



National Spotlight on State-Level Efforts to End the Opioid Epidemic

Leading edge practices and next steps in reversing the opioid epidemic

The American Medical Association (AMA) and Manatt Health conducted an in-depth analysis of the response to the opioid epidemic by 4 states: Colorado, Mississippi, North Carolina, and Pennsylvania.

The analysis focuses on state efforts in 6 key areas to identify best practices and provide a roadmap for all states to follow in order to increase access to high-quality, evidence-based treatment for persons with a substance use disorder (SUD) or who need comprehensive, multidisciplinary, multimodal pain care, and to increase access to naloxone to save lives from overdose.

Key themes to the state spotlights

- States must be willing to use their oversight and enforcement authority.
 State regulators have differing degrees of authority to pursue policies and changes that can have a significant impact on reducing barriers and improving patient care, but the extent to which they use these tools to increase access to evidence-based treatment or hold payers and others accountable for impeded access varies considerably.
- Medicaid is leading the way. Medicaid is on the front lines and often provides more comprehensive care for substance use disorders than the commercial insurance market does; there may be opportunities to extend Medicaid successes to commercial coverage. Expanding Medicaid would help even more patients.
- Grants are helpful, but long-term implementation needs long-term, sustainable funding. Many best practices that are helping save lives are grant-funded and need long-term, sustainable funding to continue benefiting patients. Without reliable funding streams, programs that help save lives will simply go away.
- The process of evaluating what works is just starting. Some states have undertaken efforts to evaluate current policies and programs to determine what is actually working; most of these evaluations are just beginning. Comprehensive analysis is essential in order to focus resources on successful interventions—and to revise or rescind policies that are having unintended consequences.

"We are at a crossroads in our nation's efforts to end the opioid epidemic. It is time to end delays and barriers to medication-assisted treatment (MAT)—evidence-based care proven to save lives; time for payers, PBMs and pharmacy chains to reevaluate and revise policies that restrict opioid therapy to patients based on arbitrary thresholds; and time to commit to helping all patients access evidence-based care for pain and substance use disorders. Physicians must continue to demonstrate leadership, but unless and until these actions occur, the progress we are making will not stop patients from dying."

~ Patrice A. Harris, MD, MA, President, American Medical Association; Chair, AMA Opioid Task Force

NEXT STEPS AND RECOMMENDATIONS

Policymakers and regulators across the country and in Washington, D.C., have made ending the epidemic their highest priority. This epidemic has led to the passage of hundreds of new laws, regulations, clinical guidelines, and national recommendations. Some are evidence-based, such as increasing access to MAT, removing barriers to comprehensive pain care, and enhancing availability of naloxone to help prevent overdose deaths. Other policies, such as arbitrary prescribing limits and prior authorization for MAT, continue to hurt efforts to improve patient outcomes. The AMA–Manatt analyses also revealed multiple areas in which there have been positive outcomes and promising results—and areas where additional action is needed.

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Further expand MAT treatment workforce



Remove barriers to high-quality, evidence-based SUD services



Enhance comprehensive pain care, nonopioid alternatives



Strengthen mental health and SUD parity enforcement



Remove stigma associated with MAT

This national spotlight highlights 6 key areas where regulators, policymakers, and other key stakeholders can take action. These may not be easy to implement, but they are necessary to help end the epidemic. The AMA stands ready to work with all stakeholders to implement these recommendations.

- Access to evidence-based treatment for opioid use disorder. Remove prior authorization and other barriers to medicationassisted treatment (MAT) for opioid use disorder—and ensure MAT is affordable.
- Pain management. Enhance access to comprehensive, multidisciplinary, multimodal pain care, including non-opioid and nonpharmacologic pain care options. The AMA also is urging a detailed regulatory review of formulary and benefit design by payers and PBMs to ensure that patients have affordable, timely access to medically appropriate treatment.
- Access to naloxone. Reduce harm by expanding access to naloxone and coordinating care for patients in crisis. This includes linking overdose reversals to treatment, co-prescribing naloxone to patients at risk of overdose and more.

- Parity enforcement. Increase oversight and enforcement of mental health and substance use disorder parity laws. Market conduct exams can support enforcement of parity laws and protect consumers—regulators can take action using their current oversight authority.
- Network adequacy/workforce
 enhancement. Ensure adequate networks
 that allow for timely access to addiction
 medicine physicians and other health care
 professionals; this includes payment reforms,
 collaborative care models, and other efforts to
 bolster and support the nation's opioid use
 disorder treatment workforce.
- Evaluation. Evaluate policies and outcomes to identify what is working, so as to build on the most successful efforts, and also to identify policies and programs that may need to be revised or rescinded.



