



CHANGING  
*Maryland*  
*for the Better*

# Maryland Medicaid and Opioid Epidemic

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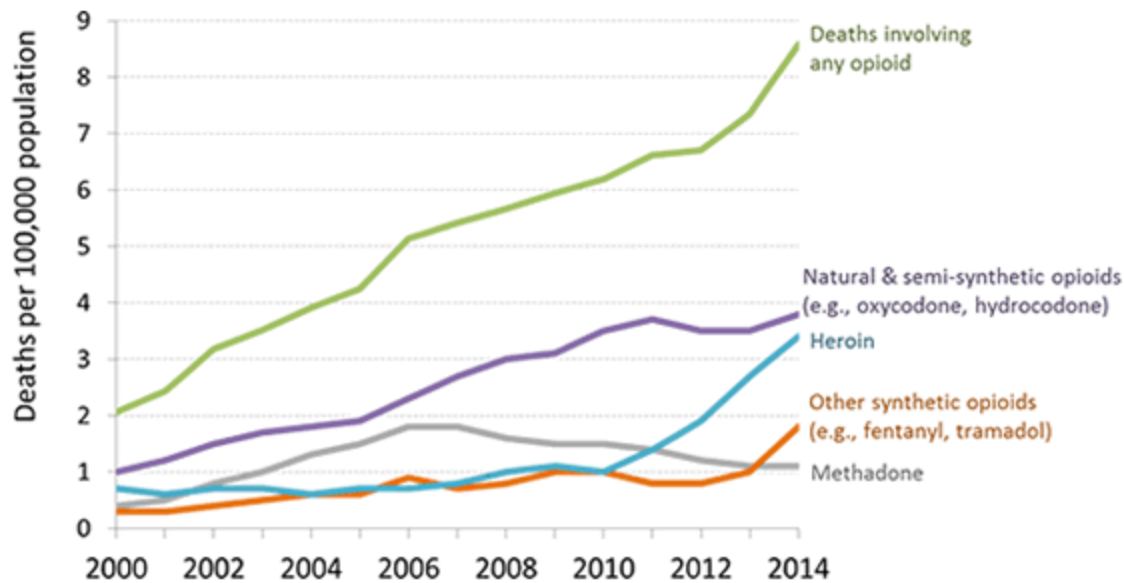
June 23, 2016



# National Opioid Addiction and Overdose Epidemic

## Opioid overdoses driving increase in drug overdoses overall

Drug overdose deaths involving opioids, by type of opioid, United States, 2000-2014

