



SPPAN'S 2017 POLICY PRIORITIES

Connecting policy leaders to take action that improves pain care

HIGH POLICY PRIORITIES/ACTIVELY LEADING:

- Ensure access to, and adequate insurance coverage for, integrative pain care
- Advocate for increased pain education for clinicians
- Influence the development of state pain management policies and monitor unintended consequences of restrictions on pain medications
- Advocate for federal initiatives that support balanced pain management (e.g., National Pain Strategy, Comprehensive Addiction and Recovery Act)

MEDIUM POLICY PRIORITIES/ACTIVELY SUPPORTING:

- Improve the effectiveness of prescription monitoring programs as healthcare delivery tools
- Improve insurance/pharmacy benefit management, including prior authorization, step therapy, specialty tiers, medication synchronization, and transparency
- Advocate for access to abuse deterrent formulations, naloxone, and substance use disorder prevention and treatment

MONITORING:

- SPPAN is tracking and monitoring a half dozen other pain topics at sppan.aapainmanage.org.

HIGH-PRIORITY POLICIES (SPPAN will lead or provide primary support for others' efforts)

ACCESS TO INTEGRATIVE PAIN CARE: Treating pain is difficult, and finding the optimal mode of treatment is similarly challenging. Integrative, multidisciplinary pain management has always been the gold standard for treating pain. This model requires consideration of both evidence-based pharmacological and non-pharmacological options, with a treatment plan arising from a thorough biopsychosocial assessment and sustained by ongoing communication between the provider and patient. However, our health care practice and reimbursement policies do not support this kind of care. Addressing this priority is certainly not simple, and there are many short- and long-term policy goals that could be considered. In order to remain focused on measurable outcomes, SPPAN will be actively collaborating with other organizations to address this enormous patient care challenge.

<u>Policy Activity</u>	<u>Opportunities for Action</u>
<p>Gather Relevant Details: Target Advocacy Efforts A major barrier to access is inconsistent reimbursement practices for effective therapies. The reimbursement stories need to be collected and focused so that policymakers understand how pain care is currently being delivered and what specific reimbursement barriers need to be fixed.</p>	<ul style="list-style-type: none"> -Providers and people with pain: need your testimony illustrating specific challenges when providing / receiving integrative pain care -Email SPPAN Director with details explaining challenges with reimbursement for any integrative pain therapies. -Support efforts by reaching out to business leaders, State Insurance Commissioners and policymakers. -Visit <i>Know Your Health Insurance Rights</i> at www.CoverageRights.org
<p>Cost/Benefit Data Capture -Support demonstration projects that illustrate effective use of integrative care, establishing evidence of efficacy and cost-effectiveness. -Showcase a list of results from active, multi-modal, integrative pain management programs.</p>	<ul style="list-style-type: none"> -Read SPPAN's summary of examples of state action in this area (coming soon) -Read IHPC's "Integrative Health and Medicine: Today's Answer to Affordable Healthcare."
<p>Federal Policy Initiatives -Support implementation of CARA, NPS, through coordination with SPPAN partners - Support development: Pain Treatment Parity Act.</p>	<ul style="list-style-type: none"> -Stay up to date on efforts here -Webinars coming soon - Alert SPPAN to your outreach to legislators. -Work with CPATF members to coordinate strategy for Hill outreach.
<p>Shaping State Policy SPPAN will -lead development of model legislation to promote integrative pain care -track results in states with demonstrations, see link (from above demonstrations) -SPPAN will track and analyze all bills and regulations related to integrative pain care, and distribute regular updates to our stakeholders to take easy action.</p>	<ul style="list-style-type: none"> -Support Minnesota companion bills HF 886/SF 749 introduced by MN Fair Care in 2017 to support patient choice, access, and equitable insurance reimbursement. Read MN Fair Care white paper with more details. -If you are a patient or provider in MN, please submit your details re: reimbursement discrimination at this link, -Request SPPAN's integrative pain care legislative update to stay apprised of hot legislation and opportunities for action. - Visit SPPAN's website to identify opportunities to address related issues in your state.
<p>Increase momentum collectively -SPPAN is facilitating a new workgroup to define integrative pain care and coordinate policy priorities among many groups.</p>	<ul style="list-style-type: none"> Ask us how to get involved with SPPAN or one of our many partners so that you may help us advocate for integrative pain care.

