Multiple legislative initiatives and executive orders have been implemented in Arizona in the past year, including a public health state of emergency declared by Governor Ducey, the Enhanced Surveillance Advisory order, in June of 2017, which have had significant impact on the opioid epidemic. This order required health care providers to report data on specific opioid-related health conditions to the Arizona Department of Health Services. This executive order was renewed and in October 2017, the Governor made opioid-related reporting an emergency rule.

In response preparation for the Arizona Opioid Epidemic Act, which would ultimately go in to effect April 26, 2018, St. Elizabeth’s Health Center established a goal to successfully prevent and combat opioid use disorders, opioid overdoses and related deaths as part of the nation’s opioid epidemic by implementing Arizona’s required Opioid Prescribing Guidelines. Given the urgency, the practice updated their policies and procedures requiring clinicians to review the Arizona Controlled Substances Prescription Monitoring Programs (CSPMP) prior to prescribing any opioid medications. Additionally, the practice enforced the requirement of implementing a signed medication risk and safety agreement with each patient, along with ensuring clinicians ordered a comprehensive urine drug screen.

St. Elizabeth’s efforts have been led by their Chief Medical Director, Dr. Mark Schildt, and S.M.A.R.T. goals were utilized.

**Specific**

St. Elizabeth’s developed the following specific goals:

1) Reducing the number of days opioids are prescribed for patients who were receiving greater than the Arizona stated guidelines of less than or equal to 15-days’ supply from multiple prescribers and/or multiple pharmacies
2) Reducing the number of patients being prescribed high milligram dosages of opioids in accordance with the Arizona stated guidelines of greater than or equal to 90 milligrams morphine equivalent dosage (MED)

**Measurable**

In August 2017, St. Elizabeth’s quality committee decided to take further actions and started running reports out of their electronic health record (EHR) system, GE-Centricity, identifying patients who were either prescribed or who reported having received (by other providers) opioid medications. St. Elizabeth’s leadership target was to ensure that the practice was in compliance with Arizona prescribing guidelines when the law took effect in January 2018.

With the aid of Pii’s population health tool, CareQuotient, the practice consultant in conjunction with St. Elizabeth identified an applicable population of 1,699 patients. Furthermore, 393 patients were identified as having had an opioid dispensing event over the period of 1/1/17 to 1/31/18. Analysis of the data showed 129 patients in the denominator defined as 18 years and older and receiving prescription opioids for >=15 days.
during the measurement year. Of those, 29 were identified as high-risk because they received a high dosage prescription (average morphine equivalent dose [MED] >= 90 mg). By January 2018, the number of high-risk members dropped to 20 (a 30% reduction from January 2017).

For 18 years and older patients receiving prescriptions from multiple providers and/or multiple pharmacies, CareQuotient identified 1,794 eligible patients over the period of 2/1/17 to 1/31/18, of which, 424 patients had an opioid dispensing event and 152 patients had >=15 days’ supply (denominator).

Evaluation of the practice’s HEDIS measures for reporting period of 2/1/17 – 1/31/18 within the CareQuotient population health tool revealed **consistent decrease of dosage and length of use since start of practice initiative.**

**Achievable**

With longest tenure in the organization, most of the patients identified in the denominator for these measures were already assigned to Dr. Schildt, Chief Medical Officer and champion of this initiative. Dr. Schildt’s engagement and relationship with the patients and their families greatly increased the successful implementation of this intervention. The target population was less than 5% of total population served by St. Elizabeth’s Health Center.

**Relevant**

According to the Arizona Department of Health Services, between June 2017 and May 2018, Pima County has had 1,359 reported cases of opioid overdoses, with 15% being fatal. The practice designed a treatment plan to mitigate the patients’ risks while on this medication which included a tapering plan and alternative treatment options. Through this process, the practice identified patients whose complexity was significantly greater due to other physical health or behavioral health diagnoses. The practice intensified care coordination, continually assessing the need to transition patients to a behavioral health provider and/or a medication assisted treatment (MAT) provider.

**Time Specific**

St. Elizabeth’s leadership target was to become fully compliant with Arizona’s opioid prescribing guidelines by January 2018 when the Arizona law was to become effective.

In summary, St. Elizabeth’s efforts in 2017 led to consistent decreases of dosage and length of opioid prescriptions as determined by the review of HEDIS measures. This was under the leadership of Dr. Schildt who worked with his assigned patient group. He was able to develop relationships with these patients and develop treatments plans to mitigate their risks. This included proper referral to behavioral health and/or MAT providers and regular checks of the PDMP for any opioid prescriptions outside of their service. These combined efforts are the basis for these successful outcomes.

*St. Elizabeth’s Health Center is a faith-based community health center that supports the healthcare needs of the uninsured and underserved in Southern Arizona.*