas. This document summarizes the Committee's work, including the principles and recommendations it affirms.

Principles

In an effort to effectively balance concerns over the non-medical use of prescription opioids with the responsibility to ensure access to appropriate pain management, we affirm the following principles:

- Opioids can be effective medications for managing pain, particularly associated with cancer and palliative care, as well as for acute pain associated with injuries or surgery. The use of opioids, in concert with other pharmacological and non-pharmacological treatments, may also be appropriate for patients with chronic, non-cancer related pain.
- Accurately assessing and effectively, safely treating patients is the goal and responsibility of every physician and health care provider. Clinicians are in the best position to make clinical judgments about their individual patients' needs.
- Providers are strongly encouraged to utilize clinical guidelines related to pain management, opioid prescribing and dispensing which are evidence-based, and enforced by the appropriate state-based licensing or regulatory boards.
- Education—of both providers and patients—is a critically important component of any strategy to achieve a meaningful, sustained reduction in opioid use. Placing regulatory limitations on a clinician's ability to prescribe opioids can undermine the delivery of quality, individualized care to patients.
- Policies aimed at addressing non-medical opioid use should be developed utilizing evidence-based information and data; and to the extent possible, include state-specific data.
- ► Kansas physicians and hospitals should support programs and initiatives to mitigate the availability of unused opioid medications.
- ➤ Comprehensive treatment for substance use disorders should become more widely available, especially in rural areas of Kansas.

Recommendations

Education

- ► KHA and KMS recognize the Joint Policy Statement of the Kansas Boards of Healing Arts, Nursing & Pharmacy on the Use of Controlled Substances for the Treatment of Chronic Pain; we encourage all prescribers to become familiar with the recommendations in the statement and to utilize them as a component of appropriate, effective patient care.
- ► KHA and KMS will work collaboratively with other stakeholders to promote evidence-based education on pain management, substance use disorder treatment, and other topics related to safe prescribing practices.
- Prescribers who hold a federal Drug Enforcement Administration (DEA) registration to prescribe opioids and other controlled substances should receive specialty-appropriate, evidence-based continuing education on the prevention, management and treatment of pain, prescription drug diversion, non-medical use and addiction.
- ➤ Clear, comprehensive and balanced patient education on the management of pain—including the benefits and risks of opioid prescription drugs—should be provided by prescribers, dispensers and the Kansas Department of Health and Environment.
- ➤ Kansas birthing hospitals are encouraged to participate in the Kansas Perinatal Quality Collaborative, sponsored by the Kansas Department of Health and Environment, which is currently focused on best practices for treating neonatal abstinence syndrome.
- ► KHA and KMS encourage increased education and training regarding pain management and substance use disorder treatment during medical school and residency training.

K-TRACS

- The State's prescription drug monitoring program (K-TRACS), established with the support of Kansas hospitals and physicians in 2008 to provide accurate and timely information regarding controlled substances, should be sustainably funded by the State of Kansas and should continue to be provider-led so it remains an effective resource for clinicians.
- ► KHA and KMS strongly encourage all prescribers and dispensers of controlled substances to utilize K-TRACS, the state's prescription drug monitoring program, prior to the prescribing and dispensing of every opioid prescription.
- ► KHA and KMS support meaningful efforts to enhance K-TRACS' effectiveness as a provider resource and to increase use of K-TRACS, especially among those who prescribe and dispense opioids.

(Continued on reverse)

COMMITTEE MEMBERS

Reta Baker

Co-Chair Mercy Hospital–Fort Scott

LaDona Schmidt, MD Co-Chair

Family Medicine-Lawrence

Sam Antonios, MD Via Christi Health–Wichita

Greg Burger, PharmDStormont Vail Health-Topeka

Joe Davison, MDFamily Medicine–Wichita

Paula Ellis

Saint John Hospital-Leavenworth

Rachael Hauser, MD Internal Medicine-Pratt

Rob Gibbs, MD *Radiology–Parsons*

Val Gleason

Newton Medical Center-Newton

Jennifer McKenney, MD Family Medicine-Fredonia

Justin Overmiller, MDFamily Medicine–Smith Center

Robert Page

The University of Kansas Health System–Kansas City

Susan Page

Pratt Regional Medical Center
Pratt

Gianfranco Pezzino MD

Kansas Health Institute-Topeka

Joben Rieth

St. Catherine Hospital-Garden City

Kimberly Templeton, MD

KU School of Medicine Kansas City

H. Mikel Thomas, MD Psychiatry-Topeka

Daniel Warren, MDFamily Medicine-Wichita

Recommendations (continued)

Treatment

- ▶ Reducing the amount of prescribed opioids in accordance with evidence-based recommendations may help reduce or prevent the incidence of opioid use disorder, but by itself will not adequately address opioid use disorder. Increasing medical capacity to treat opioid use disorder is essential.
- ► KHA and KMS strongly encourage interested physicians and other qualified health care providers to consider obtaining certification as a Medication Assisted Treatment (MAT) Provider as a component of comprehensive addiction treatment.
- ► KHA and KMS encourage health insurers and other payers to remove administrative and other barriers that may adversely impact a patients' ability to seek and/or receive treatment for opioid use disorder.
- ► KHA and KMS will work collaboratively with other stakeholders to promote education that reduces the stigma of addiction disorders.
- ► KHA and KMS support the use of telehealth to increase access to pain management and addiction specialists, especially in rural areas.

Supply reduction

- ► KHA and KMS encourage members to support local, communitybased initiatives to reduce the supply of unwanted, unneeded prescription opioids and other drugs with potential for non-medical use.
- ► KHA and KMS support the expanded availability of safe drug disposal solutions.
- ➤ KHA and KMS encourage Medicaid, health plans, and other payers to review their coverage guidelines and ensure meaningful coverage of and access to evidence-based alternatives to opioids to manage pain and treat substance use disorders. ■

For additional information

Karen Braman (kbraman@kha-net.org)

Senior Vice President, Health Care Strategy and Policy

Chad Austin (caustin@kha-net.org)

Senior Vice President, Government Relations

Jon Rosell (jrosell@kmsonline.org)

Executive Director

Rachelle Colombo (rcolombo@kmsonline.org)

Director of Government Affairs





RESOURCES

KHA and KMS recognize that significant, valuable work related to opioid use has been accomplished by a variety of organizations at the national, state and local level. We encourage hospital leaders, hospital staffs, physicians and other clinicians to actively seek familiarity with current, relevant information related to pain management, appropriate use of opioids, opioid use disorder and substance use disorder treatment options. (Inclusion on the list below does not necessarily imply endorsement.)

- Kansas Hospital Association
- Kansas Medical Society
- American Hospital Association
- American Medical Association
- Kansas Department of Health and Environment
- K-TRACS
- Centers for Disease Control
- Substance Abuse and Mental Health Services Administration