



aetna

Opportunities for Multisector/ Public- Private Collaboration in Addressing Substance Abuse

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Learning Objectives

1. Overview of social and economic impacts of substance abuse
2. Examine role of biologic vs social determinants of health in addressing treatment
3. Examine role of Public/ Private Partnerships in addressing substance abuse

What is the Scope of the Problem?

- According to SAMHSA data, 10.1% of people over the age of 12 used an illicit drug in the past month
- Treatment of issues arising from substance use is > \$600 billion a year
- Roughly one in seven Americans are expected to develop a substance use disorder at some point in their lives

HHS Data on Epidemic on Opioid Epidemic



The Opioid Epidemic in the U.S.

In 2015...



12.5 million

People misused prescription opioids¹



2.1 million

People misused prescription opioids for the first time¹



33,091

People died from overdosing on opioids²



2 million

People had prescription opioid use disorder¹



15,281

Deaths attributed to overdosing on commonly prescribed opioids^{2,3}



828,000

People used heroin¹



9,580

Deaths attributed to overdosing on synthetic opioids^{2,3}



135,000

People used heroin for the first time¹



12,989

Deaths attributed to overdosing on heroin^{2,4}



\$78.5 billion

In economic costs (2013 data)⁶

Sources: ¹2015 National Survey on Drug Use and Health (SAMHSA). ²MMWR, 2016; 65(50-51):1445-1452 (CDC). ³Prescription Overdose Data (CDC). ⁴Heroin Overdose Data (CDC). ⁵Synthetic Opioid Data (CDC). ⁶The Economic Burden of Prescription Opioid Overdose, Abuse, and Dependence in the United States, 2013. Florence CS, Zhou C, Luo F, Xu L. Med Care. 2016 Oct;54(10):901-6

Updated May 2017. For more information, visit: <http://www.hhs.gov/opioids/>

Every Day in the U.S.

- More than 650,000 opioid prescriptions dispensed
- 3,900 people initiate nonmedical use of prescription opioids
- 580 people initiate heroin use
- 115 people die from an opioid-related overdose

Cost in Dollars

- \$55 Billion in health and social costs related to prescription opioid abuse each year
- \$20 Billion in emergency department costs related to opioid abuse each year
- In 2015 substance abuse accounted for 7.5% of all health spending and almost 20% of mental health spending

So Why Aren't We Seeing Better Outcomes



Narrow Focus on Addressing Issue

Patient

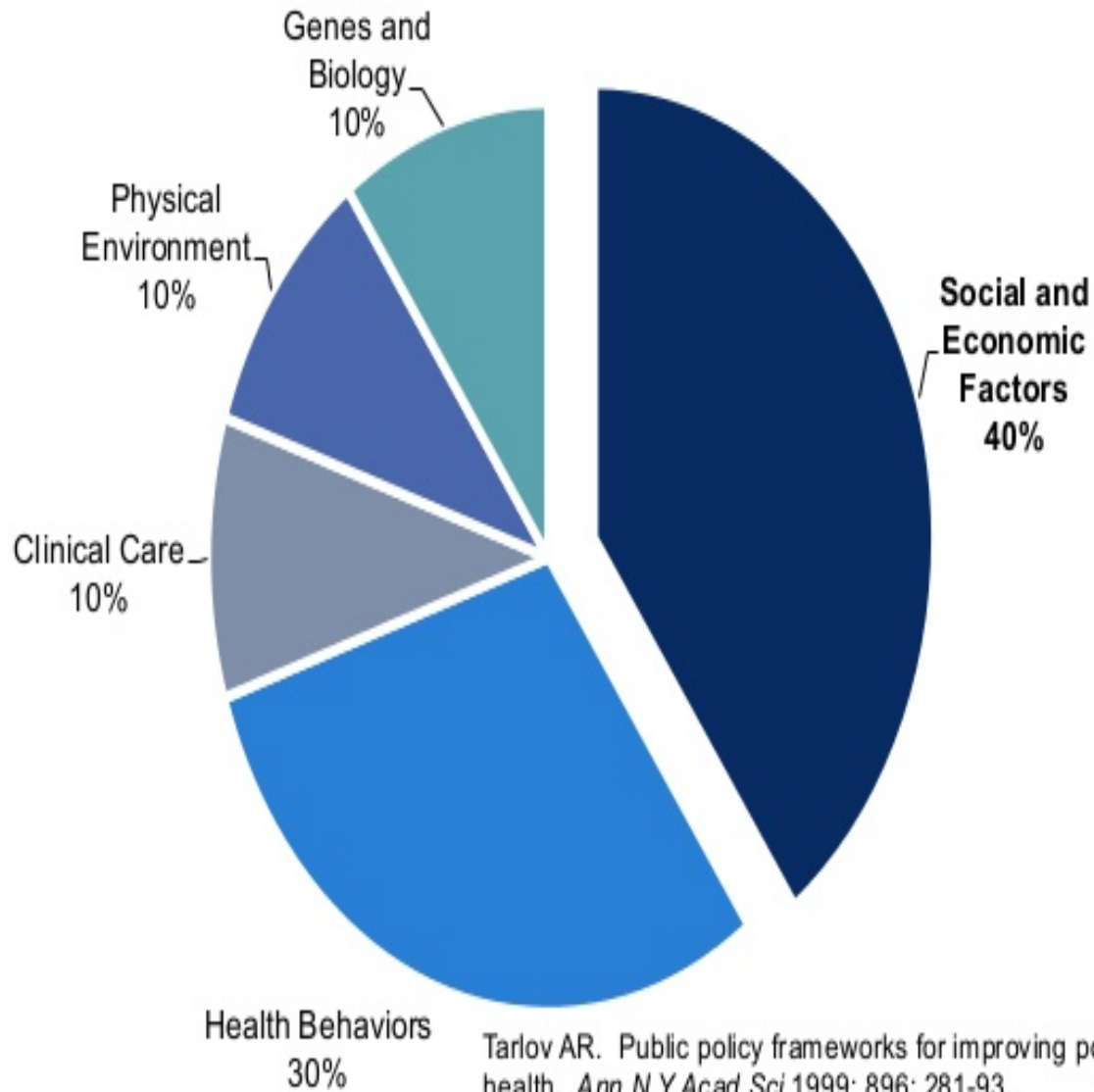
- Treatment of Acute Issue
- Focus on Biological Determinants of Issue

