

2017

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Recommended Citation

Patashnick, Lloyd, "Opioid Prescribing: New Vermont Regulations for Providers" (2017). *Family Medicine Clerkship Student Projects*. 261.

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Opioid Prescribing:

New Vermont Regulations for Providers

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Family Medicine, June 2017

Deerfield Valley Health Center

Mentor: Peter Park M.D.

Problem Identification

- ▶ In 2015, 48% of dispensed controlled substances in VT were opioids. Although the total number of prescriptions have increased since 2010, the total number of recipients has decreased.²
- ▶ Prescriptions of opioids for MAT and to treat pain has increased since 2010, with analgesics covering 78% of opioid prescriptions.²
- ▶ In Windham County, 28% of county residents were prescribed opioids in 2015.²
- ▶ In 2015, of the 55 Vermont deaths involving prescription opioids, 4 were related to poisonings involving both benzodiazepine and a prescription opioid.³
- ▶ CDC considers individuals with analgesic opioid prescriptions of 90 Morphine Milligram Equivalents (MME) are at higher risk for dependence and abuse.⁴
- ▶ In 2015, 81% of opioid related fatalities had received a 90 MME prescription within 5 years, 36% filled a prescription for 90 MME within one year, 24% filled a prescription within 30 days and 20% filled a prescription within 10 days.⁴

Public Health Cost

- ▶ National opioid abuse health care costs are estimated to be \$25 billion annually.¹
- ▶ In 2014, Pro-rated health care costs for opioid abuse in Vermont were estimated to be \$38 million, due to Vermont representing 0.2% of the US population.¹
- ▶ 2014 per capita health care costs in the State of Vermont were estimated to be \$61.¹

Community Perspectives

- ▶ Chris McConnell, a Deerfield Valley community member, felt the new regulations were needed to combat opioid prescription abuse. He has witnessed others abusing these medications. Mr. McConnell was especially happy about the requirement to prescribe naloxone to treat opioid intoxication.
- ▶ A Deerfield Valley provider acknowledged the need for tighter control over opioid prescriptions and the current crisis within Windham county. She was unsure if new regulations would significantly add to the judiciousness, which health center providers follow, in managing and prescribing opioids.

Intervention and Methodology

- ▶ New prescriber regulations will add considerable paperwork for providers and their medical staff. As such, everyone within the Deerfield Valley health Center should be comfortable with the new regulations before the effective date of July 1, 2017
- ▶ A power point presentation on new prescriber regulations was made for the Deerfield Valley Health Center.
- ▶ This presentation included background to the current opioid crisis as well as information on how to calculate morphine equivalents.
- ▶ This presentation is part of a series of information sessions designed to ensure compliance to the new regulations.

Results / Response

- ▶ Thirty minute Power Point presentation given to entire Deerfield staff on June 6, 2017.
- ▶ Health center staff were supportive of the presentation. They felt an earlier presentation from the Vermont Department of Health did not effectively present the new law into easy to understand segments.
- ▶ Health Center director reported that the presentation helped in resolving support staff fears about additional clerical work required under the new regulations.
- ▶ Health center opioid prescribers thought the presentation could have been more technical in regards to the specific Morphine Milligram Equivalent (MME) limits on prescribing.

Evaluation of Effectiveness and Limitations

- ▶ A single presentation cannot adequately answer all staff questions pertaining to new regulations. The various health center professionals require different presentations about specific aspects of the new regulations.
- ▶ Include post presentation evaluation sheet to gauge effectiveness from the audience.
- ▶ After the new regulations are implemented on July 1, 2017, schedule a meeting to discuss the implementation of new procedures and determine if additional questions or concerns remain.

Recommendations for Future Projects

- ▶ Reconfigure current opioid prescription informed consent sheet to meet specific needs to the Deerfield valley population as well as including mandatory information from the State of Vermont.
- ▶ Reconfigure current opioid prescription patient information sheet to reflect specific needs of the Deerfield Valley population.
- ▶ Help to shape future health center operating procedures to incorporate a stepwise process in education staff when new state regulations are enacted.

References

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