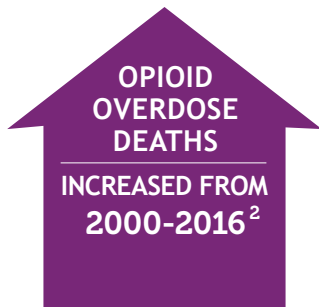




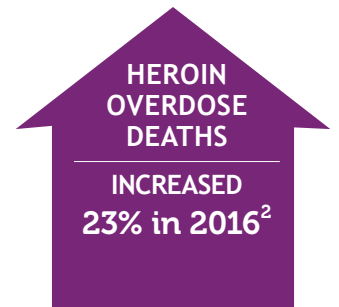
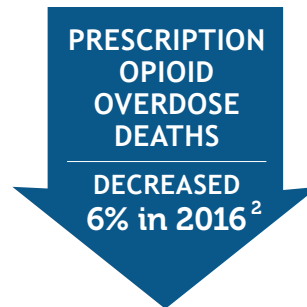
OPIOID USE IN COLORADO: Colorado Medicaid Addresses Addiction

Opioid misuse is a serious problem in Colorado and across the nation. In 2016, 259 people died in Colorado from prescription opioid overdoses – drugs like hydrocodone and oxycodone. That compares with 205 people who died from homicide.¹

Opioid Epidemic: State of Colorado

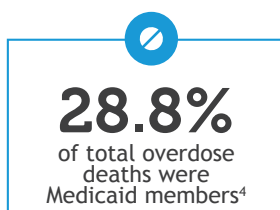
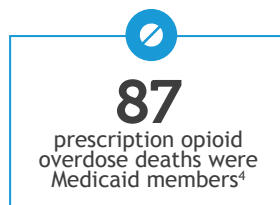
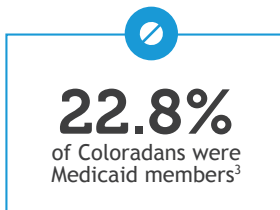


In 2016, approximately one Coloradan died every 36 hours from opioid overdose.²

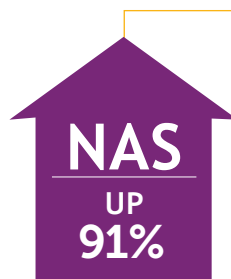
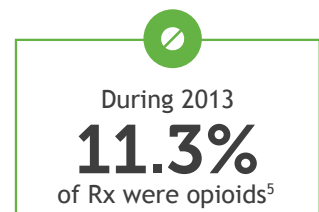
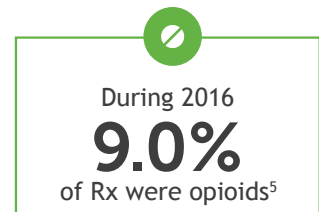
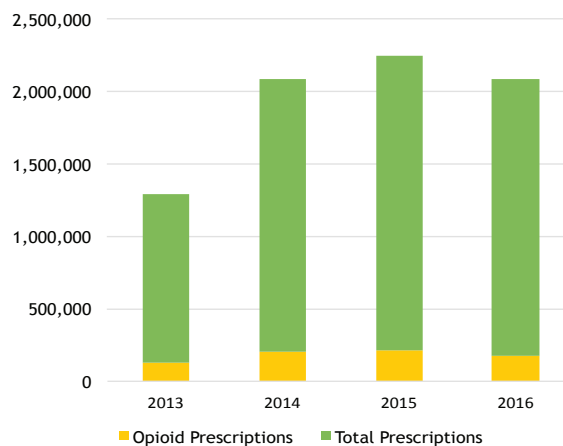


