

# **Narcotic Review Program Patient Review and Coordination Program**

## **Opioid Misuse Among Medicaid and General Assistance Enrollees in Washington State**

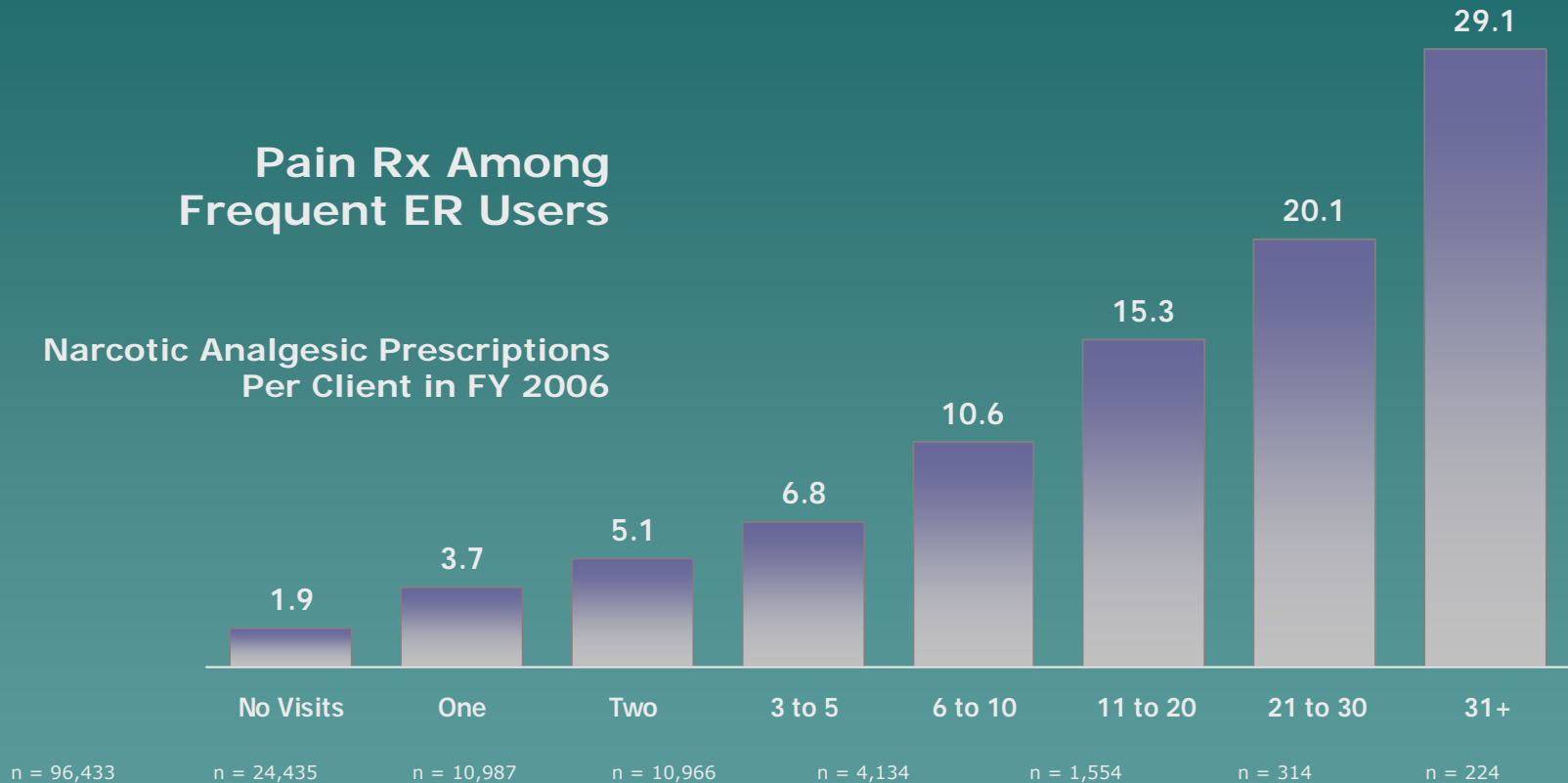
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# Average Number of Pain Prescriptions is Highest Among Those Most Frequently Visiting the ER

## Pain Rx Among Frequent ER Users

Narcotic Analgesic Prescriptions Per Client in FY 2006



Number of Visits to the ER, FY 2006

INCLUDES persons who are Medicaid-only aged, blind, disabled, presumptively disabled, or General Assistance-Unemployable in FY 2006.  
SOURCE = DSHS RDA Client Outcome Database. TOTAL CLIENTS (FY 2006) = 149,050.

# Key Findings on Opiates and ER Utilization

Aged, blind, or disabled medical assistance clients who are frequent ER visitors:

- Have high rates of mental illness and alcohol/drug disorders – frequently co-occurring
- Receive large volumes of prescription opiates
- Many receive MHD-funded mental health services
- Relatively few receive DASA treatment services



# Narcotic Review Project

## Background

- ◆ Identified “Top 320” clients who received highest volume of narcotics (excluded cancer, hospice clients, and nursing home clients)
- ◆ \$7 million in total annual health expenses (\$900k narcotics & \$3 million ER related).

## Intervention

- ◆ Narcotic Prior Authorization – 12 month prescription review provided to the prescribers for verification of prescriptions and continued need
- ◆ Referral to Patient Review and Coordination Program and DASA

## Outcome

- ◆ Significant reduction in narcotic scripts filled ( 61% decrease)
- ◆ A doubling of alcohol/drug treatment rates
- ◆ Lower ER visits and overall medical costs (44% and 34%)



# Patient Review and Restriction (PRR) Program

## Health and safety program for fee-for-service and managed care clients who overuse or inappropriately use medical services

### AUTHORITY

- 42CFR 431.54 (e); 456.3; 455.1-16
- WAC 388-501-0135

### PROGRAM

- Direct Referrals or through the use of health care algorithms
- Fee-for-Service and Managed Care clients
- Restricted to specific providers for at least 24 months:
- Managed Care clients are restricted to the plan for 12 months
- Care Management and Crisis Management

PRR Website: <http://maa.dshs.wa.gov/PRR> or (360) 725-1780



## Program Effectiveness

- ◆ **Expanded Program in 2005**
  - 2005 caseload = 200
  - Current caseload = > 3000,  
2<sup>nd</sup> to New York State
  - Savings since 2005 = > \$39 Million
  - Savings >\$1.5 Million/month
  - 33% decrease in emergency room visits
  - 37% decrease in physician visits
  - 24% decrease in number of prescriptions
- ◆ **Clients who completed their 2 year restriction (N=1364)**
  - 50% were released for compliance
  - 28% retained, usually continued high ER use
  - 15% no longer eligible for medical assistance
  - 6% are currently in review
- ◆ **Reviewed 518 PRC Clients referred for Narcotic Abuse in 2006**
  - Average # of narcotics prescriptions went from 3.07 to 1.63
  - Average number of prescribers went from 4.8 to 2.8
  - Total Morphine Equianalgesic Dosage (MEQ) decreased to 185 MEQ/day from 312 MEQ/day
  - Total narcotic claims went from 2274 to 839 total claims.

### **The important of continuing collaboration and the development of programs and strategies focus on decreasing the inappropriate use of narcotics**

- ◆ Increasing deaths due to prescription opioids is a public health issues
- ◆ 2004-2006 Medicaid Death Study in collaboration with DOH  
47% of deaths were Medicaid clients

