

# Opioid Use Disorder Diagnosis and High Dosage Opioid Use

An Analysis of the CT Adult  
Medicaid Population



## Presentation Goals

- Use CT Specific data to better inform key stakeholders regarding the scope, nature, demographics, and costs of opioid use within the Adult Medicaid Population
- Leverage the data to assist in identifying practical interventions that Beacon can employ to improve care and reduce the burden of disease
- Promote dialogue and facilitate decision making regarding which interventions to pursue



## Overview of Presentation

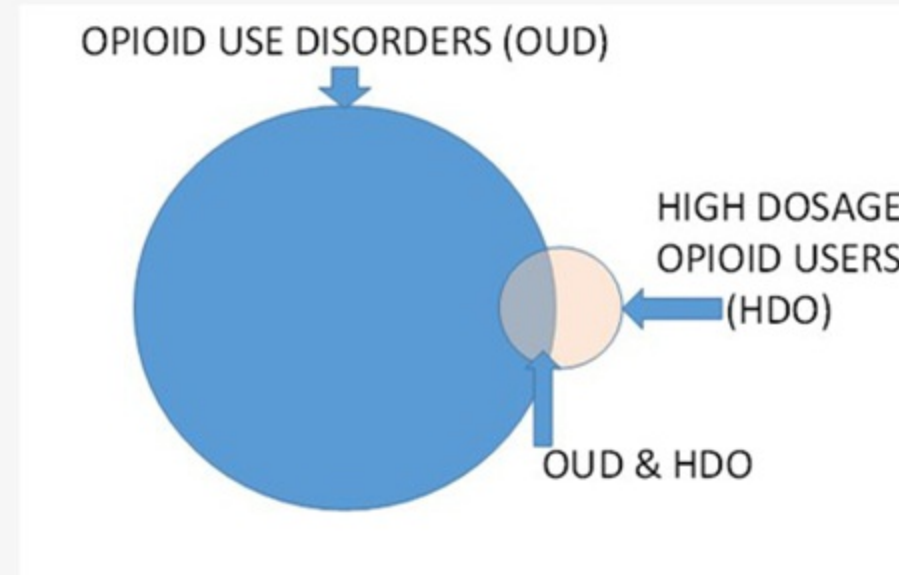
- The Opioid Crisis continues in CT as it has in the rest of the country
- The rate of Opioid related overdose deaths continues to rise and CT is on track for over 1,000 this year.
- Beacon has organized data regarding rates of **Opioid Diagnoses** and **High Opioid Prescribing** in the Adult Medicaid Population



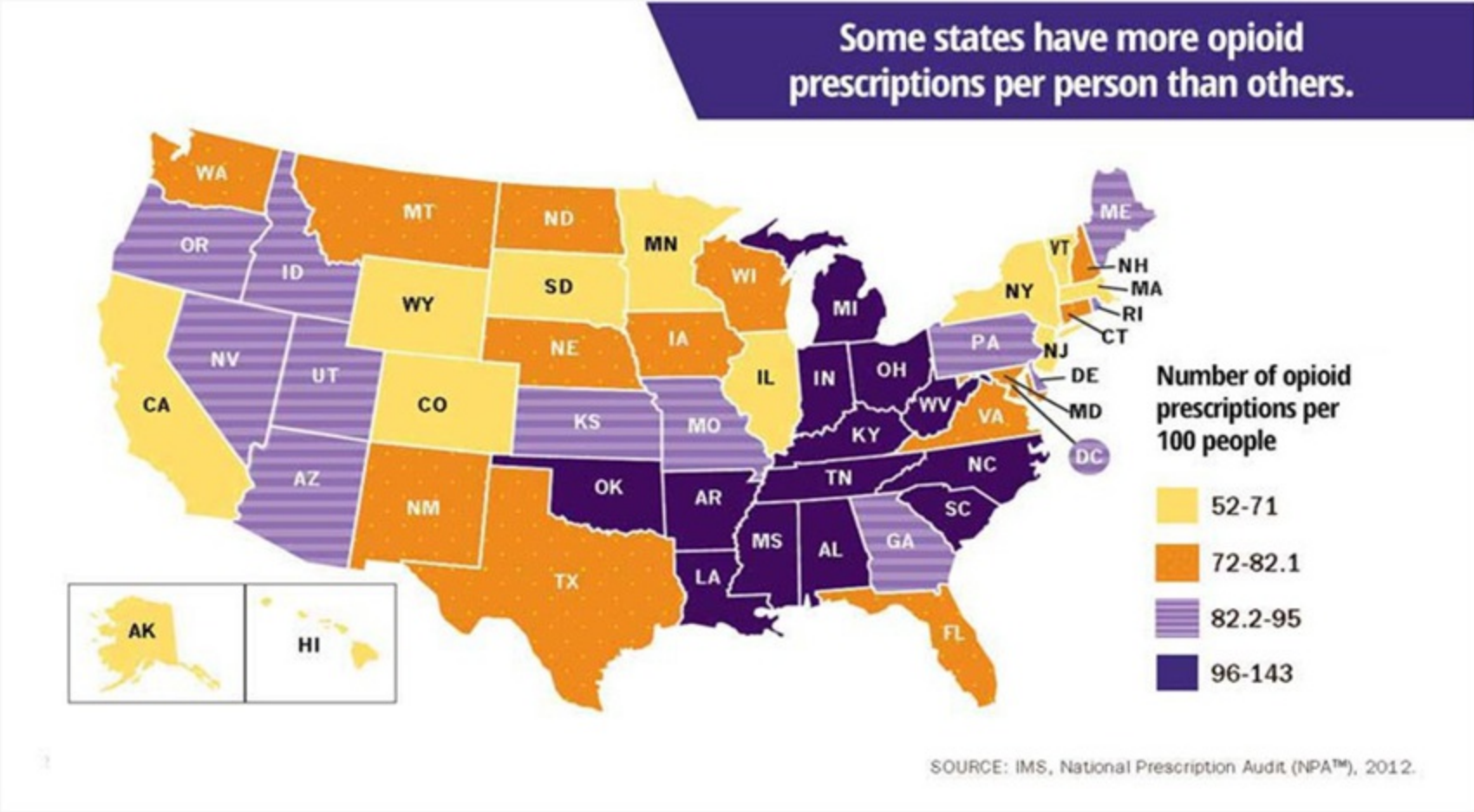


## Three Sets of Data

- The rate of Opioid Use Disorder diagnoses in the Medicaid Population
- The rate of High Opioid Use in the Medicaid Population
- The rate of Opioid Use Disorder diagnoses in the population of High Opioid Users