Opioid Epidemic: Colorado Medicaid

Colorado Medicaid members in 2017



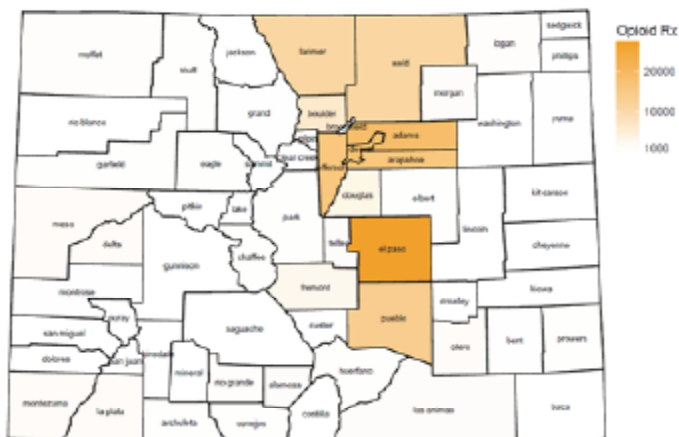
Opioid and Total Prescriptions⁵



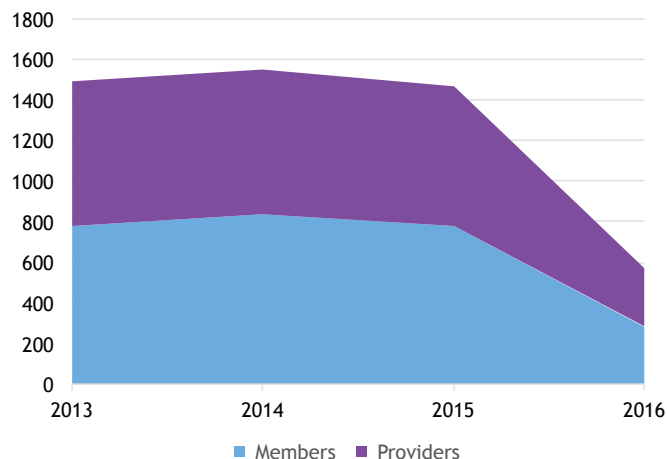
Opioid addiction can impact Coloradans of all ages. Pregnant women who use opioids may give birth to babies with Neonatal Abstinence Syndrome (NAS). These newborns may experience symptoms that require prolonged newborn hospitalization and medication management. The number of annual NAS births identified via Colorado Medicaid claims data increased from 194 births in 2012 to 371 births in 2016.

Evolving Our Programs and Developing Solutions

Medicaid Member Opioid Prescriptions by County



Number of High Dose* Opioid Prescriptions for 30+ Days⁵



During 2013
710
providers prescribed high dose*
opioids for 30+ days⁵

During 2016
288
providers prescribed high dose*
opioids for 30+ days⁵

Treating Addiction and Dependence



We cover products to treat addiction or dependence, such as Suboxone®, Vivitrol®, and buprenorphine. We also cover substance use disorder behavioral health services.

Overdose Antidote Administration



We cover a nasal atomizer device as well as a nasal spray that can be used to administer an opioid overdose antidote (naloxone).

Drug Utilization Review Program



Pain consultations and recommendations for drug utilization, provider education, interventions, and best practices.

Additional Opportunities to Address This Issue

- Leveraging Nationwide Best Practices:** 35 other states allow Medicaid programs access to their Prescription Drug Monitoring Program databases. This access would allow Colorado Medicaid to understand utilization patterns and could help identify members at risk of an opioid overdose or who could benefit from care coordination services.⁶
- Reducing Opioid Supply:** Effective August 1, 2017, an initial seven day supply, rather than a 30 day supply, is prescribed for members who have not had an opioid prescription in the past 12 months.
- Reducing Opioid Dosage:** Effective October 1, 2017, members on a pain management regimen decreased from 300 morphine milligram equivalent (MME) per day to 250 MME per day. The 250 MME limit does not apply to members receiving cancer treatment, palliative care, or hospice care.

¹Colorado's opioid and heroin overdose deaths outnumbered homicides in 2015, Denver Post, January 3, 2017.

²As prescription opioid deaths drop 6 percent in Colorado, heroin deaths rise 23 percent, Denver Post, March 7, 2017.

³According to CHI "Percent Enrollment in Medicaid" report, 22.8% of the total Colorado population was enrolled in Medicaid in 2015.

⁴CDPHE Health Watch No. 100 (Rosenthal et al, 2016) and CDPHE Vital Statistics Program Medicaid Death Certificate Extract, prepared by HCPF Data Analysis Section.

⁵Data is 4th Quarter MMIS data for each year.

⁶National Association For State Model Drug Laws.

*Greater than 300 morphine milliequivalent doses or >300 MED.