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Chubb HealthBeat

Opioid Crisis

March, 2019

Injured workers who are prescribed opioids stay on temporary disability more than three times longer than workers with similar injuries who are not prescribed opioids.

Source: Workers' Compensation Research Institute, March 2018

A pulse on the current opioid crisis.

The national epidemic of opioid abuse has garnered increasing attention as short-term prescriptions continue to turn into long-term addictions for many Americans. Opioids—a class of drugs that includes fentanyl, morphine, codeine, oxycodone, hydrocodone, methadone, hydromorphone and meperidine—represent the strongest pain medications available. These drugs are often prescribed to treat pain associated with acute injuries associated with those in the workplace, chronic conditions or surgeries.

As patients continue to use opioids, they often build up a tolerance that requires stronger doses of the drug to obtain the same level of pain relief. This leads to addiction, dependency, more days missed from work and escalating claim costs. In fact, statistics have shown that opioid use and abuse for the management of chronic pain has had the single most profound impact on workers' compensation claims.

Impacts of Claims Involving Opioids

While prescribing opioids can have negative impacts on the health and well-being of injured employees, it also has far-reaching effects on their employers and co-workers.

Extended disability - More time out of work leads to disruptions in productivity and lower morale among workers who have to pick up some of the slack.

Higher claims costs - Opioid prescription coverage is expensive. An additional layer of cost is incurred when the treatment of dependence and addiction is needed.

Longer duration of open medical claims - For injured workers who are prescribed opioids, the medical portion of the claim may remain open for years—or even for an entire lifetime.

Higher premiums - To help defer the costs of higher claims, businesses are forced to pay more for their coverage.

Employing a holistic approach at the time of injury is a positive strategy in lowering prescription rates.

Making Great Strides

While tremendous progress has been made to decrease the prevalence of opioid use and abuse for workers' compensation claims, much more work is needed. To help diminish the damaging effects that these drugs have on patients and their families and the liabilities they present to employers in the form of rising workers' compensation claims costs, Chubb employs a holistic approach that starts at the time of injury.

Tools to Help Prevent Abuse

Chubb has focused on identifying and developing tools to help protect our insured's workers from the effects of opioid overutilization or chronic usage. Here are some key considerations we have implemented:

- **State-Mandated Formularies** - A formulary is a list of approved and restricted medications including opioids. These evidence based medication guidelines encourage the use of non-opioid medications.
- **Pharmacy Benefit Manager (PBM) Program** - PBMs help to develop and enforce prescribing and dispensing guidelines and prior approval requirements to ensure the safety of injured patient's and control plan costs. This includes raising flags if there's a possibility of overuse.
- **Medical Management** - Various tools are provided to nurses and case managers to help educate patients and physicians, maintain current clinical information and monitor medication use, side effects and effectiveness.
- **Data Analytics** - Data from Electronic Health Records combined with predictive analytics strategies help to identify and flag at-risk patients who may be heading for an opioid problem.
- **RN Medication Specialists** - An on-staff RN within the claim department allows collaboration with claims examiners, nurse consultants and case managers to develop action plans addressing opioid usage on a claim-by-claim basis.
- **Specialized Nurse Case Managers** - These specialists help facilitiate communication and planning with physicians, educate injured workers and reduce the overall prescription and use of opioids while maintaining medical efficacy.
- **Utilization Review (UR)** - This part of the process assists in medical decision making in cases where prescribed medications do not adhere to evidence-based guidelines.

A Step in the Right Direction

While we've only made a small dent in minimizing this national epidemic, our efforts have already resulted in lower prescription rates among our claims. Total opioid prescriptions decreased nationally from 255 million in 2012 to 191 million in 2017. And we're not done yet. Chubb will continue to advocate for injured workers and their employers – helping to protect them from the damaging effects of opioid abuse.

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