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# Physician Leadership in Ending the Opioid Epidemic

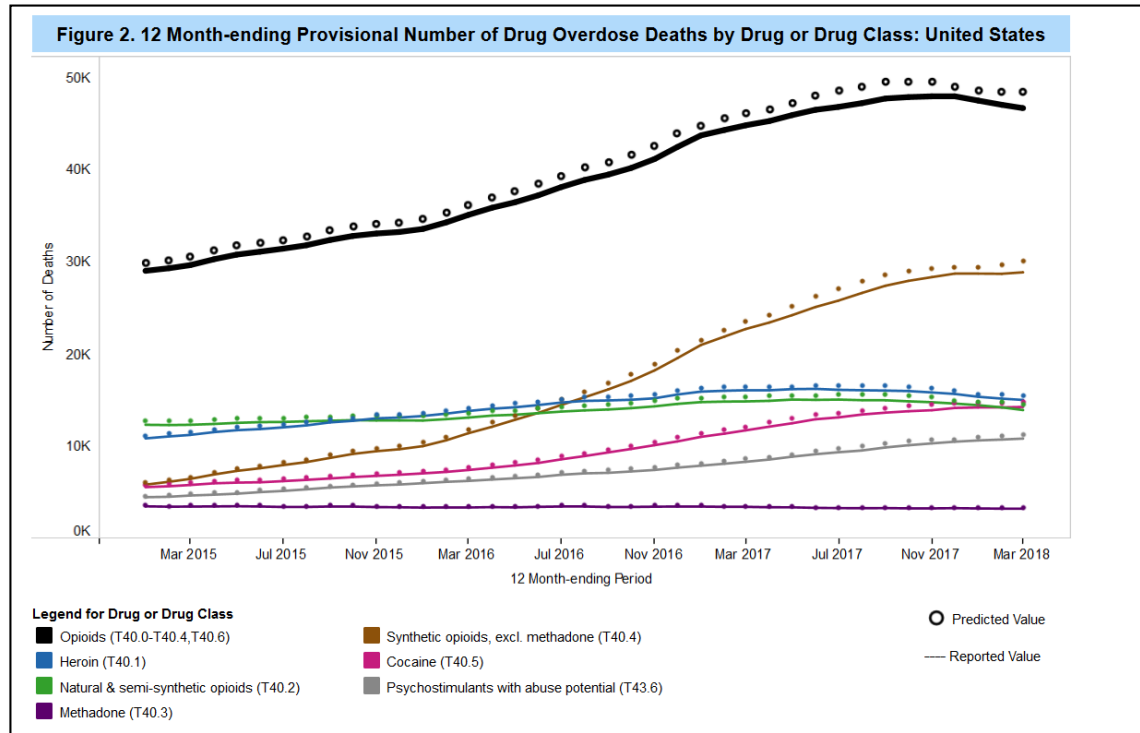
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# The nation's opioid epidemic

- The nation's rising opioid-related mortality toll has shifted from one fueled by prescription opioids to one driven by illicitly manufactured fentanyl and fentanyl analogues.
- Despite a 22% reduction in opioid prescriptions since 2013, the loss of life and emotional toll of the epidemic continue to climb.
- The challenges faced by these states make for an ideal case study how strong leadership can make a difference — even if the fight is not yet over.

# New CDC numbers show plateau in overdose deaths



# AMA Opioid Task Force recommendations

## *PDMPs*

Register for and use your state PDMP to make more informed prescribing decisions

**TAKE ACTION >**

## *Education*

Ensure you have the education and training on effective, evidence-based treatment

**TAKE ACTION >**

## *Treatment*

Support and advocate for comprehensive care for patients in pain and those with a substance use disorder

**TAKE ACTION >**

## *Stigma*

Removing stigma is essential to ending the nation's opioid epidemic

**TAKE ACTION >**

## *Naloxone*

Expand access to naloxone in the community and through co-prescribing

**TAKE ACTION >**

## *Safe Storage and Disposal*

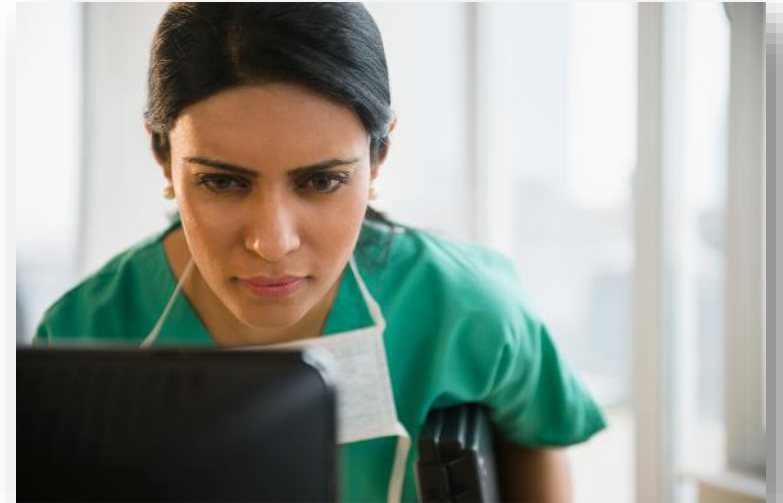
Work with your patients to promote safe storage and disposal of opioids and all medications

**TAKE ACTION >**

[www.end-opioid-epidemic.org](http://www.end-opioid-epidemic.org)

# Progress of the AMA Opioid Task Force

- Opioid prescribing has slowed for the fifth year in a row, decreasing by **22%** from 2013 – 2017.
- Prescription Drug Monitoring Program registration and use continues to increase; databases were accessed more than **300 million** times in 2017, a **121%** increase from 2016.
- Treatment capacity is increasing. More than **50k** physicians are certified to provide buprenorphine to treat opioid use disorder.
- Physicians are enhancing their education -- nearly **550k** physicians and others took CME in pain management and substance use disorders in 2017.
- Access to naloxone is rising: Prescriptions **more than doubled** in 2017.



(Source: AMA Opioid Task Force 2018 Progress Report)

# Pennsylvania, Arkansas, New Jersey and Washington DC eliminate prior authorization for MAT; More to come

- April 2019 – New Jersey, Arkansas and District of Columbia agree to remove prior auth from MAT for substance use disorder.
- October 2018 - Landmark agreement in Pennsylvania ends prior auth for MAT under state-regulated plans.
- Access to MAT will also be available in Pennsylvania on the lowest cost sharing tier.
- **AMA calls on other states to follow in their footsteps.**



# Reasons for optimism in many states



JAMA Network™



Adolescent Substance Use and Addiction Program



# What we need to do now

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- Remove all barriers to evidence-based MAT, in all settings, including prior authorization.
- Restore balance to opioid prescribing policies, and ensure that patients have access to non-opioid pain care, as part of a comprehensive approach to pain management.
- Enforce parity laws for mental health and substance use disorder.







# Moving forward

- **Ensure a public health focus**
- **PDMPs** – transform into clinical tools
- **Treatment** – remove barriers to care
- **Overdose prevention** – naloxone co-prescribing can save lives
- **Policy** – evaluate what works and amend what doesn't
- **Coalition building** – work together!

