Potentially inappropriate opioid use in Medicare Part D

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October 9, 2014
What are opioids?

- A class of narcotic medications used to manage and relieve pain
  - Naturally occurring (e.g., morphine)
  - Semi-synthetic (e.g., oxycodone and hydrocodone)
- Schedule II (most restrictive) under DEA classification for controlled substances
- Addictive properties with a high risk for overuse and/or abuse
- No FDA maximum dose
Concerns about use of opioids by Medicare beneficiaries

- In any given year,
  - Over 1/3 of Part D enrollees used opioid
  - Accounts for about 5% of total prescriptions and spending for drugs covered under Part D
- Some use may not be clinically appropriate
  - GAO/OIG found questionable use of opioids in Part D
  - Potentially increase Part D’s program costs without providing health benefits
  - May harm beneficiaries
Analysis of opioid use by Part D enrollees, 2011

- 11.5 million beneficiaries (36%) filled at least one prescription for an opioid
  - About 400,000 used hospice during the year
  - About 1.1 million had cancer diagnosis (no hospice stays)
- Opioid use for pain associated with cancer and at the end of life is well established in medical literature
- Use of opioids to manage other pain may be appropriate but evidence of effectiveness is limited*

Our analysis focused on the 10 million in Part D without hospice stays or cancer diagnoses

Share of Part D enrollees who use opioids vary across states, 2011

Nationally 32% of Part D enrollees filled at least one opioid prescription (exclude hospice and cancer patients)

Source: MedPAC analysis of Part D denominator and prescription drug event data.
## Opioid use in Part D, 2011

<table>
<thead>
<tr>
<th></th>
<th>All opioid users</th>
<th>Opioid users in top 5%</th>
</tr>
</thead>
<tbody>
<tr>
<td># of beneficiaries, millions</td>
<td>10.0</td>
<td>0.5</td>
</tr>
<tr>
<td>Total gross spending on opioids, billions</td>
<td>$2.7</td>
<td>$1.9</td>
</tr>
<tr>
<td>As % of total opioid users</td>
<td></td>
<td>69%</td>
</tr>
<tr>
<td>Total # of opioid prescriptions, millions</td>
<td>63.1</td>
<td>11.6</td>
</tr>
<tr>
<td>As % of total opioid users</td>
<td></td>
<td>18%</td>
</tr>
<tr>
<td>Average annual use per beneficiary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross spending on opioids</td>
<td>$271</td>
<td>$3,716</td>
</tr>
<tr>
<td># of opioid prescriptions</td>
<td>6.3</td>
<td>23.0</td>
</tr>
<tr>
<td>Generic share of opioid prescriptions</td>
<td>94%</td>
<td>78%</td>
</tr>
</tbody>
</table>

**Preliminary data subject to change**

Note: Excludes opioid users who had a hospice stay or a cancer diagnosis. Number of prescriptions is standardized to a 30-day supply. Source: MedPAC analysis of Part D denominator and prescription drug event data.
# Characteristics of opioid users, 2011

<table>
<thead>
<tr>
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<th>All Part D enrollees</th>
<th>All opioid users**</th>
<th>Opioid users in top 5%**</th>
</tr>
</thead>
<tbody>
<tr>
<td># of beneficiaries, millions</td>
<td>31.5</td>
<td>10.0</td>
<td>0.5</td>
</tr>
<tr>
<td>Selected demographic characteristics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Female</td>
<td>59%</td>
<td>63%</td>
<td>61%</td>
</tr>
<tr>
<td>% non-White</td>
<td>26%</td>
<td>26%</td>
<td>17%</td>
</tr>
<tr>
<td>% under age 65 (disabled)</td>
<td>24%</td>
<td>31%</td>
<td>63%</td>
</tr>
<tr>
<td>% LIS</td>
<td>37%</td>
<td>47%</td>
<td>66%</td>
</tr>
<tr>
<td>Enrolled in PDP</td>
<td>64%</td>
<td>66%</td>
<td>74%</td>
</tr>
<tr>
<td>Obtained opioid Rx from ≥ 4 prescribers*</td>
<td>9%</td>
<td>29%</td>
<td></td>
</tr>
<tr>
<td>Filled opioid Rx at ≥ 3 pharmacies*</td>
<td>7%</td>
<td>31%</td>
<td></td>
</tr>
<tr>
<td>States w/ highest concentration of users</td>
<td>AL, TN, AR, KY, LA</td>
<td>DE, AK, NH, VT, WI</td>
<td></td>
</tr>
</tbody>
</table>

**Excludes opioid users who had a hospice stay or a cancer diagnosis.

Note: PDP (prescription drug plan), LIS (low-income subsidy). *Unique counts of prescribers and pharmacies are based on identification information submitted on the prescription drug event data. If a prescriber ordered prescriptions under multiple IDs, the claims from this prescriber under different IDs are treated as if they were ordered by different prescribers. **Excludes opioid users who had a hospice stay or a cancer diagnosis.

Source: MedPAC analysis of Part D denominator and prescription drug event data.

Preliminary data subject to change
CMS’s policy on monitoring as of 2013

- Plan sponsors: drug utilization review
  - Safety edits at POS (e.g., refill too soon)
  - Utilization management (e.g., quantity limits)
  - Retrospective review

- CMS: Overutilization Monitoring System
  - Centralized system to track potential overuse
  - Quarterly overutilization reports
CMS’s policy on monitoring as of 2015

- Changes affecting prescribers
  - Must be enrolled with Medicare
  - Deny prescriptions ordered by unauthorized individuals (e.g., suspended DEA certificate)
  - Revoke Medicare enrollment for abusive prescribing

- CMS efforts
  - Develop a tool to assess fraud/abuse risk of prescribers and pharmacies using Part D data
  - Expand the tool’s capability to monitor potentially inappropriate use of other medications
Other measures to curb opioid misuse and overuse

- Nearly all states have implemented Prescription Drug Monitoring Programs
- Some pharmacies use checklists before dispensing controlled substances (e.g., Walgreens “checklist”)
- Commercial insurance and some state Medicaid programs use prescriber and/or pharmacy “lock-in” for individuals at-risk of abusing controlled substances
Next steps?

- Direction for this research?
  - Focus on prescribing in long-term care institutions
  - Effectiveness of existing frameworks and potential applications to prevent other inappropriate medication uses?
- Comments on other policy options?
  - Should we go further and consider other policy options such as lock-ins?
  - Any other policy options we should consider?
95th percentile in annual gross spending = $956
(exclude hospice and cancer patients)

Source: MedPAC analysis of Part D denominator and prescription drug event data.
Share of Part D enrollees who use opioids vary across states, 2011

Nationally 36% of Part D enrollees filled at least one opioid prescription

Source: MedPAC analysis of Part D denominator and prescription drug event data.