



Eric Holcomb, Governor  
State of Indiana

*Office of Medicaid Policy and Planning*  
402 W. WASHINGTON STREET, ROOM W374, MS 07  
INDIANAPOLIS, IN 46204-2739

February 26, 2018

<First Name> <Last Name>  
<Address1>  
<Address2>  
<City>, <State> <Zip>

RE: At-Risk Opioid Dosing for Indiana Health Coverage Programs Members

Dear <First Name> <Last Name>,

Decreasing Hoosier suffering due to the ongoing opioid crisis depends on all of us partnering together to change the culture around pain management, both from the patient and prescriber viewpoint. To that end, the Indiana State Department of Health and Indiana Medicaid have teamed up to help not only identify and assess at risk practices and patients, but also provide resources and action-oriented guidance to help us all “row in the same direction.”

Analysis performed by the US Department of Health and Human Services Center for Disease Control and Prevention (CDC) determined the risk of harm to individuals increases as their opioid dose increases and as their length of opioid therapy increases. For example:

- Individuals taking opioid doses  $\geq 50$  morphine milligram equivalents (MMEs) per day had twice the risk of death from an overdose than those taking  $\leq 20$  MMEs per day
- Individuals taking opioid doses  $\geq 90$  (MMEs) per day had 10 times the risk of death from an overdose than those taking  $\leq 20$  MMEs per day
- Individuals taking an opioid for  $> 3$  months (even at low doses) had 15 times the risk of addiction to those taking opioids for  $\leq 3$  months

It is the state’s goal to positively impact the opioid epidemic in Indiana by reducing the amount of unnecessary opioids available, thereby helping reduce the number of opioid overdoses. Initially, our approach will focus on provider awareness. In collaboration with our managed care partners, we are performing regular analyses of opioid utilization by Indiana Health Coverage Programs (IHCP) members who do not have a cancer or end-of-life related diagnosis entered into our database. Attached are listings of pharmacy claims submitted for IHCP members with total prescribed opioid doses averaging  $\geq 90$  MMEs per day for October, November and December of 2017, in which you were identified as one



of the prescribing providers. We ask that you review this list and evaluate each member's opioid utilization for that period. **Be aware that recommended changes to opioid prior authorization criteria, potentially impacting these members, are anticipated to be presented to the Drug Utilization Review (DUR) Board for consideration as early as July, 2018.**

The Indiana State Department of Health and Indiana Family and Social Services Administration recommend that any patient that is prescribed more than seven (7) days of narcotics is also prescribed a naloxone kit. Entities that participate in naloxone distribution can be found on [www.optIN.in.gov](http://www.optIN.in.gov). Access to naloxone by family members and friends can save Hoosiers from overdose deaths. Individuals, such as those listed in the attachment, are at increased risk for opioid overdose and should be prescribed and trained to use a naloxone kit.

IndianaMedicaid.com selecting *Providers*, then *Pharmacy Services*, (<http://provider.indianamedicaid.com/provider-specific-information/pharmacy/pharmacy-services.aspx>) provides links to the following online opioid therapy management resources you may find helpful as you play your part in combatting the opioid epidemic.

- Indiana State Medical Association's End the Epidemic
- Indiana Hospital Association's Stem the Tide: Addressing the Opioid Epidemic
- Safe and Compassionate Opioid Wean
- SAMHSA CME Medication Assisted Treatment
- CDC Pocket Guide: Tapering Opioids for Chronic Pain
- CDC Opioid Guideline Mobile App

Thank you for all the work you do for our vulnerable members and the state as a whole. Without providers like you, we would not be able to deliver the vital healthcare services that 1 in 5 Hoosiers need. Together, we can work our way out of this epidemic and improve public health in Indiana. Your suggestions or feedback are welcome and may be submitted to FSSA at [opioid.report@fssa.IN.gov](mailto:opioid.report@fssa.IN.gov).

Sincerely,

Jennifer Walthall, MD, MPH  
Secretary of Family and Social Services Administration

Kristina Box, MD, FACOG  
State Health Commissioner

*Attach list of members and opioid claims 10/1/2017-12/31/2017*

SAMPLE