

## OPIOID DOCTOR SHOPPING QUALITY MEASURE MAILING

### Mailed November 2014 – June 2015

#### BACKGROUND

In 2014, three draft measures were proposed by the Pharmacy Quality Alliance's (PQA) Medication Safe Use Workgroup to examine the quality of opioid use related to the dose of the medications over time, access to the medications and the combination of both of these criteria. In November 2014, MS-DUR undertook an educational initiative addressing the "doctor shopping" measure proposed by PQA.

**Multiple Providers and Multiple Pharmacies Measure:** The percentage of individuals without cancer receiving prescriptions for opioids from four (4) or more prescribers AND four (4) or more pharmacies.

Each month, beneficiaries without cancer were identified who had an opioid prescription filled in the prior month. Beneficiaries with opioid medication prescriptions from four (4) or more prescribers and four (4) or more pharmacies during the prior six months were considered to be "doctor shopping".

#### MAILING

Exception monitoring was run for the Opioid Doctor Shopping Quality Measure and the Chronic Medication Adherence Quality Measure each month. Providers were prioritized for mailings each month based on the number of beneficiaries with exceptions and the risk scores (chronic conditions and ED visits) each month. Providers were only contacted once every three months. The following number of providers received letters each month.

Month	# of Providers Contacted
Nov 2014	178
Dec 2014	153
Jan 2015	283
Feb 2015	218
Mar 2015	117
April 2015	125
May 2015	153
June 2015	100



## MISSISSIPPI MEDICAID OPIOID OVERUTILIZATION ASSESSMENT PROGRAM

&lt;Date&gt;

&lt;Prescriber's name&gt;

&lt;Prescriber's address&gt;

&lt;City&gt;, &lt;State&gt; &lt;Zipcode&gt;

Dear &lt;Prescriber's name&gt;:

The Mississippi Division of Medicaid Pharmacy Bureau has several quality initiatives related to **identifying and managing opioid abuse**. Mississippi Medicaid's Drug Utilization Review (DUR) Board, comprised of twelve physicians and pharmacists that serve Medicaid beneficiaries, recommended these issues be reviewed and the results be communicated with health care providers.

**THE GOAL**

This initiative seeks to identify beneficiaries without cancer that are receiving prescriptions for opioid medications from four (4) or more prescribers and four (4) or more pharmacies .. Since many prescribers are unaware of the different providers their patients frequent or their patients' actual refill patterns, the goal of this initiative is to prevent opioid abuse or misuse by letting providers know the different opioid prescriptions that their patients are receiving and the source of these medications.

OPIOID UTILIZATION FOR <Patient name> (MEMBER ID: <Medicaid ID>)			
Name of prescriber	Last drug prescribed	Date of prescription	Dose
<Prescriber 1>	<Drug 1>	<Fill date 1>	<Dose 1>
<Prescriber 2>	<Drug 2>	<Fill date 2>	<Dose 2>
<Prescriber 3>	<Drug 3>	<Fill date 3>	<Dose 3>
<Prescriber 4>	<Drug 4>	<Fill date 4>	<Dose 4>

**WHAT DOES THIS MEAN?**

This reflects your patient's opioid prescription filling pattern and indicates that this patient is receiving prescriptions for opioids from four or more prescribers and pharmacies. It is important to recognize that your patient's usage of the aforementioned opioid prescriptions may fall under the realm of appropriate use. However, it was suggested by the MS-DUR Board that providers of patients who followed this opioid prescription refill pattern be notified.

The medications listed above reflect your patient's opioid usage from <date 1> to <date 2> and may not be reflective of the most recent date an opioid prescription was filled. The reported measures only include medications billed to Mississippi Medicaid and will not include medications that are billed to other third parties, "cash" purchases, and samples. **This is not a complete medication list for your patient** – only the last filled opioid medication from each provider is being reported.

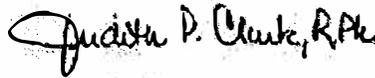
**WHAT IS REQUIRED OF YOU?**

This notice is simply for your information and no action is required on your part, but it might be useful to discuss the content of the letters with your patient during their next visit.

Sincerely,



Kyle D. Null, Pharm.D., Ph.D.  
Clinical Director  
MS-DUR



Judy Clark, R.Ph.  
Director, Pharmacy Bureau  
Division of Medicaid