



Working together to help end the opioid epidemic



Identify, engage, guide

Necessary and useful for some medical conditions, opioids are powerful drugs that come with a high risk of misuse and dependence. That's why Optum® Behavioral Health is confronting the opioid epidemic with a coordinated, multi-pronged approach. Through powerful data and analytics, and partnerships with care providers and communities, we can:

- Identify opioid misuse and addiction
- Tailor ways to engage those who are addicted
- Guide members to care that can help them achieve long-term recovery

For example, Optum Behavioral Health has strategic partnerships with providers who offer medications for opioid use disorder (MOUD). These medications help with immediate access to lifesaving treatments for those struggling with opioid misuse and addiction. Services may be provided virtually or in person.



96%
of our members
are within 20 miles of
an MOUD provider.¹

MOUD is critical

Optum Behavioral Health offers the largest MOUD network in the country, with over 5,165 providers in over 10,417 locations nationally.²



Opioid misuse is a national health crisis

Almost 1 million people have died in the last 25 years from drug overdose.³

2021 alone saw the highest number of overdose deaths, exceeding 106,000.⁶

Opioids – mainly synthetic opioids
Fentanyl is currently the main driver of drug overdose deaths. 82.3% of opioid-involved overdose deaths involved synthetic opioids.⁵

An estimated 2 million Americans are thought to have a substance use disorder with prescription painkillers.⁴

A complex problem requires a comprehensive strategy

Thanks to our vast resources, we're uniquely positioned to help address this crisis by connecting efforts across the entire health system and continuum of care.

Identify misuse and addiction

We start by educating care providers and consumers on the proper use of opioids, minimizing early exposure and promoting alternative treatments for pain. We also advance best practices for prescribing and using these highly addictive medications.

Engage those who are addicted

Next, we work with care providers to make sure those struggling with opioid misuse or addiction are connected to evidenced-based treatment in their communities and have personal support for long-term recovery.

Guide members toward long-term recovery

Finally, we use data to get a better understanding of the circumstances that lead to opioid addiction and who is most at risk. This helps us learn what measures are most successful to help care providers focus prevention and treatment where and when they really matter.



Meeting CDC guidelines

Many prescriptions have too many pills or too many days' supply to meet guidelines. Optum actively tracks prescription compliance with the CDC guidelines on dosage, length of prescription and appropriate use.

Morphine milligram equivalents (MME) is a numerical standard against which most opioids can be compared, yielding a comparison of the drugs potency.

MME helps determine whether a cumulative daily dose of opioids is associated with increased risk of opioid use disorder, accidental overdose and death. Lower doses are considered to be 20-50 MME per day.

Patients taking 50 or greater MME daily are more at risk for problems related to opioid use. The Centers for Disease Control and Prevention (CDC) recommends using the lowest effective dose.⁸

Reducing reliance on long-acting opioids⁷



29%
decrease

in opioid prescriptions per 1k members (since July 2017)



21%
decrease

in average morphine milligram equivalent per opioid prescription (since July 2017)



55%
decrease

in pediatric opioid prevalence (since highest peak in July 2019)



97%
opioid scripts

for new-to-therapy members were below 50 MME/day^{*}



94%
opioid scripts

for experienced members were below 90 MME/day^{*}

1. Identify misuse and addiction

Through multiple channels and touchpoints, we help ensure safe and appropriate use of opioids right from the start by:

- **Minimizing early exposure** by promoting safe alternatives to opioids for treating chronic and acute pain. We align with CDC guidelines for opioid use, dosing and length of therapy. We also share data with providers to identify outlier opioid utilizers, prescribers and pharmacies.
- **Reducing inappropriate supplies** of opioids through supply limits on scripts, prior authorization programs, real-time medication checks that prevent unnecessary refills, and screening for possible unsafe combinations of opioids and other drugs prescribed to the same individual.
- **Increasing educational efforts** with all health professionals (doctors, dentists, behavioral health providers and first responders) to promote coordinated efforts and actions that are based on a common understanding of best practices and available resources.

2. Engage with those who are addicted

A complex, chronic medical condition, opioid use disorder requires individualized treatment. With data insights pointing the way, we are:

- **Connecting members to evidence-based treatment** and other services in their local communities. This includes MOUD, which uses a whole-patient approach through a combination of medications and counseling to relieve opioid cravings, prevent overdose and promote recovery.
- **Reducing neonatal abstinence syndrome** by decreasing the number of opioids prescribed to pregnant women and increasing the number of members referred to case management for early MOUD treatment and other assistance.
- **Collaborating with care providers** to offer members personalized care plans with access to evidence-based treatment while promoting the use of naloxone to decrease the number of overdoses.



Through targeted, individualized approaches, we can help engage with those who are addicted and support their treatment journey.

3. Guide members toward long-term recovery

Recovery from opioids requires different types of support over a lifetime. We are helping individuals and communities heal and sustain recovery by:

- **Taking a whole-person approach** to address clinical, social and community influences, such as using certified peer support specialists, who are uniquely qualified to support others because they have made the journey from substance use disorder to recovery themselves.
- **Using data and analytics to help communities** try to get ahead of the problem, such as identifying those most at risk for addiction and helping doctors and pharmacists know when to reach out to individuals who may need support.
- **Launching MOUD initiation in the emergency department of select hospitals** designed to get those at most risk into care and make measurable gains in the fight against opioid overdose death.



Recovery from opioids requires different types of support over a lifetime.

For more information, visit optum.com/behavioralhealth or contact your Optum representative.

1. Data from Optum network report, October 2021.
2. Provider summary dashboard, Nussbaum. April 2023.
3. CDC. Opioids data overview. Last reviewed June 1, 2022. Accessed May 17, 2023.
4. Florence CS, Zhou C, Luo F, Xu L. The economic burden of prescription opioid overdose, abuse, and dependence in the United States, 2013. *Medical Care*. 2016;54(10):901-906.
5. CDC. Opioids data overview. Last reviewed June 1, 2022. Accessed May 17, 2023.
6. Ibid.
7. Optum Rx book of business, Wolf. June 2021.
8. CDC. Calculating total daily dose of opioids for safer dosage. Accessed May 17, 2023.

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