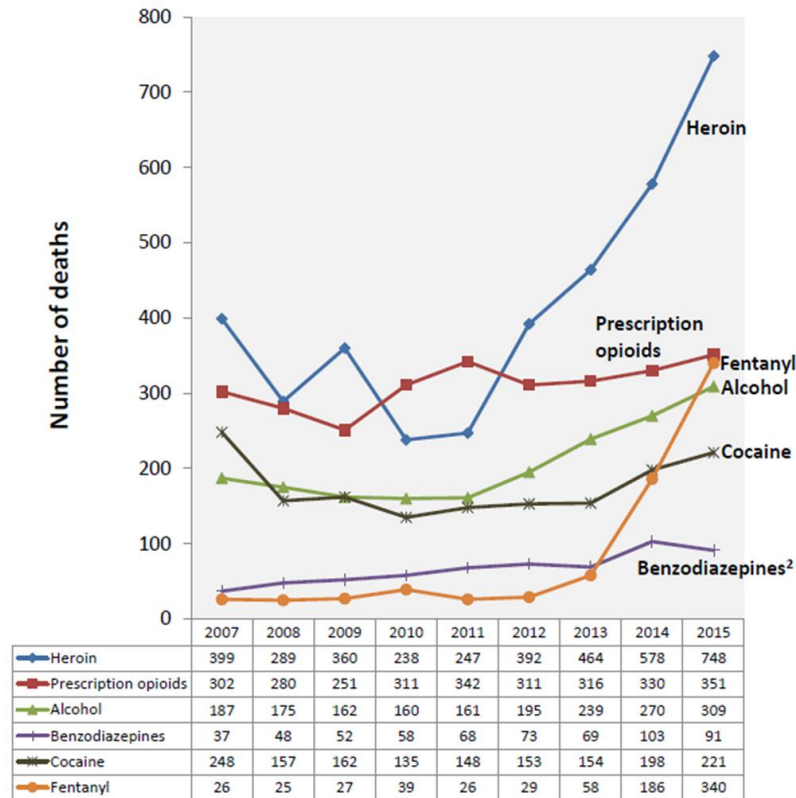


SOURCE:  
Centers for Disease Control and  
Prevention. Increases in Drug and  
Opioid Overdose Deaths –  
United States, 2000 to 2014.  
MMWR 2015.  
[www.cdc.gov/drugoverdose](http://www.cdc.gov/drugoverdose)



# Maryland Opioid Addiction and Overdose Epidemic

Figure 5. Total Number of Drug- and Alcohol-Related Intoxication Deaths by Selected Substances<sup>1</sup>, Maryland, 2007-2015.



<sup>1</sup>Since an intoxication death may involve more than one substance, counts of deaths related to specific substances do not sum to the total number of deaths.

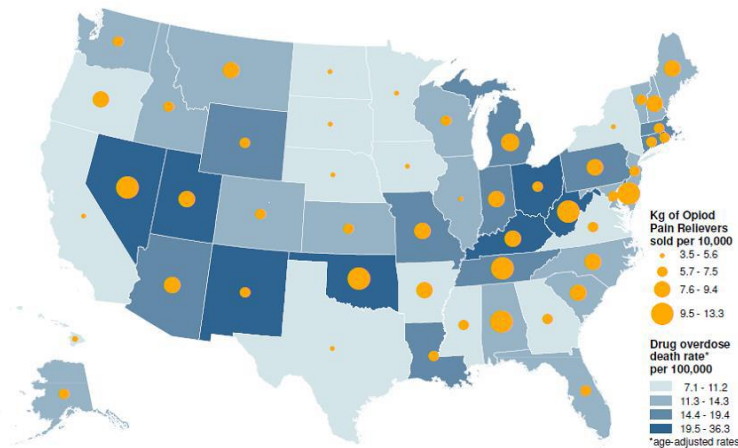
<sup>2</sup>Includes deaths caused by benzodiazepines and related drugs with similar sedative effects.



# Drivers of the Opioid Epidemic

- Prescription Drug Sales
- Changing Economics of Heroin
- Rise of Fentanyl

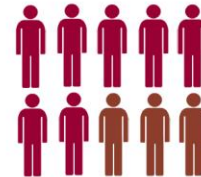
States with More Opioid Pain Reliever Sales Tend to Have More Drug Overdose Deaths



Prescription opioid misuse is a major risk factor for heroin use



**3 out of 4 people** who used heroin in the past year misused opioids first



**7 out of 10 people** who used heroin in the past year also misused opioids in the past year

Jones, C.M., Heroin use and heroin use risk behaviors among nonmedical users of prescription opioid pain relievers – United States, 2002–2004 and 2008–2010. *Drug Alcohol Depend.* (2013).

