

Policy, Insurance, Incentives Work Group
October 25 Minutes

Next meeting: Dec 6, 3:00-4:30

Future meetings: 1st Thursday of the month from 3-4:30

Purpose Statement

Develop, implement, and evaluate well-defined policy initiatives/interventions that will assist in preventing deaths and other negative outcomes of use & misuse of prescription opioid medications.

Policy initiatives are intended to be system changes, such as changes in state law, insurance reimbursement or coverage policies, or health care provider or institutional policies, and/or data collection activities.

Initiatives (brainstorm):

1. Warning/disclosure handed out with Rx prescription
2. Emergency Departments require driver's license and name of PCP before receiving narcotics
3. Digitalize prescriptions
4. ER's only give 24 hr supply of narcotics
5. Limit number of opioid prescriptions covered by insurance each month
6. Require physicians to check DOPL's Controlled Substance Database (CSDB) before prescribing
7. Require pharmacists to check DOPL's CSDB before filling
8. Require DOPL's CSDB to be up to date
9. Simple program for health plans to use to indentify high opioid users tied with an educational and/or case management program.
10. Retail pharmacy program to educate pharmacists
11. Program to work with DOPL to promote appropriate use of the Controlled Substances Database among health care providers
12. Simple program that might sensitize physician

Assignments:

Erin: talk with DOPL to see how to go about starting 6-8

Keely: find out what info is available from the ED

Abbie: call ER's in SL to see about limiting # of narcotics (ask LDS Hospital about their model)

Carla: find out from pharmacist about payers?

Trish: look at the data from Violence division to see if it can be helpful to use in analysis