

# Use of Opioids from Multiple Providers



## Why Are Opioid Prescribing Practices Important?

Individuals who visit multiple prescribers and use multiple pharmacies are also at higher risk of overdose. Individuals who receive opioids from four or more prescribers or four or more pharmacies are more likely to die from opioid-related overdose than those who receive opioids from one prescriber or one physician.<sup>1</sup>

## Opioid Prescribing Practices<sup>2</sup>

Members ages 18 and older who were dispensed an opioid for  $\geq 15$  days during the year from multiple prescribers and/or pharmacies are at higher risk for overdose.

Three rates are reported. The proportion of members dispensed opioids from:

- Four or more different **prescribers**
- Four or more different **pharmacies**
- **Combination** of four or more different **prescribers and** four or more different **pharmacies**

## Best Practices

Providers can help our members by:

- Coordinating care with the patient's other providers
- Utilizing Oklahoma's prescription monitoring program before prescribing an opioid
- Educating the member regarding the safe use and risks of opioids. This includes education and access to **Naloxone (Narcan®)**. The [Centers for Disease Control and Prevention](#) recommends anyone at increased risk for an opioid overdose should be offered a **Naloxone (Narcan) prescription**.

## Opioid Medications Include:

- Benzhydrocodone
- Buprenorphine (buccal film and transdermal patch)
- Butorphanol
- Codeine
- Dihydrocodeine
- Fentanyl
- Hydrocodone
- Hydromorphone
- Levorphanol
- Meperidine
- Methadone
- Morphine
- Opium
- Oxycodone
- Oxymorphone
- Pentazocine
- Tapentadol
- Tramadol

The above material is for informational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment. The fact that a service or treatment is described in this material is not a guarantee that the service or treatment is a covered benefit and members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any service or treatment is between the member and their health care provider.

<sup>1</sup> NCQA HEDIS MY 2020 & MY 2021, HEDIS measure for Use of Opioids from Multiple Providers; <https://www.ncqa.org/hedis/measures/use-of-opioids-from-multiple-providers/>

<sup>2</sup> NCQA HEDIS MY 2020 & MY 2021 Technical specifications for health plans, volume 2, Washington DC, 2020