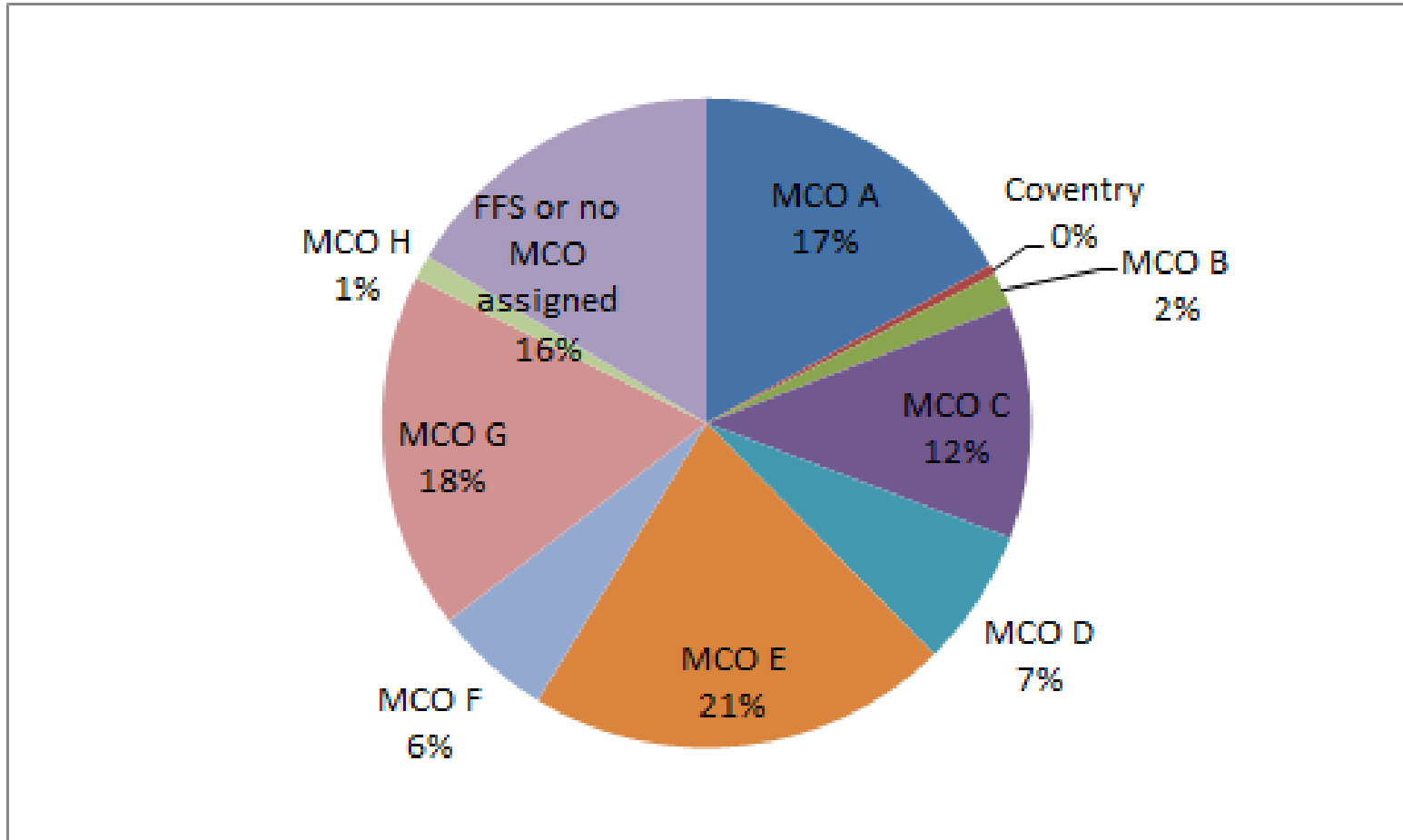


# Medicaid and Opioid Epidemic

- 816 (65%) of opioid overdose deaths in 2015 were enrolled in Medicaid at any point after January 1, 2011. Of that amount, 691 were enrolled in Medicaid at some point during CY 2015.
  - 67.5% of participants were male
  - The majority of participants were white (61.9%) or African American (29.2%).
  - Most participants lived in suburban Baltimore (35%), Baltimore City (33.1%), and Western Maryland (10.5%)



