

STATEMENT FOR THE RECORD

House Energy and Commerce, Subcommittee on Health
Hearing

*“Combating the Opioid Crisis: Helping Communities Balance Enforcement
and Patient Safety”*

February 28, 2018

On behalf of Prime Therapeutics (Prime), a pharmacy benefit manager serving more than 27 million members across the country and headquartered in Eagan, Minnesota, we would like to thank the Subcommittee for your efforts to address our nation’s opioid epidemic and alert you to Prime’s efforts to address the crisis.

Prime has been working to reduce controlled substance misuse for more than a decade. Our pharmacists created a controlled substance score – an algorithm to identify people who are at risk for controlled substance abuse. We shared this tool publicly in the hopes that our peer-reviewed tool would be adopted by other health organizations so they, too, could help identify people who may need help in their own populations. This controlled substance score is the foundation to Prime’s comprehensive [Controlled Substance Management Program](#) (overview attached), a program built on the recommendations of the Centers for Disease Control and Prevention (CDC).

As part of our Controlled Substance Management Program we conduct prescriber outreach, which alerts prescribers to patients who have a high controlled substance score. A point-of-sale alert is then applied which notifies pharmacists of potential concerns with controlled substance prescriptions. They then can intervene directly with members. If appropriate, and to increase safety, we may enroll members who are at risk in a “pharmacy home” or single prescriber for obtaining their controlled substance medicines.

Through these efforts, our program is helping produce positive outcomes. In the past five years, Prime has seen a **71 percent decline** in the number of high-risk opioid users and a 16 percent reduction in opioid claims among its commercial membership.

Furthermore, our pharmacists have served on the Pharmacy Quality Alliance to develop “double threat” guidelines to help physicians prevent prescribing of opioids and benzodiazepines which, when combined, may lead to death. Prime also participated in the Institute for Clinical and Economic Review’s (ICER’s) evaluation of abuse-deterrent formulations (ADFs) where evidence was not sufficient to show a reduced risk of abuse for patients being prescribed ADF opioids and, at current prices, ADFs would need to undergo significant cost reductions to achieve cost neutrality. We’ve also collaborated with health organizations to advocate for a nationwide prescription drug monitoring program (PDMPs) to prevent “doctor shopping”. We actively work with law enforcement agencies to prevent fraud, waste and abuse.

We are also focused on safe disposal of medicines. According to a [public opinion survey](#) Prime commissioned, we found that few Americans safely dispose of unused medicine. We need to do what we can to keep these dangerous medicines from falling into the wrong hands. That is why Prime joined with Walgreens and several other health care organizations to announce an expanded [safe medication disposal effort](#). This program is bringing “take back” kiosks

to an additional 900 Walgreens stores – adding to the 600 kiosks in existence – in areas where the opioid epidemic has challenged communities.

Our [public opinion survey](#) results also revealed that many people aren't told about the dangers of opioids. This signals that many tools aimed at combatting the opioid crisis may be underused. That's alarming knowing how many resources are already being put into existing tools that may not be used to their fullest potential. A recent Clinton Foundation/Johns Hopkins Bloomberg School of Public Health report – which included extensive contributions from one of [Prime's clinical pharmacists](#) – shared similar information and recommendations for action to address the epidemic. It's this kind of collaborative work that will help move the needle to end the epidemic.

Our work is far from over. Prime is now developing a predictive modeling tool so opioid misuse can be avoided before it ever starts. This tool will enable us to identify individuals who are early in their opioid use and have characteristics matching those who use opioids at unsafe levels. We can then work with prescribers to help educate members on the dangers of controlled substances and prescribe other pain management treatments. Preventing misuse is key to slowing and eventually ending this epidemic.

In the realm of public policy, we believe there are several policies that would help address the opioid epidemic. First, we support requiring prescriber use of interoperable PDMPs. While not all states allow managed care plans and PBMs to access PDMPs, where state laws do permit such access, PBMs like Prime are able to obtain complete claims history for covered members. Such access enables improvements in current controlled substances interventions that have been shown to positively influence controlled substances utilization. The literature supports the benefits of PDMPs. For instance, a 2016 study in [Health Affairs](#) found that the implementation of a PDMP program was associated with more than a 30 percent reduction in the rate of prescribing of Schedule II opioids. Another 2016 [Health Affairs](#) study found that implementation of state PDMPs was associated with the prevention of one opioid-related overdose death every two hours on average nationwide.

Second, greater adoption of e-prescribing for controlled substances (EPCS) reduces diversion. For instance, since New York State's EPCS mandate took effect in March 2016, there has been a 70 percent reduction in the loss and theft of prescription forms.

Third, Prime also strongly supports the CDC's guidelines for prescribing opioids for chronic pain and believes that greater adherence to them would help reduce inappropriate prescribing. Further, provisions in the Comprehensive Addiction and Recovery Act (CARA) – to "lock-in" Medicare beneficiaries who may be misusing opioids to a pharmacy home or single prescriber – will help complement similar efforts in the Medicaid population and should reduce the incidence of addiction in seniors.

Prime believes this epidemic deserves action on multiple fronts – from pharmacy benefit managers, as well as pharmacies, providers, pharmaceutical manufacturers, government and law enforcement agencies, and many other organizations. Together we have great influence over finding solutions made for those affected by this alarming public health issue.

Prime is proud of what we have accomplished with our controlled substance programs and partnerships over the last decade. Should you have any questions, please do not hesitate to contact Julie Cantor-Weinberg in Prime's Office of Government Affairs at Julie.Cantor-Weinberg@primetherapeutics.com.