## Opioid Prescribing by State

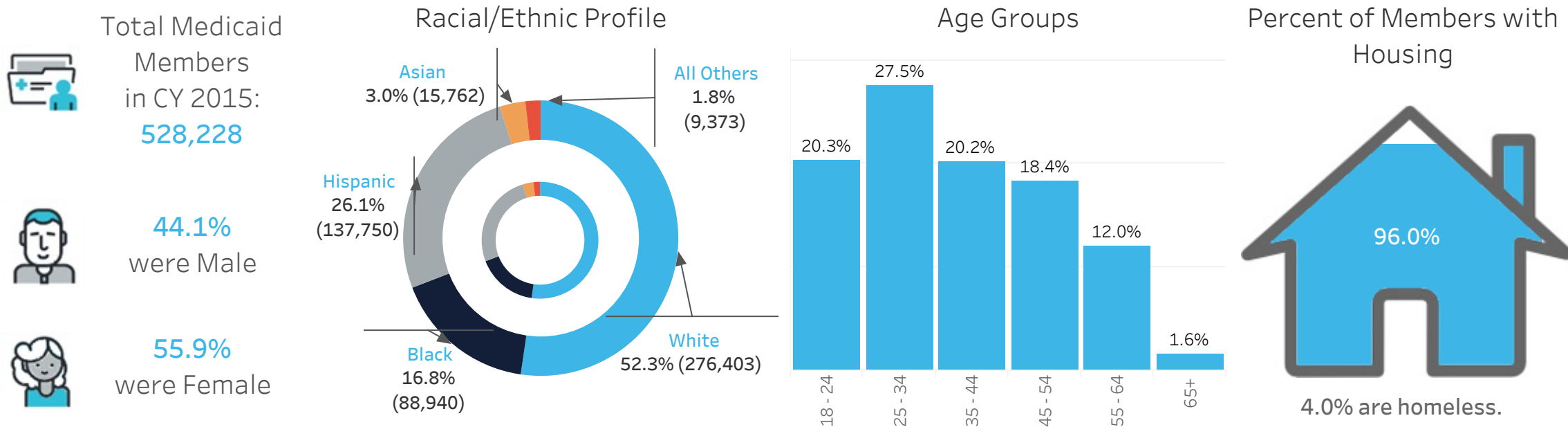




## **Dashboard: Opioid Use Disorders in the Medicaid Population**

# Population Profile Demographic Data

for Medicaid Members in CY 2015



## Diagnostic Prevalence Rates for Medicaid Members in CY 2015

▼ Select Medical Diagnosis  
Diabetes

Diabetes: **11.4%**



▼ Select Mental Health Diagnosis  
Autism Spectrum Disorder

Autism Spectrum Disorder: **0.3%**



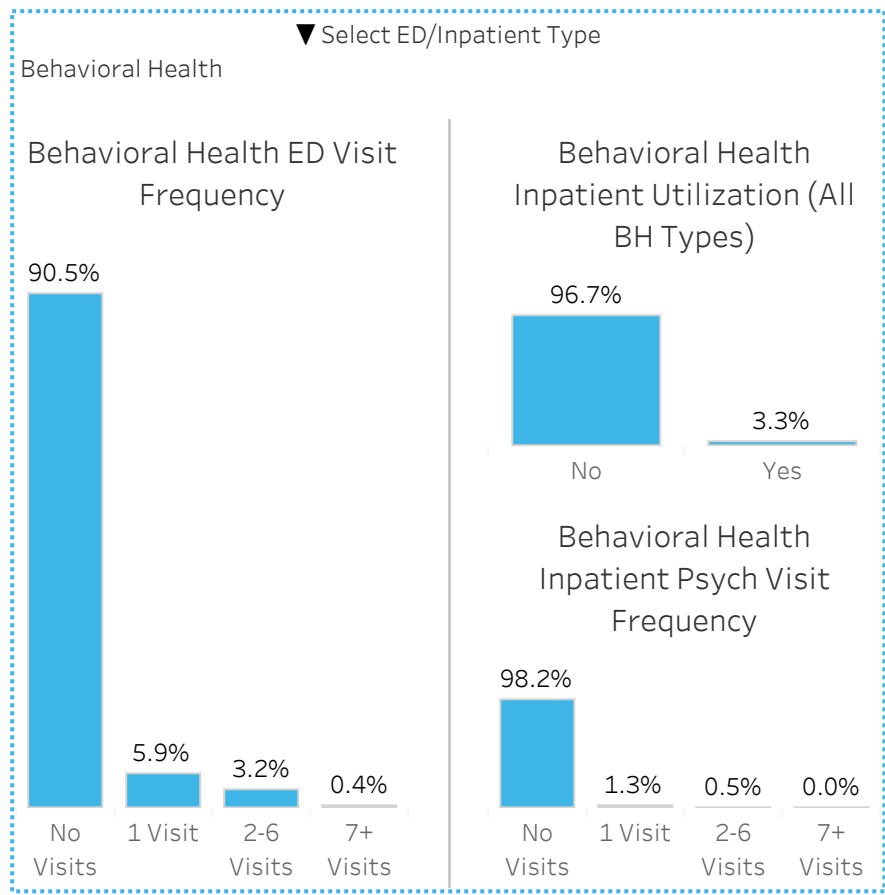
▼ Select Substance Use Diagnosis  
Opioid

Opioid: **6.2%**



Co-occurring Disorders (MH & SA):	Comorbid Diagnoses (BH & Med):
<b>13.4%</b>	<b>21.7%</b>