# CY15 Opioid Overdose Deaths of Medicaid Participants by Most Recent MCO

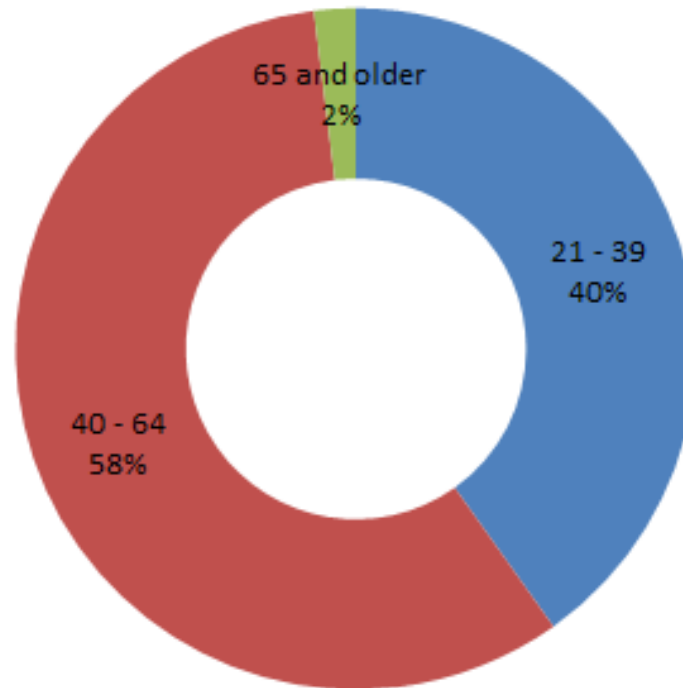


Includes those who were enrolled in Medicaid at any point after January 1, 2011. Participants were not necessarily enrolled in Medicaid at their time of death.

