Opioid Prescribing Patterns in Washington State:

Trends in Opioid Prescriptions Among Adults without Cancer, 2014-2018

The Centers for Disease Control cautions clinicians to prescribe the lowest effective dose for the shortest duration necessary when prescribing opioids (<u>https://www.cdc.gov/drugoverdose/prescribing/guideline.html</u>). This report examines opioid prescriptions filled in Washington state from 2014-2018 among non-hospice adults, age 18+, without cancer.



The prevalence of opioid prescriptions among non-hospice adults without cancer has remained constant, between 10 and 11 percent. The average days supply for acute opioid prescriptions has declined slightly. The average daily prescription strength has declined more substantially.





As well as the general prescribing patterns described above, we are especially concerned about high-risk prescribing practices. The following opioid prescribing measures were developed by the Pharmacy Quality Alliance and are endorsed by the National Quality Forum.

- Concurrent use of opioids and benzodiazepines for > 30 days among opioid patients without cancer.
- Opioid use at high dosage (> 120 MME for > 90 days) among opioid patients without cancer.
- Opioids from multiple providers (4 or more prescribers and 4 or more pharmacies) among opioid patients without cancer.



High dosage opioids among opioid patients without cancer in Washington State, 2014-2018



The Pharmacy Quality Alliance opioid measures are relatively new, and national benchmarks for all payers have yet to be established. Washington state results for Medicare and Medicaid recipients appear to be comparable to, or slightly lower than such national estimates as are available.

Among opioid patients without cancer, concurrent use of opioids and benzodiazepines has declined steadily from 18 percent in 2014 to 13 percent in 2018. Opioids from multiple providers peaked in 2015 at 6.0 percent, and has been declining since. High dosage opioid use appears to have peaked in 2016 at 3.3 percent, though more years of data are needed to determine if the subsequent decline is the start of a sustained trend.