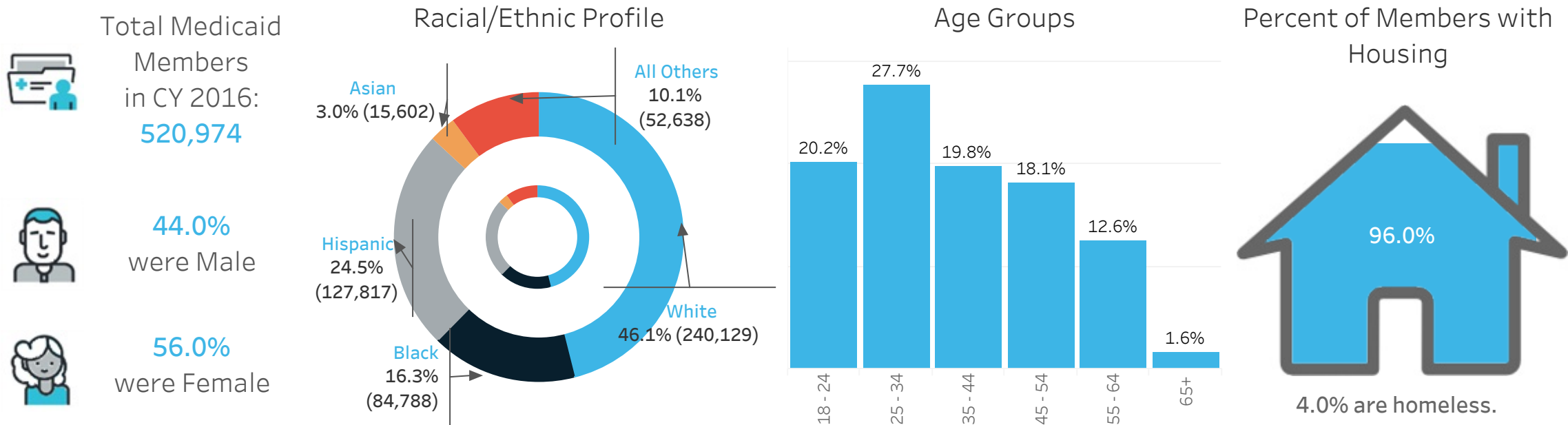
Total Avg. Dollars per Member: <b>\$6,765</b>	
Total Spend	
Total Dental Cost	\$87,007,367
Total Pharmacy Cost	\$1,001,572,539
Total Med/BH Claims Cost	\$2,484,968,894
Total Member Cost	\$3,573,548,800





# Population Profile Demographic Data

for Medicaid Members in CY 2016



## Diagnostic Prevalence Rates for Medicaid Members in CY 2016

▼ Select Medical Diagnosis  
Diabetes

Diabetes: **9.0%**



▼ Select Mental Health Diagnosis  
Autism Spectrum Disorder

Autism Spectrum Disorder: **0.4%**




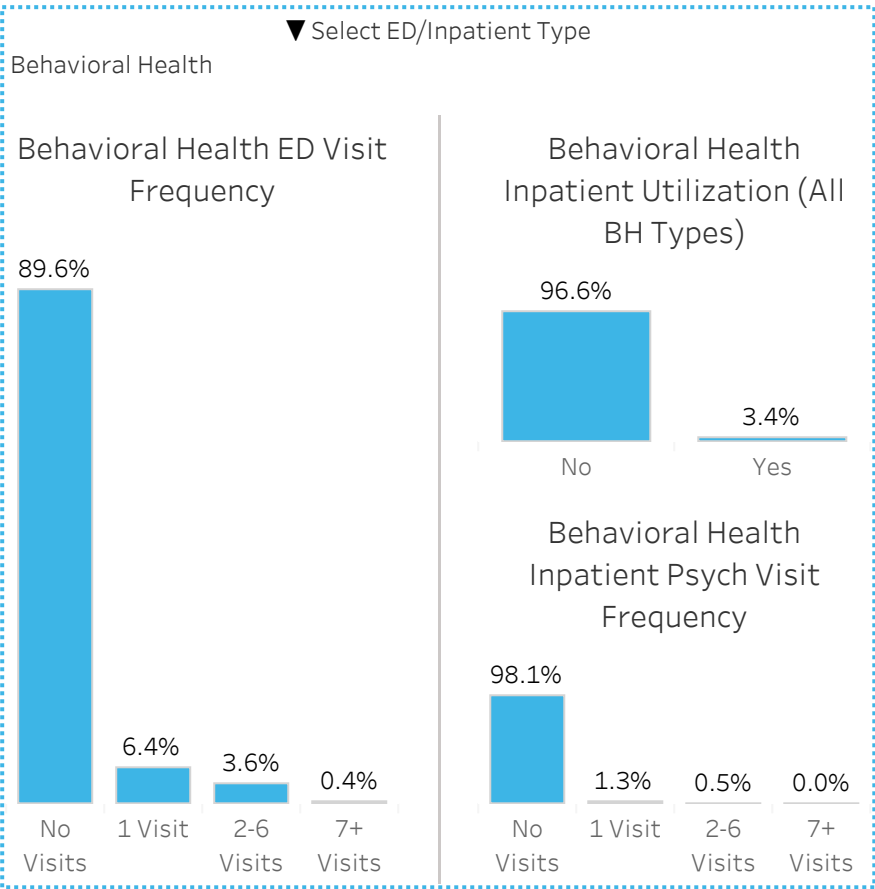
▼ Select Substance Use Diagnosis  
Opioid

Opioid: **6.8%**



Co-occurring Disorders (MH & SA):	Comorbid Diagnoses (BH & Med):
<b>12.9%</b>	<b>21.7%</b>

Total Avg. Dollars per Member: <b>\$7,199</b>		
Total Spend		
Total Dental Cost	\$86,311,496	
Total Pharmacy Cost	\$1,065,458,874	
Total Med/BH Claims Cost	\$2,598,533,326	
Total Member Cost	\$3,750,303,697	





## Summary of Findings – 2015 & 2016



The prevalence of OUD in the AMP increased slightly to 7% (35,388 members) in CY 2016 from 6% (32,533) in CY 2015



The majority of the AMP is female (56% in both years); however, the majority (61% and 62%) of those with an OUD are male



\*White members made up the majority of the AMP in both years, but decreased from 52% in CY 2015 to 46% in CY 2016

25  
34

The largest age band in the AMP is 25-34 year olds (28% in both years), but this group is over-represented among those with OUD (36% and 35%)



Those with an OUD are four times as likely to be homeless than the AMP (16% vs. 4% in both years)

\*The observed changes in race/ethnicity that occurred from 2015 to 2016 are most likely due to changes in the underlying methodology of collecting race ethnicity data.