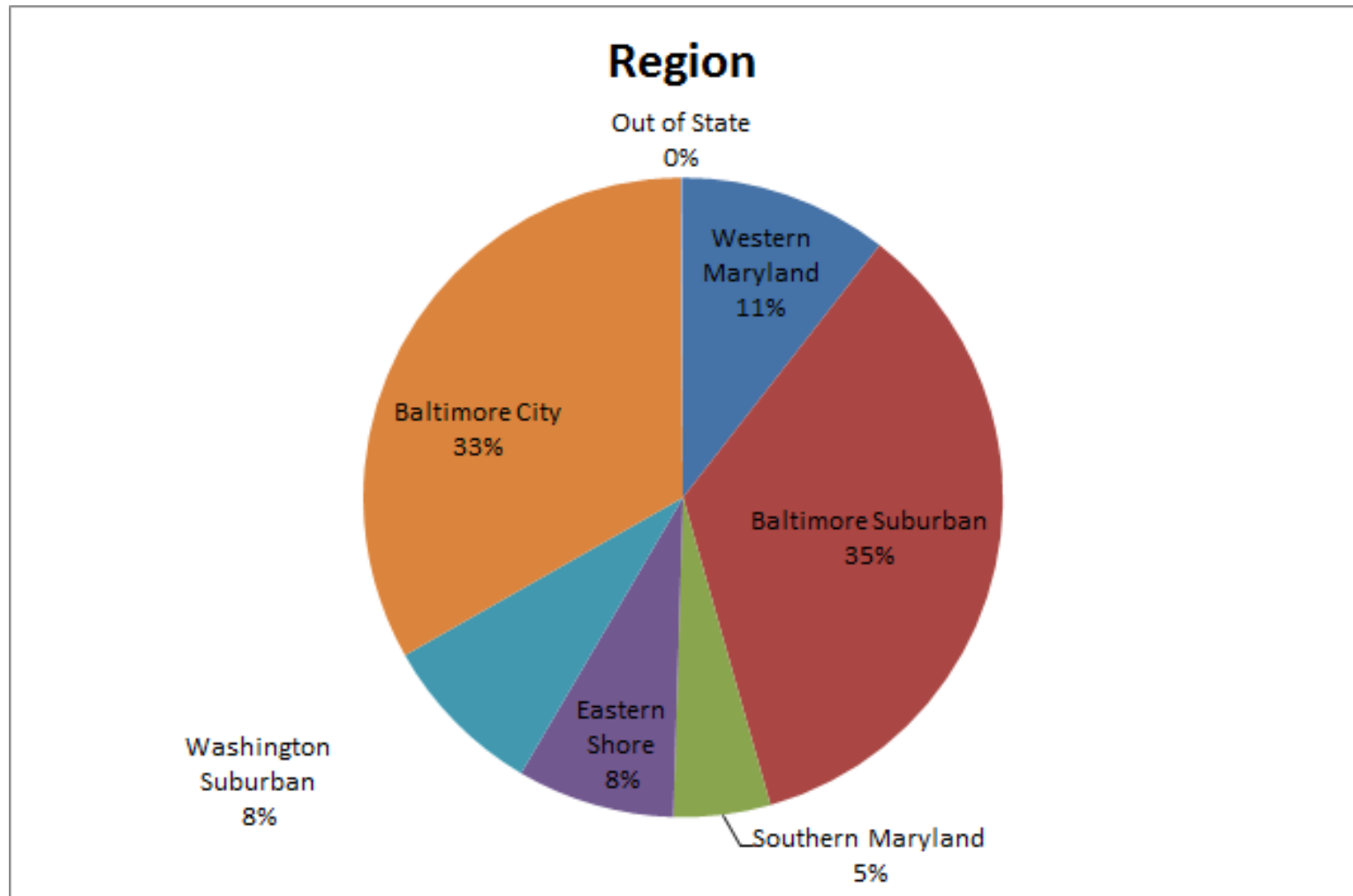


# Demographic Characteristics of Medicaid Participants with a Death Caused by Opioid Overdose

Medicaid Participants  
Age



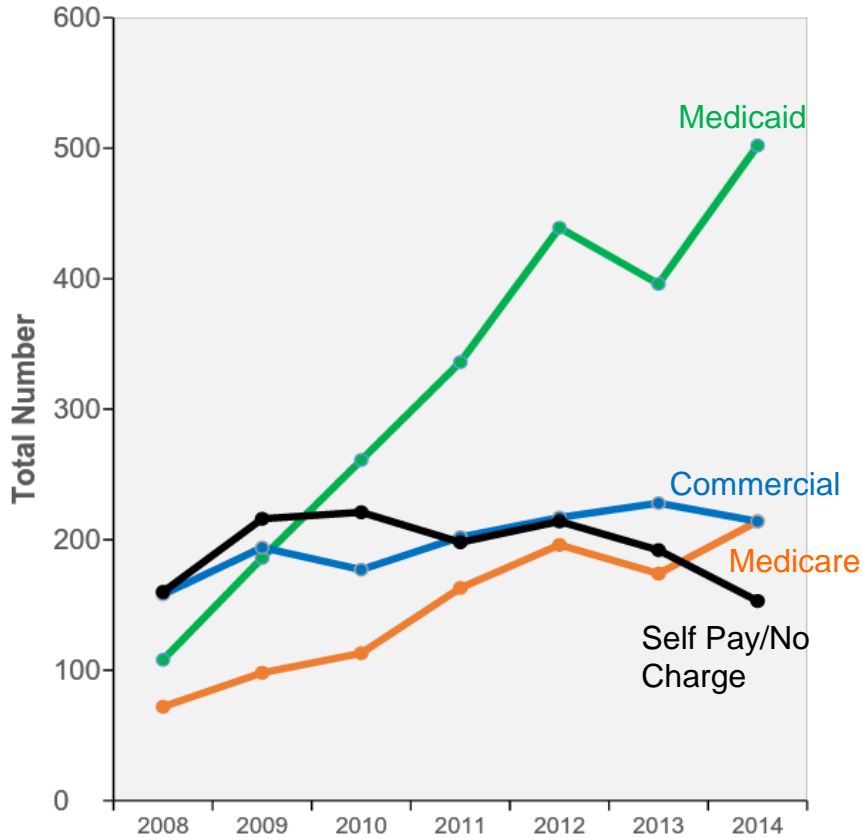
# Demographic Characteristics of Medicaid Participants with a Death Caused by Opioid Overdose