PAIN EDUCATION FOR CLINICIANS: Improved and appropriately-balanced pain education for health care professionals continues to rank as a top concern for SPPAN’s stakeholders. There are many important initiatives in the country to address this, both at the state level and federally, including the National Pain Strategy. In 2017, we will work with partners to advocate for appropriate continuing education and engage networks of advocates as collectively as possible.

<u>Policy Activity</u>	<u>Opportunities for Action</u>
<p>Advocate for integrative pain management curriculum Increase awareness of the importance of a balanced and integrative approach to pain management education, emphasizing the need to teach not just appropriate prescribing, but also how to utilize non-pharmacological pain treatments.</p>	<p>-Advocate for a balanced approach to pain care (more than prescribing education) to be included in all proposed and existing policies -Analyze the presence or absence of integrative pain care language included in existing regulations for boards of licensing</p>
<p>Share positive findings from New Mexico Consider the public health findings related to mandatory education for pain and reducing overdose in New Mexico and consider the implications for other states. (August 2014, Vol 104, No. 8, American Journal of Public Health)</p>	<p>-Read the article here.</p>

INFLUENCING THE DEVELOPMENT OF STATE PAIN MANAGEMENT GUIDELINES AND MONITORING UNINTENDED CONSEQUENCES OF RESTRICTIONS ON PAIN MEDICATIONS:

In 2016, we saw a great deal of policy action—on the state and federal level—working to make significant changes to guidelines for managing pain. Policymakers have been scrambling to address challenges related to opioid misuse, abuse, and diversion as well as chronic pain. In just the past year, we have seen the release of a seminal report outlining a national strategy for addressing pain (NPS), landmark legislation to comprehensively address the opioid epidemic (CARA), first-time recommendations on prescribing opioids for chronic pain from a US government public health agency (CDC guidelines), and an unprecedented step from the US Surgeon General writing to every physician, urging them to take steps to reduce the use of opioids when treating pain. As part of an integrative approach to pain management, many people living with pain require controlled substances to maintain optimal functioning. While we fully recognize the risks and limitations of opioid analgesic therapy for some chronic pain conditions, we are also mindful of the harmful impact on too many people with high-impact pain who are needlessly suffering because they are unable to access FDA-approved medications (particularly opioid analgesics) and other treatments that are prescribed by their providers and covered by their health insurance policies. While many policy proposals have the good intention of reducing the misuse, abuse, addiction to, and diversion of controlled substances, these policies often have harmful unintended consequences for people with pain. SPPAN will work diligently to modify policy proposals to prevent these poor outcomes, as well as advocate for passage of policy proposals that would significantly improve pain care.

<u>Policy Activity</u>	<u>Opportunities for Action</u>
<p>Monitor and influence proposed state and federal policies:</p> <ul style="list-style-type: none"> -SPPAN will continue to track, analyze, summarize, provide testimony, and submit comments on relevant bills and regulations. - At every opportunity, SPPAN will participate in efforts to guide controlled substance prescribing, ensuring provisions are positive for patients, providers and the public. 	<ul style="list-style-type: none"> - Advocates can utilize SPPAN’s website to check for, and act upon, legislation and regulations with implications for people with pain in their state. -Watch policies closely in your state. There are efforts underway to codify the CDC Guidelines (a concern since these were written as recommendation and with low evidence). Ensure that there is balance so prescribers, when appropriate, can exercise their clinical judgment. -Look for opportunities to recommend that local pain care experts be included in state task forces, opioid abuse committees, etc.
<p>Continue facilitation of <i>ad hoc</i> workgroup, <i>Influencing the Development of State Pain Management Guidelines</i>:</p> <p>SPPAN is facilitating a workgroup of organizational experts to develop relevant, educational resources.</p>	<ul style="list-style-type: none"> - Read and share SPPAN's first resource in a series, Opioid Dosage & Morphine Equivalency: Implications for Meeting the Standard of Care when Comparing CDC Recommendations to State Policies. -State Policies Regulating the Practice of Pain Management was published in <i>Anesthesiology Clinics</i> in 2016, written by Bob Twillman, Katie Duensing, and Aaron Gilson.