## Summary of Findings – 2015 & 2016 (continued)



The OUD population is almost 2.5 times as likely to have a comorbid medical diagnosis (52% and 53% vs 22%) the most frequent being hypertension for both groups



The average total spend in Medicaid is more than 2.5 times as high for those with an OUD diagnosis compared to the AMP (\$17,500 vs \$6,765 in CY 2015 and \$18,167 vs \$7,199 in CY 2016)



The OUD population is more than 3.5 times as likely to have a BH ED Visit (36% vs 9% in CY 2015 and 38% vs 10% in CY 2016) and nine times as likely to have a BH IP admission (27% vs 3%)

## General Conclusions



A significant number (35,338 - 2016) of the AMP has received an OUD diagnosis

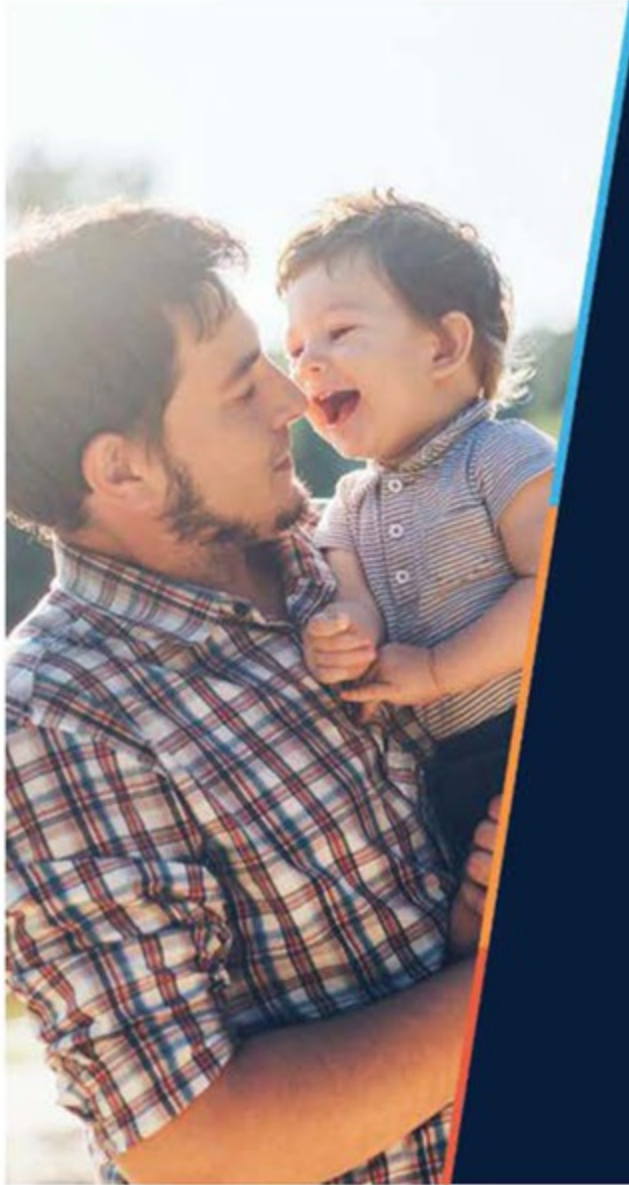
25  
34



The cohort of those with an OUD diagnosis is primarily **WHITE, MALE, and 25-34**



Those with an OUD diagnosis experience significant burden of DISEASE (COMORBIDITY) and SOCIAL DISADVANTAGE (HOMELESSNESS).



## **Dashboard: Opioid at High Dosage in Individuals Without Cancer**





# Use of Opioids at High Dosage in Persons Without Cancer

a Connecticut Medicaid member-level 12-month summary



Calendar Year  
2015



The measurement period for this report was from 1/1/2015 to 12/31/2015.



Total members with 2+ filled Opioid prescriptions

37,802

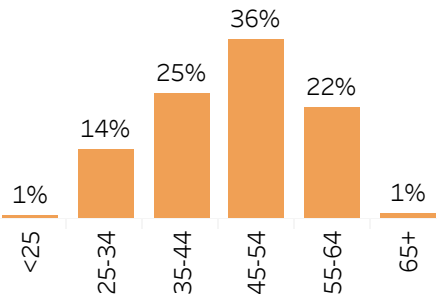
Total members in high-dosage cohort

2,912

Ranging in age from

20 - 73

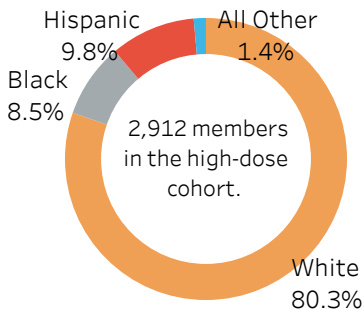
Age Distribution



50%  
were Females

50%  
were Males

Racial & Ethnic Groups



63.9%

of members had 180 or more consecutive medication days

75.7%

of members had an average MED dose between 120-319 mg



Members had an average of

1.5

prescribers per 90 days

The maximum average MED for a member was

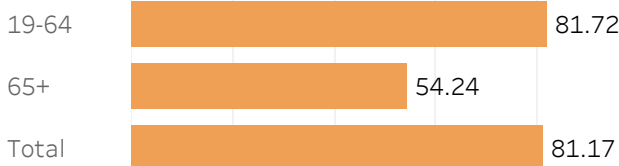
2,069 mg

**About this dashboard:** This dashboard is a member-level dashboard which includes eligible Medicaid members 19 and older, without a diagnosis of cancer in the previous two years, who received a daily dosage of opioids greater than 120 mg morphine equivalent dose (MED) for 90 consecutive days or longer. The CMS measure is the first graph below. All others are further details about the cohort that was prescribed a high-dose of opioids based on the necessary criteria (see measure definition page).

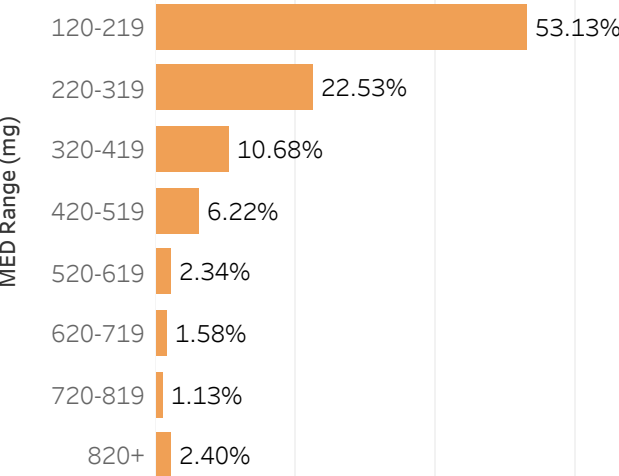
\*Aside from the graph directly below left, the denominator for ALL OTHER graphs is 2,912 (the high-dose cohort).\*

