

Prescription Pain Medication Safety Program Shows Positive Results, Promotes Quality & Prevention

BOSTON—April 8, 2014—Blue Cross Blue Shield of Massachusetts' program to improve the safety and quality of care for its members taking prescription pain medication is showing positive results. In the first 18 months of the program Blue Cross:

- Improved safety & quality for its members
- Decreased painkiller prescriptions
- Lowered addiction risk for members
- Prevented excess pills from reaching the community

"Our program is about preventing harm by making sure our members receive the highest quality care for pain, while reducing the risks that come with such treatments," said Dr. John A. Fallon, Senior Vice President and Chief Physician Executive for Blue Cross Blue Shield of Massachusetts. "The results are encouraging and show that, among other things, health plans can play a meaningful role in helping to prevent prescription pain medication addiction."

The Program Goal: Best and Safest Pain Care for Our Members

In July 2012, Blue Cross became the first health plan in Massachusetts to institute new safety measures aimed at reducing the risk of addiction to prescription painkillers and preventing the harmful effects from other medications used to treat pain.

The steps were taken after the health plan's own review showed that more than 30,000 of its members received prescriptions for powerful painkillers such as Vicodin® and Percocet® lasting longer than 30-days, which many experts believe increases the risk of addiction. Among the findings, Blue Cross also found that thousands of its members were receiving combination prescriptions containing acetaminophen at levels that could potentially be harmful.

With the help of an outside panel of physicians, pain management experts, and addiction specialists new policies were instituted to promote best practices in prescribing; improve communication between providers and patients on the risks of addiction; and prevent possible addiction by reducing the number and duration of painkillers prescribed without prior authorization for treatment lasting longer than 30-days. The plan also was designed to provide doctors valuable information to help identify patients who may be at risk for addiction.

"The goal of treating pain is to relieve suffering and not to create more problems for patients," said Dr. Edgar Ross, Medical Director for Pain Management at Brigham and Women's Hospital. "I was pleased to help in designing this evidence-based program, and I'm happy to see that it is improving quality and safety without creating barriers to care."

The Results: An 18-Month Checkup

- Improved safety of pain care and reduction in risk of addiction, misuse and diversion of prescription pain medications, while protecting vulnerable patients:
 - 20% decrease in claims for short-acting opioid painkillers such as Vicodin® and Percocet®
 - 50% decrease in claims for long-acting opioids such as OxyContin®, by working with providers to switch patients to more appropriate short-acting medications
 - Excess painkiller prescriptions avoided, resulting in an estimated 6.6 million fewer doses in the community
 - More than 90% of patients prescribed greater than the recommended daily dose for acetaminophen had their prescriptions adjusted by the prescriber
 - Accommodations made for vulnerable, chronic care patients to protect their care
- Improved quality through better communication:
 - Fostered improved communication between doctors and patients regarding the proper use and risks associated with prescription painkillers through guidelines on prescribing pain medications to Blue Cross members
 - Promoted best practices in prescribing all pain medication, including improved safety measures on the use of acetaminophen and limiting off-label use of buprenorphine for pain management
 - Closed gaps in provider information by sharing regular reports with doctors regarding their patients'

narcotic prescriptions to help identify those at higher risk of addiction

- Enhanced care management service for those on large amounts of narcotic medications:
 - Case managers have worked with Blue Cross members to ensure access to pain management experts, and if appropriate, to explore non-narcotic methods of pain control
 - Blue Cross medical directors consulted with prescribers to improve care coordination for its members with pain management needs - especially important when more than one provider is prescribing medication for a single patient

"This initiative is a common sense approach that balances the needs of patients while addressing a real public health concern with regard to painkillers," said Dr. Joseph Leader, a Pediatrician from Woburn, Massachusetts who has been outspoken about the need to protect adolescents from the risk of prescription opiate abuse and addiction.

In addition to the results released today, Blue Cross also strongly underscored its commitment to providing members with a full spectrum of behavioral health and addiction services. The health plan is launching new initiatives to enhance addiction care, and will offer a new social networking tool to support members with their recovery.

"Addiction to narcotics and other substances is insidious and that's why we need to remain laser-focused on preventing addiction before it happens," said Dr. Fallon. "We also know that treatment saves lives. If any of our members need help with addiction, they should contact their health care provider to discuss the options. Help is available."

About Blue Cross Blue Shield of Massachusetts

Blue Cross Blue Shield of Massachusetts (www.bluecrossma.com) is a community-focused, tax-paying, not-for-profit health plan headquartered in Boston. We are the trusted health plan for more than 30,000 Massachusetts employers and are committed to working with others in a spirit of shared responsibility to make quality health care affordable. Consistent with our corporate promise to always put our 2.8 million members first, we are rated among the nation's best health plans for member satisfaction and quality. Connect with us on [Facebook](#), [Twitter](#), [YouTube](#) and [LinkedIn](#).

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