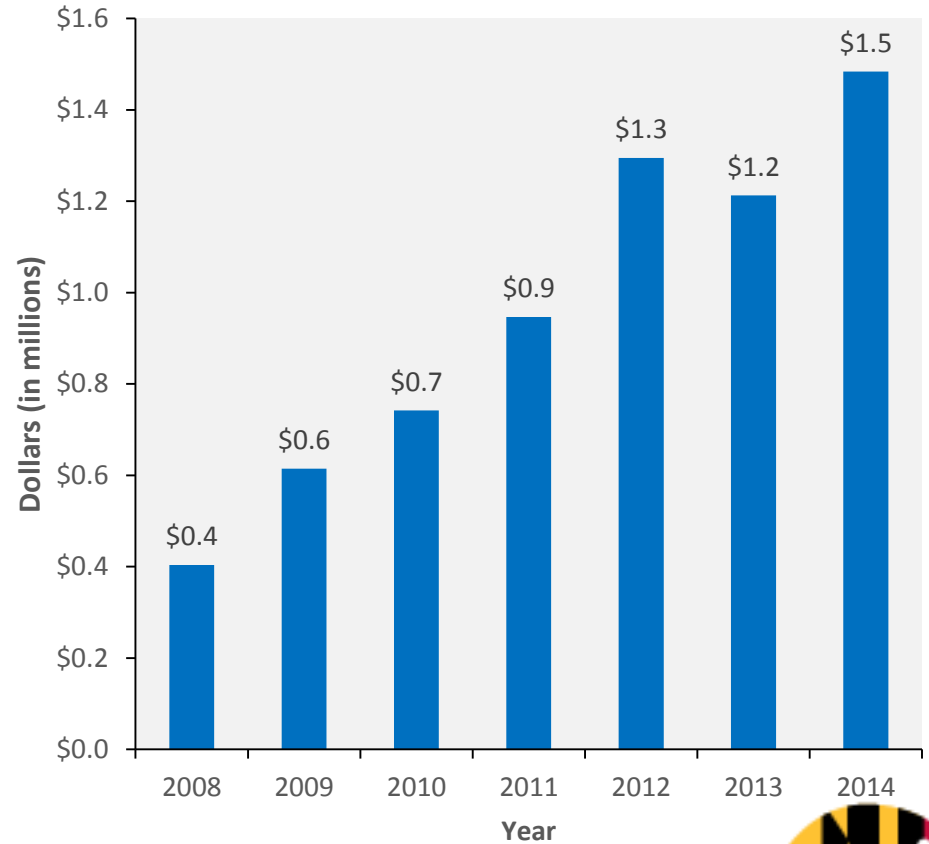


# Medicaid and Opioid Epidemic

**Prescription Opioid-Related Emergency Department Visits by Expected Payer: Maryland, 2008-2014**

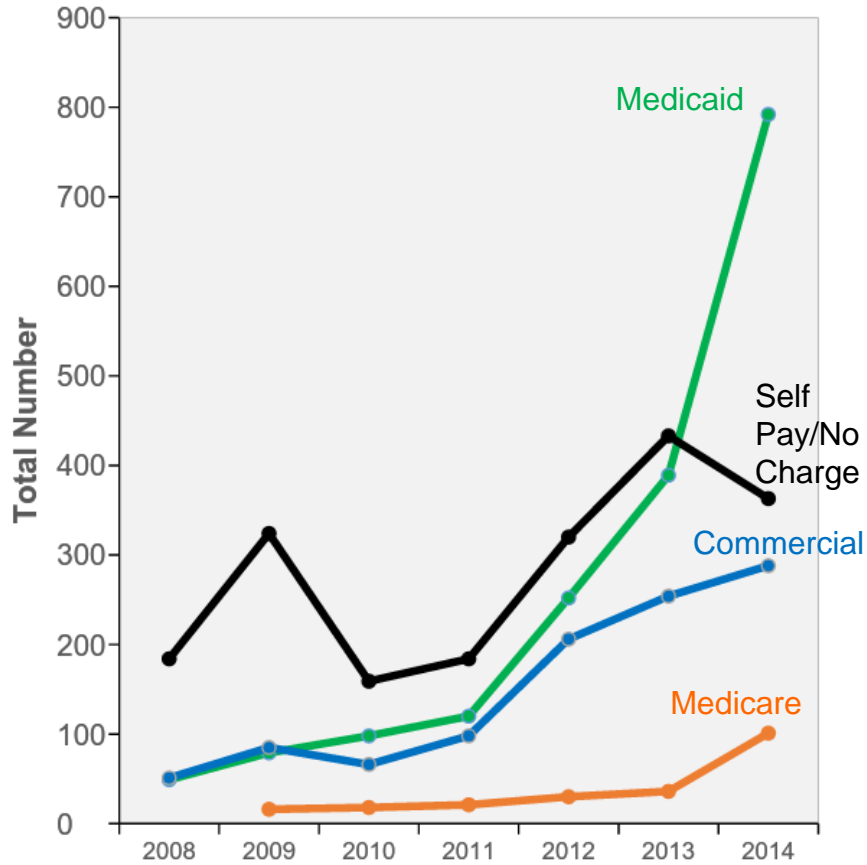


**Total Prescription Opioid-Related Emergency Department Visits Charges: Maryland, 2008-2014**

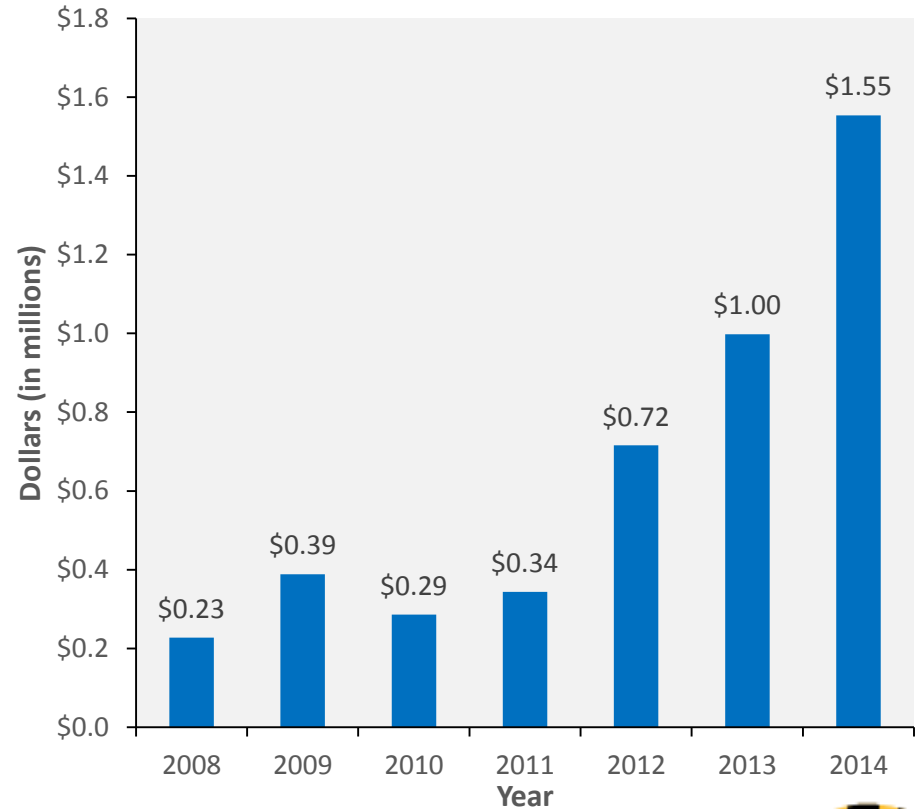


# Medicaid and Opioid Epidemic

Heroin-Related Emergency Department Visits by Expected Payer: Maryland, 2008-2014



Total Heroin-Related Emergency Department Visits Charges: Maryland, 2008-2014



# Response to Opioid Epidemic

- Given the complexities of the epidemic and its far reaching nature, addressing the opioid epidemic requires comprehensive action by multiple stakeholders, including:
  - Preventing medical and non-medical opioid misuse, abuse, and addiction from developing;
  - Identifying and treating opioid dependence early in the course of the disease;
  - Preventing overdose deaths, medical complications, psychosocial deterioration, transition to injection drug use, and injection-related infectious diseases through expansion of treatment and harm-reduction approaches, such as access to naloxone; and
  - Using data to monitor and evaluate activities.