Use of Opioids at High Dosage  
members per 1,000

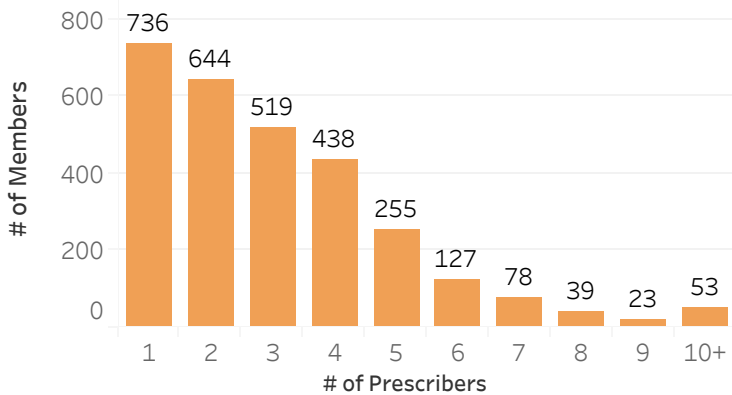
Age Group



Percent of Members by Average Morphine  
Equivalent Dose (MED) Range



Number of Prescribers  
seen per member



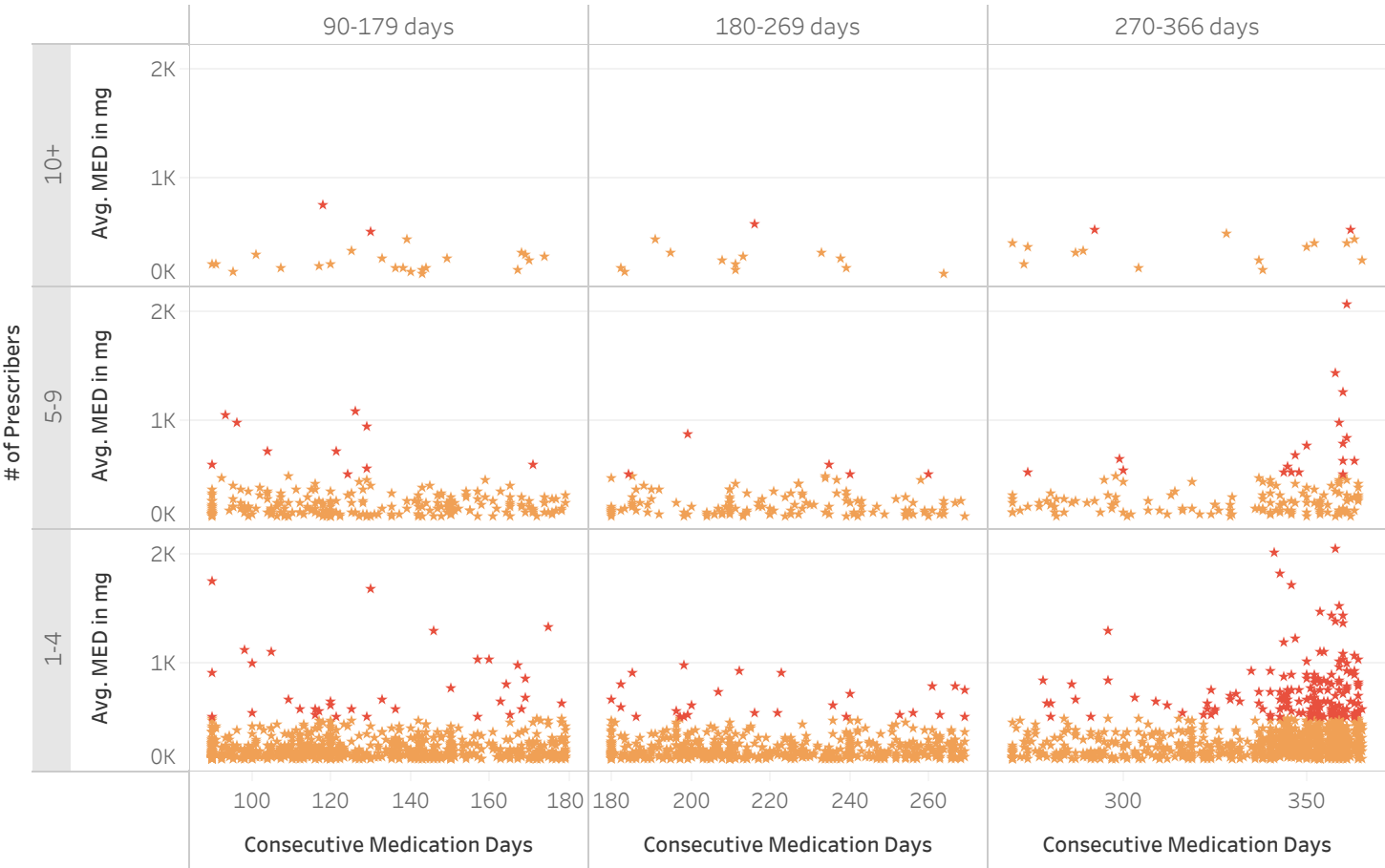
Number of Members on High-Dose Opioids  
by number of consecutive medication days

36.09% of members  
were on a high-dose  
of opioids for  
90-179 days.

24.35% of members  
were on a high-dose  
of opioids for  
180-269 days.

39.56% of members  
were on a high-dose  
of opioids for  
270-366 days.