Healthcare
Provider

- Restrictions on Prescribing
- Prescription Drug Monitoring Systems

What Creates Health?

What are the Determinants of Health?



Tarlov AR. Public policy frameworks for improving population health. *Ann N Y Acad Sci* 1999; 896: 281-93.

Looking at the Big Picture



Social Determinants of Health



What are Social Determinants of Health

- Socioeconomic Status
- Education
- Neighborhood
- Employment
- Social Support Networks
- Access to Healthcare

Public Private Partnerships



What is a Public Private Partnership?

According to the National Council for Public-Private Partnerships, a PPP is a contractual arrangement between a public agency (federal, state or local) and a private sector entity. Through this agreement, the skills and assets of each sector are shared in delivering a service or facility for the use of the general public. In addition to the sharing of resources, each party shares in risks and rewards potential in the delivery of the service and/or facility.

The Cost of Treatment

- Since 2012 healthcare spending in the US has exceeded 17% of GDP, and is expected to be nearly 20% by 2020
- Substance abuse accounts for 7.5% of this spending, and 20% of overall mental health spending

Areas for Public Private Collaboration

- Development of more effective treatments
- Improving quality of current treatments
- Increased Access to Treatment
- Sharing of Data
- Education and Prevention
- Informing Health Policy Legislation

Areas for PPP in Substance Abuse Treatment

More Effective Treatments

- Non-opioid pain treatments
- Abuse deterrent med formulations

Improved Quality of Current Treatments

- Rating systems for treatment facilities
- Better Understanding Genetics and biomarkers effecting outcomes

Increased Access to Treatment

- Decrease individual economic burden of treatment
- Increase number of providers and address geographic access disparities