MEDIUM-PRIORITY POLICIES (SPPAN will support others’ efforts)

IMPROVE EFFECTIVENESS OF PRESCRIPTION MONITORING PROGRAMS AS HEALTHCARE DELIVERY TOOLS:

Prescription monitoring programs (PMPs) are important tools for delivering effective healthcare. During 2016, SPPAN tracked more than 160 bills related to PMPs, many of which sought to upgrade PMPs and increase their use. SPPAN has been collaborating with other organizations for more than 4 years to focus more collectively on advocating for improved PMPs. Some of these organizations include National Alliance for Model State Drug Laws, National Association of State Controlled Substances Authorities, Academy of Integrative Pain Management, American Medical Association, American Academy of Family Practitioners, National Association of Boards of Pharmacy, Center for Lawful Access and Abuse Deterrence, US Pain Foundation, Pain & Policy Studies Group, Federation of State Medical Boards, and American Society for Pain Management Nursing. In 2017, we will continue to monitor proposals closely to ensure that new policies do not erect unintended barriers to healthcare delivery or inadvertently put patients’ privacy rights in jeopardy, and we will promote policies designed to increase PMP registration and usage by prescribers and dispensers. SPPAN also will collaborate with key organizations in designing proactive policy proposals and educational efforts that will promote the ability of healthcare providers to effectively use this important healthcare delivery tool.

<u>Policy Activity</u>	<u>Opportunities for Action</u>
Promote positive PMP-related education	At a minimum, SPPAN will identify educational programs that exist or are being written, and disseminate information to partners so they can publicize them to clinicians and patient advocates.
Advocate for positive PMP legislation to pass in MO (the only state without a PMP statute). We are part of the Missouri PDMP Now Coalition, focused on passage of PMP legislation.	<ul style="list-style-type: none"> - Join the Missouri PDMP Now Coalition as a national organization or through a Missouri state chapter, and encourage other organizations to join this coalition. -For organizations with state chapters, coordinate with the coalition on Lobby Day activities and other advocacy opportunities.
Track, analyze, and respond to PMP-related legislation. Continue to work with our partners to ensure that new policies do not erect unintended barriers to healthcare delivery.	<ul style="list-style-type: none"> - Visit SPPAN’s website to identify opportunities to address PMP issues in your state. -Familiarize yourself with PMP legislation in your state (click “State Profiles”).

IMPROVE INSURANCE / PHARMACY BENEFIT MANAGEMENT: We tracked nearly 200 bills in this priority area during 2016 in the areas of step therapy, specialty tiers, transparency, prior authorization and medication synchronization and management. We believe that addressing this issue will positively impact patients and providers, and it seems that the legislatures are beginning to agree given the 45 bills passed nationwide in the past year. Within this area, SPPAN is working alongside, and in support of, many of our stakeholders who aim to make our healthcare system more transparent and to reform pharmacy benefit management policies. Pharmacy benefit management works to manage the costs and utilization of prescription medications. However, the implementation of pharmacy benefit management tools can have negative consequences—at times forcing patients with serious and degenerative medical conditions to undergo an indefinite, painful, dangerous, process of trial and error before finally receiving the treatment originally recommended by their health care provider. This can cause patients’ medical conditions to deteriorate, increasing the need for more expensive and invasive medical treatment in the future. What’s more, patients’ untreated conditions can increase the incidence of depression, non-compliance, and self-medication. To combat some issues associated with non-compliance, the use of medication synchronization is gaining in popularity as a way to improve adherence by patients who are on a regular medication regimen. To coordinate the patient’s recurring medications, the pharmacist performs a comprehensive review of the patient’s medication regimen to determine the appropriateness of each therapy. After the initial review, the pharmacist calls the patient each month, before filling the new prescriptions, to ensure that no changes have been made and to confirm that the patient is still taking the medication. There are a number of states already working to advance legislation in the realm of pharmacy benefit management, and we expect several more states to be identified soon.

<u>Policy Activity</u>	<u>Opportunities for Action</u>
<p>Track and monitor PBM legislation and regulations -SPPAN will track, analyze, and distribute regular updates to our stakeholders to take easy action. -Will continue to connect patient and healthcare provider groups together to address these issues.</p>	<p>-Request and read SPPAN’s PBM legislative update to stay apprised of hot legislation and opportunities for action. - Visit SPPAN’s website to identify opportunities to address PBM issues in your state.</p>
<p>Advocate collectively to promote positive PBM policies and to oppose PBM policies that would harm patient care. SPPAN will participate in state coalitions focused on this priority, which are being led by the Leukemia & Lymphoma Society, Arthritis Foundation, American Cancer Society Cancer Action Network, Patient Services, Inc., Global Healthy Living Foundation, National Patient Advocate Foundation, International Pain Foundation, US Pain Foundation, International Autoimmune Foundation, and more.</p>	<p>- Share your stories that highlight challenges (i.e., high copays/coinsurance, forced fail first policies). - Become active in one of the state coalitions. Email Amy Goldstein, SPPAN Director, to find out if one is in your state, or contact the advocacy staffperson at your organization.</p>