Average MED Dose vs. Total Days on High-Dose Opioids (Medication Days)  
compared to number of prescribers per member // red indicates over 500mg MED



## Summary of Findings – 2015 & 2016



In 2016, 31,537 members filled two or more opioid prescriptions and 2,171 met the criteria for HDO use



Between 2015 and 2016, the total per thousand rate of HDO use declined 11% (from 81.2 to 72.3)

45  
54

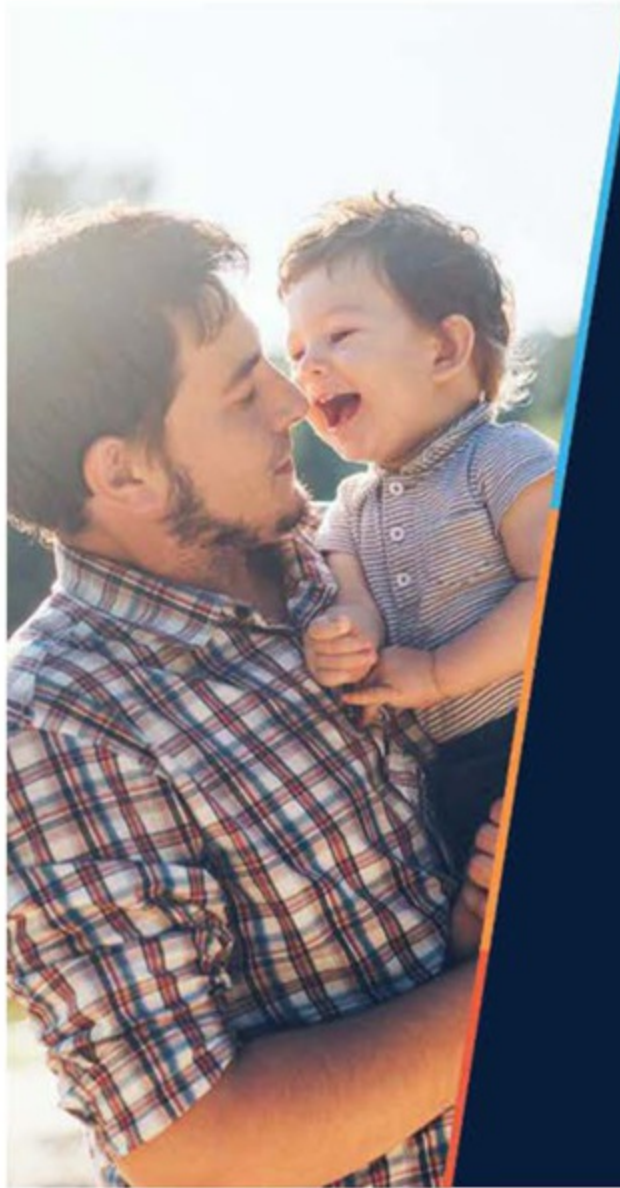
The modal age for HDO is 45-54 in both CY 2015 and 2016



The percent of members with HDO who had more than three prescribers decreased from 34.8% in CY 2015 to 22.8% in CY 2016



There was a 17% decrease in members who filled two or more opioid prescriptions from CY 2015 to CY 2016 (37,802 to 31,537)




**Dashboard: Population Profile  
– High Dosage Opioid Use and  
Opioid Use Disorder Diagnosis**


Opioid-Related Dx (Y/N)  
All

# Population Profile Demographic Data


for Adult Medicaid Members with High Dosage Opioid Use in CY 2015



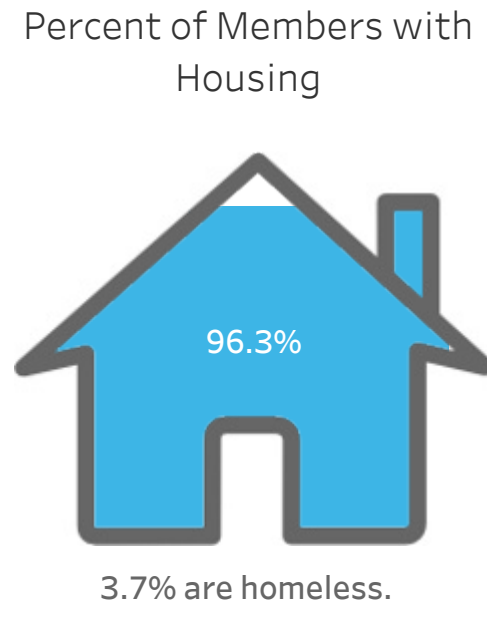
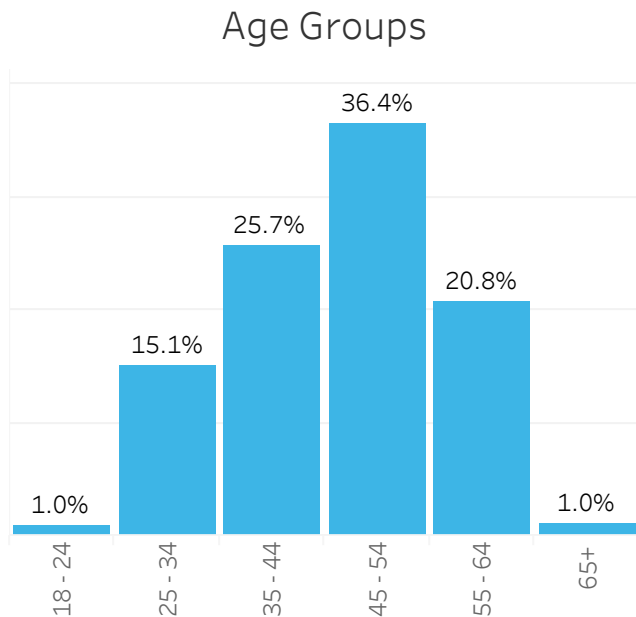
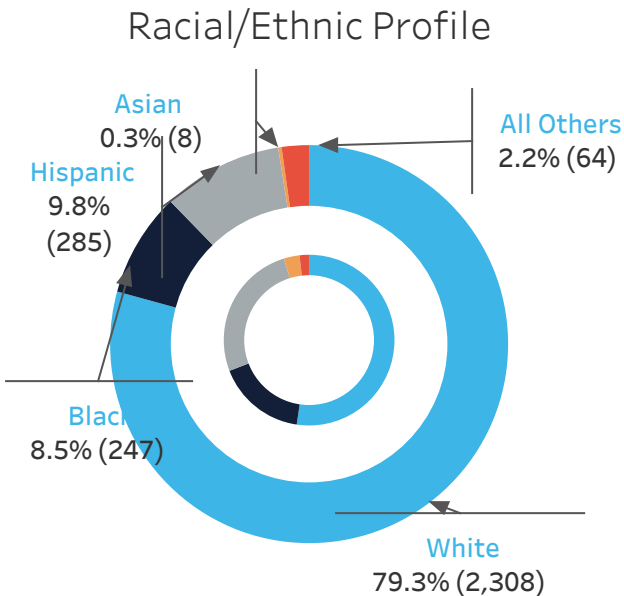
Total Medicaid Members in CY 2015: **2,912**



**50.0%** were Male



**50.0%** were Female



Diagnostic Prevalence Rates for Adult Medicaid Members with High Dosage Opioid Use in CY 2015

