Workers' Comp

Congress Considers a Flurry of Opioid Bills

June 19, 2018
5 MIN READ
Author profile image

Brian Allen

Vice President, Government Affairs

The U.S. House Energy and Commerce Committee debated and advanced fifty-seven bills related to combating the opioid crisis. The effort has been largely bipartisan. It is anticipated that all of the bill will be considered by the full house before the week is out. This is an unprecedented level of activity on this issue by Congress in a single session.

The draft bills cover a wide array of issues and areas, ranging from the Children's Health Insurance Plan (CHIP) andMedicare services, to drug counterfeiting as well as fraud and abuse. There are several bills that are of particular note to the workers' compensation systems across the country. It is encouraging to see Congress take a significant dive into this critical issue. (Read more on the Opioid Crisis Impact in Workers' Comp and the CDC Opioid Prescribing Guidelines)

The bills related to workers' compensation are outlined below:

- **HR5806** grants authority to the FDA to update existing guidance on how existing pathways can be used to speed the development and delivery of non-addictive treatments for pain and addiction to patients using the FDA's accelerated approval process.
- **HR5811** will provide more tools for the FDA to conduct post-marketing studies on the long-term impact and efficacy of opioids for treating chronic pain. Currently, the FDA has limited data on the long-term efficacy of opioids, according to the Energy and Commerce Committee.
- **HR5801** requires the various state Medicaid programs to integrate the process of checking the Prescription Drug Monitoring Program (PDMP) into the workflow process for Medicaid providers. While not specific to workers' compensation, the processes developed from this legislation could easily be adapted for all of health care, including workers' compensation. The bill also would adopt minimum federal standards for PDMPs.

- **HR5716** will require the Centers for Medicare and Medicaid Services (CMS) to establish opioid-prescribing thresholds based on specialty and geographic area. Prescribers identified as outliers would be given notice of their status. Some states have already adopted a "report card" system. Providing this outlier status to doctors can help them improve their prescribing habits to better align with peers and best practices.
- **HR5796** is a good companion bill to HR5716, noted above. This bill would direct CMS to work with eligible entities to provide education to identified prescribing outliers on the best practices for prescribing opioids and evaluating their prescribing patterns.
- **HR5990**, the Opioid Addiction Action Plan Act, will call on the Department of Health and Human Service (HHS) and stakeholders to develop an action plan that will include studies and reports to Congress on the best ways to address the opioid crisis. These strategies will benefit all areas of the broader health care system.
- **HR5603** will empower CMS to evaluate the use of telehealth in delivering substance disorder treatment. The goal is the effective use of telehealth services to expand access to treatment for the millions currently struggling with an addiction to opioids.
- **HR5605** creates a demonstration project for treating substance abuse disorders that will also look to develop quality and outcome measures to better evaluate the efficacy treatment programs.
- **HR5587** authorizes HHS to award grants to peer support specialist groups to develop and expand recovery services.
- **HR5804** would rescind a previous reimbursement cut for post-surgical injections to encourage and incentivize such injections as an alternate to using opioid pain relievers.
- **HR5812** improves federal support for state-sponsored PDMPs. It also authorizes the Centers for Disease Control and Prevention (CDC) to conduct controlled substance overdose prevention and surveillance activities to aid in getting accurate and timely information to prescribers and dispensers to help them in making better clinical decisions.
- **HR4284** requires HHS to develop a public and easily accessible dashboard that will link all of the efforts and strategies from across the country that are being developed and used to fight the opioid crisis.
- **HR5002** bestows new and flexible authorities on the National Institutes of Health (NIH) to jumpstart new and innovative research on new, non-addictive pain medications.
- **HR5009**, "Jessie's Law," will allow providers to access a consenting patient's complete medical history when making treatment decisions. It also instructs HHS to develop best practices for prominently displaying substance abuse history in a patient's medical history.
- **HR5197** creates a demonstration program to test and evaluate the use of non-opioid pain management protocols in emergency rooms.
- **HR5685** instructs CMS to compile education resources for Medicare beneficiaries to instruct them on opioids, pain management and the use of non-opioid alternatives to managing pain. Though this is specific to Medicare, those same resources could be used to educate injured workers on how to best manage the use of opioids and to encourage them to seek alternative treatments.
- **HR3528** requires e-prescribing for all controlled substances under Medicare Part D. While this is only from Medicare Part D drugs, the lessons learned could be helpful to workers' compensation systems across the country.
- **HB5582** directs CMS to study and evaluate the use of abuse-deterrent opioids in Medicare plans. This is another area that can yield data that will be instructive to providers working with injured employees.
- **HR5473,** the Better Pain Management Through Better Data Act, requires the FDA to define clear data collection methodology to help inform opioid-sparing labeling claims for products that could be used to replace, reduce or delay the use of opioids.

In the words of Committee Chairman, Representative Greg Walden (R-OR), *"We know there is no silver bullet, no one-size-fits-all approach that will remedy the catastrophic effects of this crisis over the last decade. But*

much can be done to help vulnerable patients get the treatment they want and need, and to ensure these powerful drugs are not getting into the wrong hands. These bills will help protect our communities and bolster enforcement efforts, strengthen our prevention and public health efforts…"

At Mitchell, we applaud the efforts of Congress to help stem the flow of opioids in this country. We are committed to doing all we can to help our customers utilize the best tools possible to reduce the over-prescribing of opioids to injured workers. Over time, these bills will have an impact and will provide additional tools, data and educational resources to help us better manage pain without the catastrophic effects of opioids.

The House Energy and Commerce Committee reports outlining the actions on all fifty-seven bills can be found here and here. The reports also contain compelling and informative collateral materials that you may find of interest.

For more information about this alert or other regulatory or legislative action around the country, please feel free to reach out to Brian Allen, vice president of government affairs at Brian.Allen@mitchell.com or at 801.903.5754.



©2022 Enlyte Group, LLC.

mitchell | genex | coventry