# Key DHMH Activities

- Increased Surveillance
- Primary Prevention
  - OMPP
  - Communications
  - Clinical Education
- Early Identification
  - PDMP
  - Medicaid Corrective Managed Care
  - SBIRT
- Treatment and Recovery
- Community Interventions/Harm Reduction
  - Naloxone Expansion
  - Crisis Hotline
  - LOFRTs
  - OSOP



# Why Target the Managed Care Organizations (MCOs)?

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- Over 20% of Marylanders enrolled in Medicaid
- Statewide reach
- 6 of 8 MCOs are integrated provider and payer networks

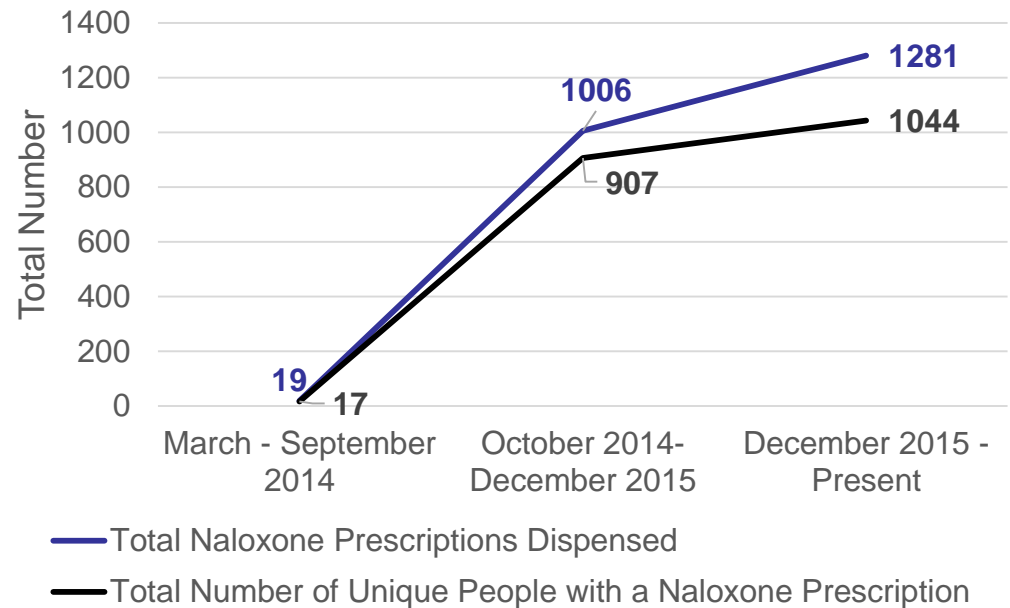


# Medicaid Overdose Activities

## Accomplishments:

- MCO Corrective Managed Care Program
- Medication Assisted Treatment (MAT) Access
- Screening, Brief Intervention, and Treatment (SBIRT) coverage
- Naloxone Expansion

Naloxone Prescription Trends In Maryland Medicaid



# Medicaid Overdose Activities

## Future Activities/Goals:

- Drug Utilization Review Activities: Early stage development of minimum standards for Drug Utilization Review activities
- Substance Use Disorder (SUD) waiver: Aims to allow Medicaid to pay for SUD treatment services in an Institute for Mental Disease; Medicaid is working with the Centers for Medicare & Medicaid Services and technical assistance providers with goal of amendment approved in July 2017.
- Rebundling: The Department has solicited stakeholder input to rebundle the weekly rate for methadone services to improve access to counseling services. A revised draft proposal was circulated at the end of April.
- Pharmacy and Therapeutics (P&T) Committee: Use P&T Committee as a forum for overdose education and drug access/contraction