▼ Select Medical Diagnosis

Diabetes

Diabetes: **24.5%**

▼ Select Mental Health Diagnosis




Autism Spectrum Disorder

Autism Spectrum Disorder: **0.0%**

▼ Select Substance Use Diagnosis

Opioid

Opioid: **29.6%**



Co-occurring Disorders (MH & SA): **45.7%**

Comorbid Diagnoses (BH & Med): **66.3%**

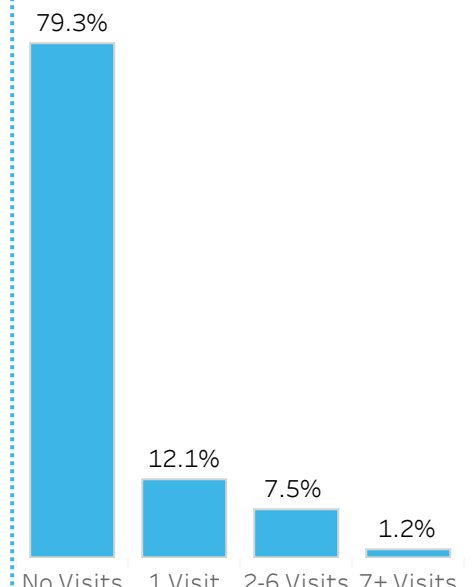
Total Avg. Dollars per Member: **\$29,097**

	Total Spend
Total Dental Cost	\$644,847
Total Pharmacy Cost	\$41,432,168
Total Med/BH Claims Cost	\$42,652,981
Total Member Cost	\$84,729,996

▼ Select ED/Inpatient Type

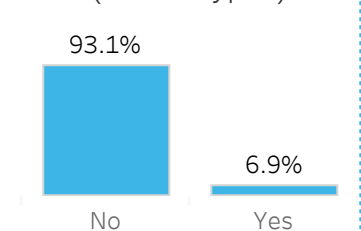
Behavioral Health

Behavioral Health ED Visit Frequency



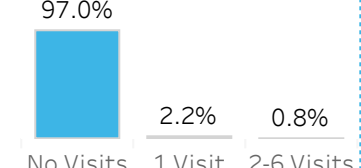
Frequency	Percentage
No Visits	79.3%
1 Visit	12.1%
2-6 Visits	7.5%
7+ Visits	1.2%

Behavioral Health Inpatient Utilization (All BH Types)



Utilization	Percentage
No	93.1%
Yes	6.9%

Behavioral Health Inpatient Psych Visit Frequency



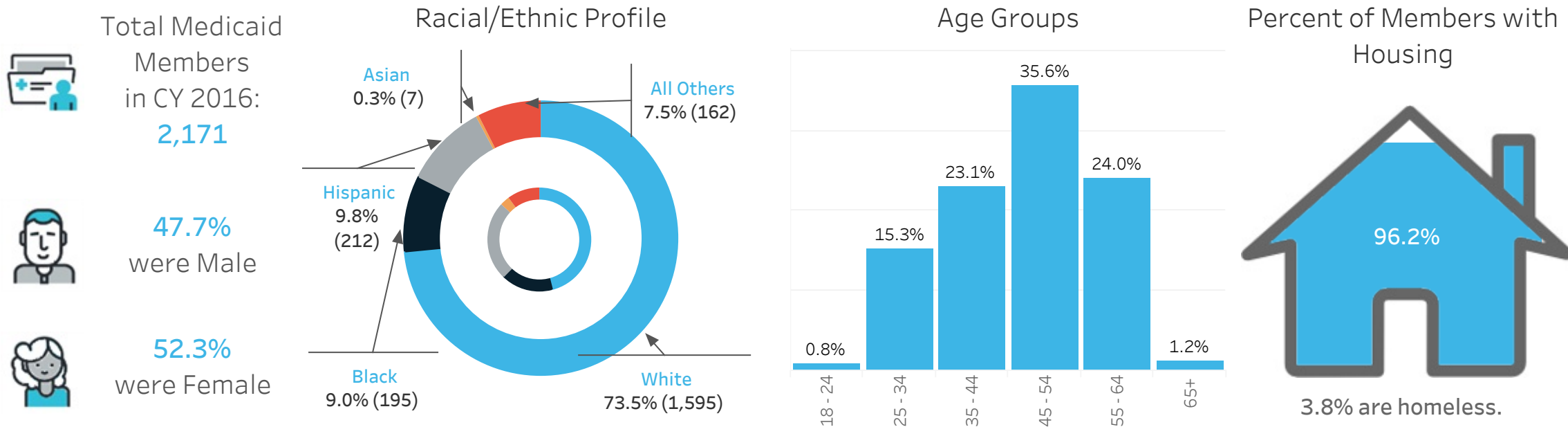
Frequency	Percentage
No Visits	97.0%
1 Visit	2.2%
2-6 Visits	0.8%