ADVOCATE FOR ACCESS TO ABUSE DETERRENT FORMULATIONS, NALOXONE, PARTIAL FILL, AND SUBSTANCE USE DISORDER PREVENTION AND TREATMENT: We are seeing a great deal of time and money—from every state house to the White House—being spent to address the prescription drug abuse challenges in our country. With the landmark passage of the Comprehensive and Addiction Recovery Act of 2016, there are more opportunities in the coming year to work together and align around these important public safety measures. We advocate for the safe use, security, and appropriate disposal of medications, and seek ways to assure this responsibility is shared among prescribers, pharmacists, and patients. SPPAN will support access to overdose reversal medications (e.g., naloxone) for individuals at risk of dying from an overdose. Related to substance use disorder, we support rational policies that appropriately regulate the use of medication assisted treatment for addiction—for example, proof that counseling required by medication labels is taking place. We advocate for reimbursement and integration of better screening and referral for substance abuse treatment into the clinical work flow—Screening, Brief Intervention, and Referral to Treatment (SBIRT) in particular. Bills related to abuse deterrent formulations (ADF) were active in 2016, and we will continue to focus on ensuring that access to these medications are available for the people with chronic pain who benefit from this therapy.

<u>Policy Activity</u>	<u>Opportunities for Action</u>
<p>Track, analyze, and respond to legislation and regulations</p> <ul style="list-style-type: none"> -Increase appropriate access to naloxone by at-risk individuals, caregivers, standing orders, and by first responders. -Ensure access to abuse deterrent formulations in appropriate circumstances (see our position here). 	<ul style="list-style-type: none"> - Collect stories from patients/professionals (i.e., denial of medication due to high cost of ADF) - Help educate lawmakers about the importance of naloxone as a safety measure - Take note in SPPAN’s tracker what bills are pending and support/oppose them in your state
<p>Implementation of Comprehensive Addiction and Recovery Act</p> <p>SPPAN will work in collaboration with its members to promote implementation</p>	<ul style="list-style-type: none"> -Read more information about the important provisions that affect integrative pain management
<p>Increase awareness and access to partial fills for opioid pain medications</p> <p>Federal: follow the provision in CARA (Section 702) Allows partial fills of prescriptions for controlled substances on Schedule II of the CSA at the request of the prescriber or the patient (subject to limitations).</p> <p>State: support legislation in the states that is proposed to match the new federal statute</p>	<ul style="list-style-type: none"> -SPPAN will develop a webinar and educational materials for providers and patients, in partnership with National Alliance for State Pharmacy Associations and other organizations -Work with SPPAN stakeholders in the states to ensure that there are coalitions of provider and patients organizations understanding and promoting partial fills.
<p>Advocate for access to abuse deterrent formulations</p>	<ul style="list-style-type: none"> - SPPAN will support legislation that aims to bring coverage parity between abuse-deterrent and non abuse-deterrent opioid analgesics.
<p>Advocate for safe use, storage, and disposal</p> <ul style="list-style-type: none"> -Share checklist for consumers created by Alliance for Balanced Pain Management -Encourage the important conversations to be had between patient and provider when controlled substances for pain are prescribed and dispensed. 	<ul style="list-style-type: none"> - Share this checklist with anyone in your personal network (e.g., healthcare professionals, people with pain, lawmakers, parents, co-workers, etc.). -Increase awareness among your family/networks about the importance of safely using, storing, and disposing of controlled substances.

MONITORING/SUPPORTING:

SPPAN is tracking hundreds of other policies involving other pain-related issues, which have either not yet risen to the top of the list (based on stakeholder feedback) or continue to see momentum led by other groups and do not require assistance from SPPAN.

<u>Policy Activity</u>	<u>Opportunities for Action</u>
<p>Continue to track and monitor legislation and regulations in other pain-related categories:</p> <ul style="list-style-type: none"> • Awareness Bills, Resolutions, and Proclamation • Pain-Related Commissions, Studies, Task Forces • Pain Clinic Regulation • Medical Marijuana 	<p>- Utilize SPPAN’s legislation and regulation trackers to see our other policy areas and what is happening in your state.</p>

For more information about SPPAN’s priorities, contact:

SPPAN Director, [Amy Goldstein](#), MSW, 209-533-9744, ext. 109

Asst. Director, Legislative & Regulatory Affairs, SPPAN, [Katie Duensing](#), JD, 209-533-9744, ext. 114

<http://www.sppan.aapainmanage.org>