Areas for PPP in Substance Abuse Treatment

Sharing of Data

- Improved research outcomes
- Optimizing allocation of resources

Education and Prevention

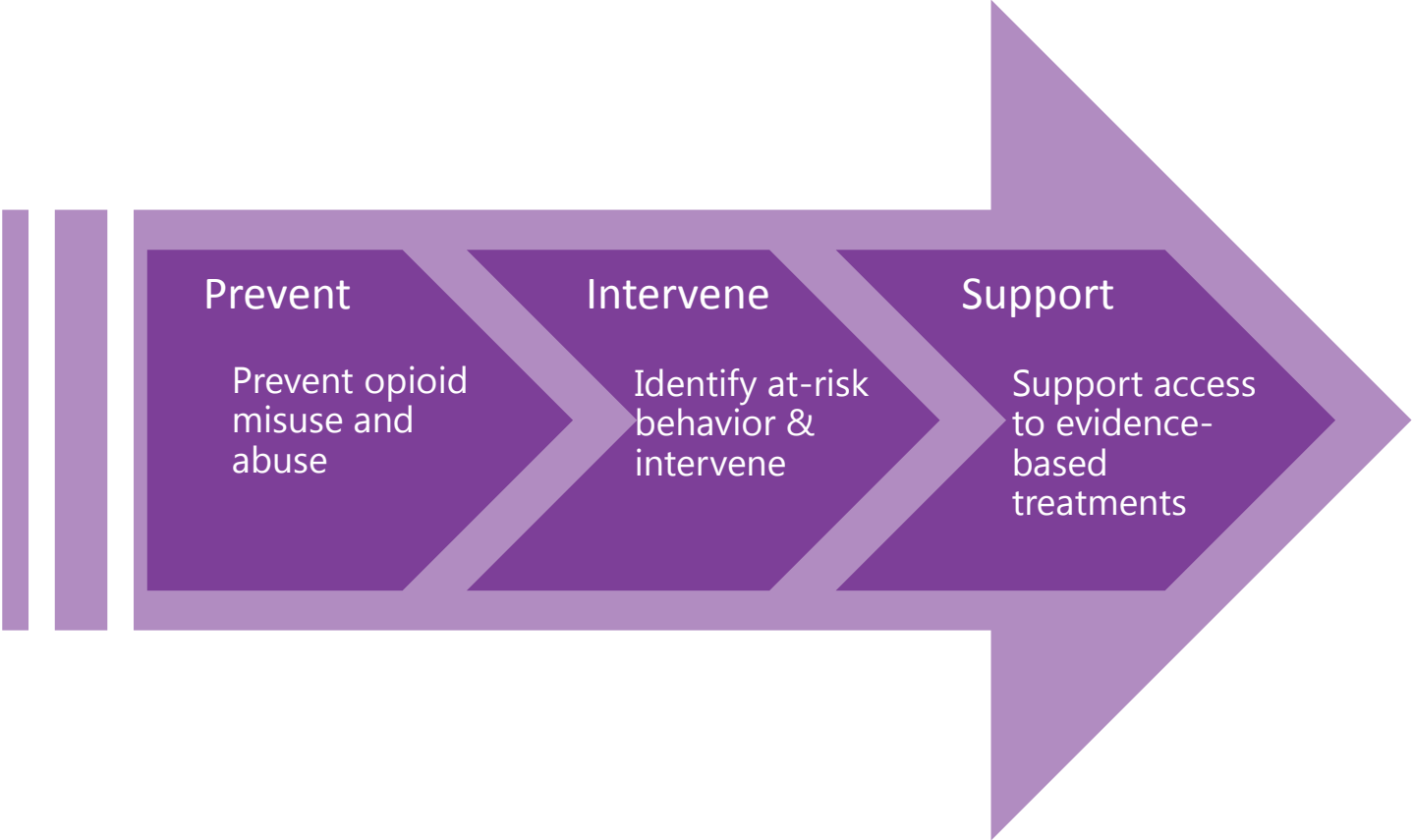
- Education and prevention strategies targeting public
- Education and prevention strategies targeting providers

Informing Health Policy

- Legislation regulating providers
- Evidence based public health initiatives

So What Are We
Doing at Aetna?

The Aetna opioid strategy



Ongoing initiatives

1

Prevent

Prevent opioid misuse and abuse

Some Aetna plans cover non-opioid pain treatments including: chiropractic care, acupuncture, biofeedback, physical therapy

Evolving “super-prescriber” interventions

Aetna Pharmacy has enacted quantity limits, day supply limits on initial prescriptions, and prior authorization on opioids

Aetna Behavioral Health clinicians perform substance abuse screening and intervention for members with an opioid diagnosis

Mindfulness training program “Living with Chronic Pain” will begin roll out in 2018

Monthly working session calls with Centers for Disease Control and Prevention for updates and discussions of initiatives

Ongoing initiatives

2

Intervene

Identify at-risk behavior and intervene

▶ Aetna Pharmacy's Controlled Substance Use programs identify and intervene with at-risk members

▶ Aetna Medicaid Neonatal Abstinence Syndrome program supports women whose babies are at-risk for opioid withdrawal in two states

▶ Aetna's Care Engine has several "Care Considerations" around risk of opioid overdoses based on high dose, concurrent sedative use, chronic use

▶ Aetna Foundation providing Grants totaling \$6 million which will fund state and local projects addressing opioid-related challenges; donations of Narcan in Maryland, Pennsylvania and Kentucky

▶ Narcan copay waiver for fully insured commercial members once their deductible has been met

▶ Aetna's "substance abuse in pregnancy awareness" letter campaign to all obstetricians and midwives in KY

Ongoing initiatives

3

Support

Support access to evidence-based treatments

Allow access to buprenorphine without any prior authorization requirements to reduce barriers to “medication assisted therapy” (MAT) on commercial formulary

Aetna Foundation awarded \$120k to Catholic Charities to expand their children's behavioral health-services to include an adolescent substance abuse recovery and treatment component

Aetna Behavioral Health has developed better addiction treatment protocols through increased partnerships

Aetna's five year goals

By 2022 Aetna is committed to the following:

- **Increase percent of members with chronic pain treated by an evidence-based multi-modal approach by 50%**
 - Chronic pain diagnosis include fibromyalgia, neuropathic pain, arthropathies, abdominal and back pain
 - Non-opioid modalities include PT/OT, chiropractic care, acupuncture, psychotherapy, biofeedback, local therapeutic injections

- **Reduce inappropriate opioid prescribing for our members by 50%**
 - Members receiving opioids with a known past opioid overdose
 - Members receiving concomitant benzodiazepines and opioids
 - Members receiving opioids with existing diagnosis of opioid use disorder
 - Members receiving opioid prescriptions greater than one week duration for an acute condition

- **Increase percent of members with Opioid Use Disorder treated with 'Medication Assisted Therapy' by 50%**
 - Members diagnosed with opioid use disorder receiving buprenorphine or naltrexone
 - Members diagnosed with opioid use disorder receiving cognitive behavioral therapy

