NEW LIMITS ON PRESCRIPTION OPIATES WILL SAVE LIVES AND FIGHT ADDICTION

As the epidemic of opiate abuse and addiction continues to sweep the country, state, local and community leaders constantly look to improve their efforts to combat it by responding with newer, better tools. Ohio is no different. Ohio is investing nearly $1 billion each year to battle the scourge of drug abuse and addiction. Additionally, Ohio has:

- Shut down dozens of pill mills;
- Taken more than 250 actions against medical licenses because of prescribing issues;
- Increased seizures of illegal drugs resulting in more than 100 percent increase in drug arrests;
- Adopted some of the nation’s first policies to reduce opiate prescriptions;
- Strengthened electronic tools that combat doctor shopping and illegal prescriptions;
- Launched a youth drug prevention effort comprised of proven, peer-reviewed strategies; and
- Dramatically increased recovery housing and addiction treatment efforts in local communities.

It is a tough battle, but Ohio’s efforts are paying off and have helped the state reduce opiate prescriptions by 20 percent and doctor shopping by 78 percent—that means fewer opiates in circulation for illegal diversion or unauthorized use. Since prescription opiates are often the gateway to heroin use and 74 percent of those who died of a drug overdose in 2015 had a previous controlled substance prescription, we know that shutting down this avenue to addiction it an essential prevention strategy.

The Next Step...Implementing New Rules for Acute Pain Prescribing

Ohio is updating its opiate prescribing policies for treating acute pain by giving them the force of law. The state began creating its voluntary guidelines in 2012, together with the medical community, even before the U.S. Centers for Disease Control and Prevention (CDC) issued guidelines last March. After close analysis of the state’s electronic prescribing data, Ohio will now take the next step to update its policies to place commonsense limits on opiate prescribing for acute pain. These improvements can lead to an estimated reduction of opiate doses in Ohio by 109 million per year while preserving the ability of clinicians to address pain in a competent and compassionate way.

Highlights of Ohio’s new opiate prescribing limits for acute pain include:

1. No more than seven days of opiates can be prescribed for adults;
2. No more than five days of opiates can be prescribed for minors;
3. The total morphine equivalent dose (MED) of a prescription for acute pain cannot exceed an average of 30 MED per day;
4. Health care providers can prescribe opiates in excess of the new limits only if they provide a specific reason in the patient’s medical record. Unless such a reason is given, a health care provider is prohibited from prescribing opiates that exceed Ohio’s limits;
5. Prescribers will be required to include a diagnosis or procedure code on every controlled substance prescription, which will be entered into Ohio’s prescription monitoring program, OARRS;
6. The new limits do not apply to opioids prescribed for cancer, palliative care, end-of-life/hospice care or medication-assisted treatment for addiction;
7. The new limits will be enacted through rules passed by the State Medical Board, Board of Pharmacy, Dental Board and Board of Nursing.

BOTTOM LINE: Ohio has made significant strides in reducing the amount of opiates prescribed by more than 20 percent since 2012, but more must be done to reduce the supply of prescription opiates available for abuse by establishing limits for the treatment of acute pain. With these new limits, it’s estimated that the state could see an additional reduction of 109 million opiate doses. By reducing the availability of unused prescription opiates, fewer Ohioans will be presented with opportunities to misuse these highly addictive medications.