Opioid Related Dx (Y/N)  
All

# Population Profile Demographic Data

for Adult Medicaid Members with High Dosage Opioid Use in CY 2016



## Diagnostic Prevalence Rates for Members with High Dose Opioid Use in CY 2016

▼ Select Medical Diagnosis  
Diabetes

Diabetes: **20.1%**



▼ Select Mental Health Diagnosis  
Autism Spectrum Disorder

Autism Spectrum Disorder: **0.1%**



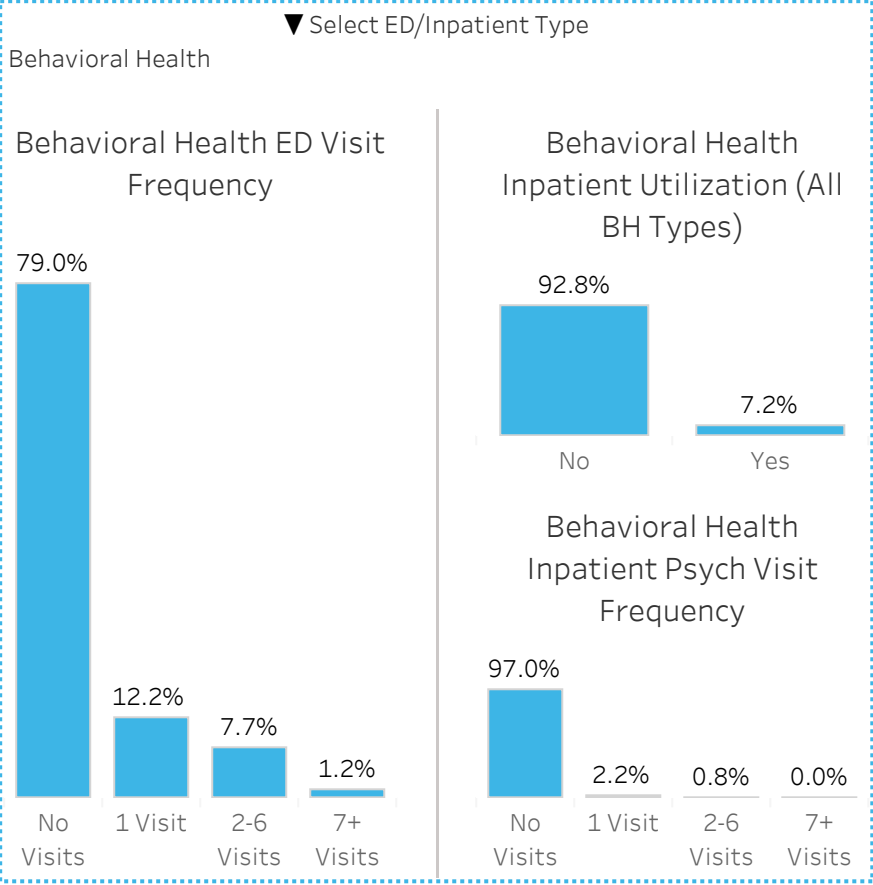
▼ Select Substance Use Diagnosis  
Opioid

Opioid: **31.1%**



Co-occurring Disorders (MH & SA):	Comorbid Diagnoses (BH & Med):
<b>42.5%</b>	<b>64.1%</b>

Total Avg. Dollars per Member: <b>\$29,394</b>	
Total Spend	
Total Dental Cost	\$471,911
Total Pharmacy Cost	\$30,150,627
Total Med/BH Claims Cost	\$33,191,683
Total Member Cost	\$63,814,222



## Summary of Findings – 2015 & 2016



In both years, around 30% of members meeting the HDO criteria had an OUD diagnosis (30% in CY 2015 and 31% in CY 2016)



In both years, the percentage of White members was about 10 points higher in the HDO group than the OUD group (80% vs. 71% in CY 2015 and 74% vs. 64% in CY 2016)



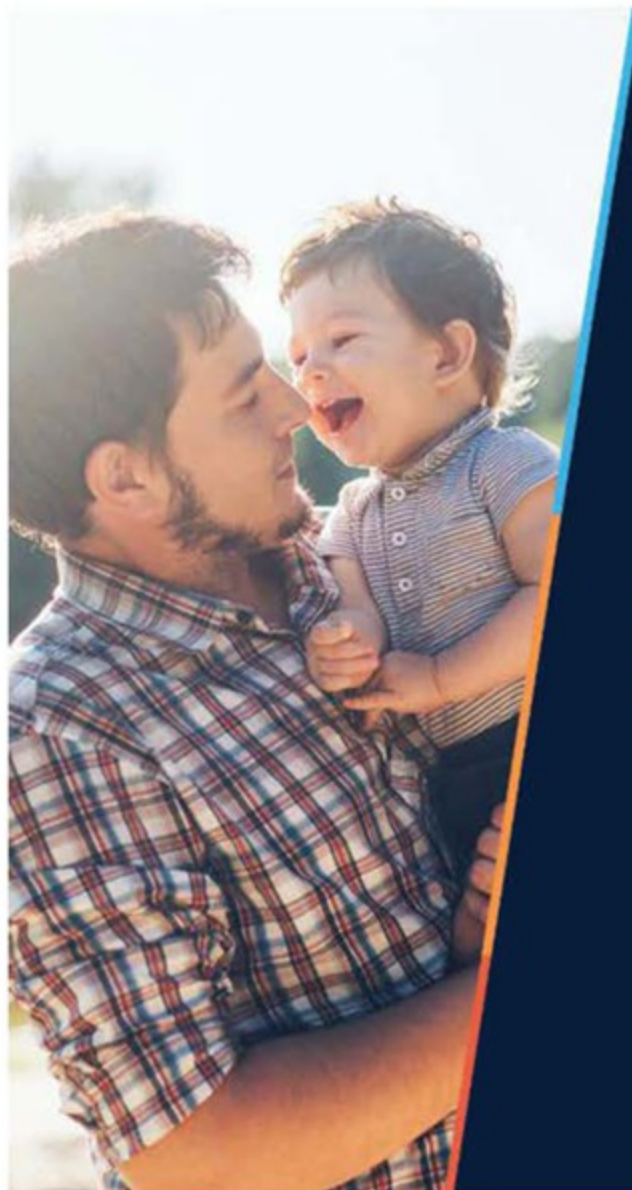
Individuals with an OUD have a 16% rate of homelessness which is significantly higher than those with both OUD and HDO use (6% for both years)

**MH**  
**SA**

Members with both OUD and HDO had high rates of co-occurring MH and SA (80.3% in CY 2015 and 77.5% in CY 2016). These were considerably higher than those with only HDO use (45.7% in CY 2015 and 42.5% in CY 2016)



Members with both an OUD diagnosis and HDO use have the highest average Medicaid cost (\$34,144 in 2015 and \$35,318 in 2016) which is almost double the average cost for members with an OUD diagnosis (\$17,500 in 2015 and \$18,167 in 2016)



## **Interventions: Current and Proposed**

## Interventions (Current & Proposed)

- Medication Assisted Treatment (MAT) Promotion
  - MAT Initiative
  - Project ECHO
- High Dosage Opioids Reduction
  - Prescriber Outreach





## Interventions (Current & Proposed)

### CURRENT INTERVENTIONS

- Medication Assisted Treatment (MAT) Promotion
  - Project ECHO
  - Buildout of BH Provider Network for MAT
  - Provision of Electronic Resources for MAT
  - High Cost High Need ICM/PEER
  - Follow-up after Hospitalization
- High Dosage Opioids
  - Production of Data Reports

### PROPOSED INTERVENTIONS

- Medication Assisted Treatment (MAT) Promotion
  - Collaboration with CHN on MAT MAP
- High Dosage Opioids
  - Collaboration with CHN on Prescriber outreach and data methodology
- ECHO Expansion
- Tracking MAT Utilization
- Promote Improvements in C2C from Detox to MAT
- Develop local Networks of MAT care

# Questions