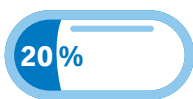


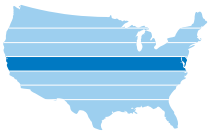
# Opioid misuse and pain management

## What Anthem's doing about it

### It's a **big** problem



An estimated **20% of patients in pain** receive an opioid prescription at the doctor's office.<sup>1</sup>



**1 in 7 Americans age 12 and older** has a substance misuse problem.<sup>2</sup>



**Less than 11% of people in need** get treatment.<sup>3</sup>



**29% increase in U.S. emergency room visits** for opioid overdoses from July 2016 to September 2017.<sup>4</sup>

### What are opioids?

Often prescribed for pain, opioids are a class of drugs, including:<sup>6</sup>

- Fentanyl, a powerful anesthetic used to manage pain.
- Prescription pain relievers such as oxycodone, hydrocodone, codeine, morphine and others.

### How Anthem approaches pain management

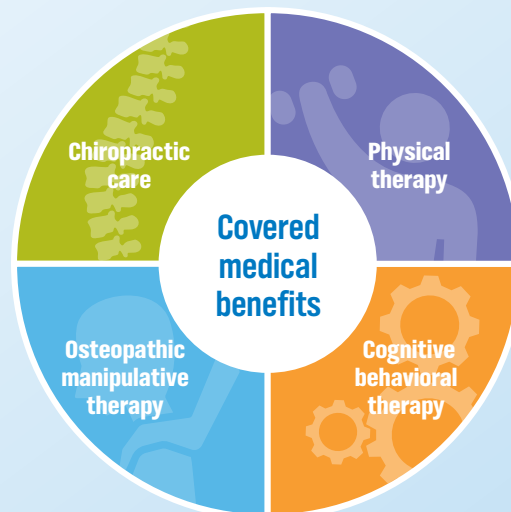
An estimated **11% of adults have daily pain.**<sup>5</sup>

We're focused on being part of the solution. To do that, we give our members access to nonopioid options. Some patients need a variety of pain management treatments and medication to find relief. Here's Anthem's approach:

- We assess evidence-based strategies through our medical and pharmacy policies.
- We work with providers to look for and review new technology and medications at least yearly so we can offer the best options available.
- We support coverage of pain relief drugs and nondrug treatments that meet the best clinical practice guidelines and scientific evidence.
- We follow the *Centers for Disease Control and Prevention (CDC) Guideline for Prescribing Opioids for Chronic Pain.*<sup>5</sup>

### Other ways to treat pain

There are many nonopioid approaches to pain relief — covered by Anthem and used successfully by members.



Plus, there are nonmedication options with advanced pain management approaches:

- Electrical nerve stimulation
- Spinal cord stimulators
- Muscle, nerve and/or spinal injections
- Implantable infusion pumps
- Surgical procedures to eliminate the pain source

**See the next page for more pain management options.**

## Movement to manage pain

A common treatment for chronic pain, physical activity may help improve mobility and decrease inflammation and overall pain levels – without requiring extra medication. These activities include:<sup>8,9</sup>



**Stretching and strengthening exercises**



**Doing yoga or tai chi**



**Walking**



**Water aerobics or swimming**

**42 million U.S. adults** report that pain disrupts their sleep a few nights a week or more.<sup>7</sup>

### Nonopioid drug options can help

When deciding which drugs are on the approved list of medications, our medical and pharmacy teams consider which have the best clinical benefit. Other options to manage pain include:

- Nonsteroidal anti-inflammatory drugs (NSAIDs) (such as ibuprofen and naproxen)
- Anticonvulsants (such as gabapentin)
- Tricyclic antidepressants (TCAs) and Serotonin norepinephrine reuptake inhibitors (SNRIs) (antidepressant medications)
- Corticosteroids (steroid injections)
- Skeletal muscle relaxants
- Topical analgesics (cream- and ointment-based pain medications)

Anthem doctors are encouraged to follow the CDC's guidelines for opioid prescriptions. We'll keep doing everything we can to help our members get quality, evidence-based treatment and medication options with the greatest benefit and lowest risk of complication or adverse reaction.

1. Centers for Disease Control and Prevention: *Morbidity and Mortality Weekly Report (MMWR) CDC Guideline for Prescribing Opioids for Chronic Pain – United States, 2016* (March 18, 2016): [cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm](http://cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm).  
2. The National Center on Addiction and Substance Abuse: *Types of Addiction, Teen Substance Use, What is Addiction, Addiction Screening and Prevention* (rev. April 14, 2017): [centeronaddiction.org](http://centeronaddiction.org).  
3. Substance Abuse Mental Health Services Administration: *Findings from NSDUH reveal that only a subset of individuals receive services for substance use and mental health issues* (September 21, 2017): [samhsa.gov/newsroom/press-announcements/201709211000](http://samhsa.gov/newsroom/press-announcements/201709211000).  
4. Centers for Disease Control and Prevention: *Vital Signs: Trends in Emergency Department Visits for Suspected Opioid Overdoses – United States, July 2016–September 2017* (March 9, 2018): [cdc.gov/mmwr/volumes/67/wr/mm6709e1.htm?s\\_cid=mm6709e1\\_w](http://cdc.gov/mmwr/volumes/67/wr/mm6709e1.htm?s_cid=mm6709e1_w).  
5. Centers for Disease Control and Prevention: *CDC Guideline for Prescribing Opioids for Chronic Pain* (August 29, 2017): [cdc.gov/drugoverdose/prescribing/guideline.html](http://cdc.gov/drugoverdose/prescribing/guideline.html).  
6. Department of Health and Human Services: *Prevention – What are Opioids?* (accessed April 20, 2018): [hhs.gov/opioids/prevention/index.html](http://hhs.gov/opioids/prevention/index.html).  
7. The American Academy of Pain Medicine: *AAPM Facts and Figures on Pain* (accessed June 14, 2018): [painmed.org](http://painmed.org).  
8. Anyone in pain should talk to his or her doctor before beginning any exercise or physical activity. This material is for educational purposes only and doesn't replace a doctor's advice.  
9. Healthline Networks, Inc.: *7 Exercises for Reducing Chronic Pain* (rev. May 30, 2017): [healthline.com](http://healthline.com).