Regions Hospital 640 Jackson Street St. Paul, MN 55101 regionshospital.com



April 4, 2018

Alisha Simon Health Economics Program Minnesota Department of Health P.O. Box 64882 St. Paul, MN 55164-0882

Dear Ms. Simon,

I am the Chief Medical Officer at Regions Hospital. Every day I am acutely aware of the fact that we have patients trying to get beds in our hospital and we either need to turn them away or we need to make them wait. When we try to send them to other hospitals on the East Side, they frequently are unable to take them. As you know our mission is to serve all. We are increasingly struggling to do so when we do not have the beds to take care of them.

On another note: You may not know that we have been at the forefront of changing care related to pain and the opioid crisis. We have gone from zero to 16 pain providers in the last 8 years across the Twin Cities. These providers include addiction specialists and behavioral health pain specialists. We have decreased the opioids prescribed for back pain over 50% in our system. I personally have given over 50 talks on pain and opioids. Given our mission to serve all and to decrease the cost of care, we have been much more aggressive in this space.

I personally work for Regions because we are focused on best care for all and affordability. I certainly believe that it is in the state's best interest to support more beds at Regions Hospital.

Sincerely,

bake ous

Bret C. Haake, MD

Treating pain without pills



Treating pain without pills

HealthPartners pain management program

Nearly one-third of Americans experience pain. Pain medication is the most commonly prescribed class of drugs in the United States. Opioids are sometimes needed for patients who've had major surgery, a serious injury, advanced cancer or are at the end of their lives. However, these medications don't always work as well as other approaches, should not be used for chronic pain and can lead to addiction and result in complications or even death.

Because of these risks, HealthPartners health plans, clinics and hospitals, and research institute have a variety of programs to provide more effective treatment for chronic pain while reducing the use of opioids.

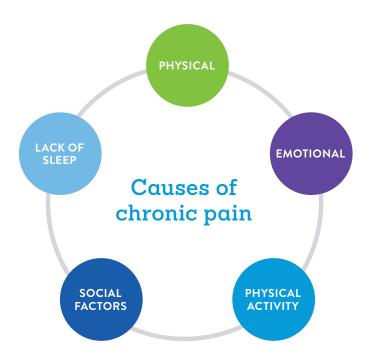
About this report

For more than 20 years, HealthPartners has been tracking progress on achieving its mission to improve health and well-being. We do this by establishing specific goals about every three to five years. Called Partners for Better Health Goals, they identify opportunities to improve health and well-being not just for individual patients, but for all of the people we serve. This report is one strategic initiative to improve health and well-being for our patients, members and community. Learn about other initiatives at <u>healthpartners.com</u>.

Specialized pain clinics provide care that is more effective than opioids

HealthPartners has four clinics that offer a multidisciplinary, holistic approach to treating chronic pain. These clinics offer services in one location that address the multiple causes of pain: physical, emotional, lack of sleep, physical activity and social factors. The clinics also provide addiction services and psychiatry. This comprehensive approach addresses the fact that pain, mood and addiction are linked.

HealthPartners RiverWay Pain Clinic opened in July 2015 and has treated more than 1,100 patients. Patients have been able to taper off opioids while their pain levels decreased 50 percent (from 8 out of 10 to 4 out of 10).



OUR FOUR CLINICS THAT OFFER THIS APPROACH ARE:

HealthPartners RiverWay Pain Clinic – Coon Rapids

HealthPartners Neuroscience Center – St. Paul

TRIA Orthopaedic Center – Bloomington

Park Nicollet Pain Management Clinic – St. Louis Park



July 2015 HealthPartners RiverWay Pain Clinic



1,100 Patients treated

50% decrease in pain levels

Reducing opioid prescriptions, misuse across our care system

In addition to reducing the amount of opioids prescribed by our clinicians, we are working to ensure that prescribed opioids are not misused.

In November 2016, our clinics and hospitals reduced the automatic setting in the electronic medical record for opioid medications. The setting is now 10 pills - half of the previous setting. This reduces the number of unused pills in the community that can be misused.

We use e-prescribing to prevent the ability to make copies and obtain fraudulent prescriptions for opioids. Minnesota was the first state to require electronic prescribing for controlled substances (EPCS). In 2017, HealthPartners implemented EPCS across our care group. Today, 89 percent of our narcotics prescriptions are sent electronically to pharmacies.

Opioids have been commonly prescribed for back pain and dental procedures. We have implemented initiatives to reduce use and misuse in these areas.

HealthPartners model of care for back pain focuses on promoting activity, exercise and physical therapy rather than prescribing pain medication. Between 2009 and 2016, the number of patients who receive opioids after being diagnosed with chronic back pain decreased 51 percent (from 29 percent to about 15 percent).



10 pills

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51% decrease

in patients who receive opioids after being diagnosed with chronic back pain

New quidelines

to limit prescriptions for opioids after root canals, wisdom teeth

removal and other dental work.



e-prescribing

to prevent fraudulent prescriptions.



89%

of narcotics prescribed across our care system are sent to pharmacies electronically. \square



3.4 million pills Fewer opioid pills prescribed

in a one year period

In 2016, HealthPartners dental clinics implemented new guidelines to limit prescriptions for opioids after root canals, wisdom teeth removal and other dental work that may require this type of pain medication. The new guideline reduced the average number of tablets prescribed from a week supply to four days while still effectively managing pain. This has reduced the number of opioid pills prescribed in a one year period by more than 91,500.

Reducing opioid use through our health plan

HealthPartners health plan has had checks in place since 2012 to prevent the overuse and misuse of opioids. These include:

PROGRAM TO PREVENT MULTIPLE PRESCRIPTIONS

Patients who receive multiple prescriptions from multiple providers may be limited to one doctor, one pharmacy and one emergency department for two or more years. This prevents the ability to get multiple prescriptions at the same time.

REVIEW HIGH-PRESCRIBING CLINICIANS

Clinicians who prescribe higher-than-normal levels of opioids are regularly reviewed to ensure medications are being prescribed appropriately.

LIMITS ON THE STRENGTH

Based on recommendations from the Centers for Disease Control and Prevention, HealthPartners limits coverage to opioids that have a morphine equivalent dose (MED) of 90 mg per day. MED is a tool to measure the potency of opioid medications. Higher doses require prior authorization and documentation of monitoring.

Results: Fewer opioids prescribed

| HEALTHPARTNERS | REDUCTION IN PILLS |
|-------------------------------|-------------------------------|
| Medical clinics and hospitals | 3,336,9671 |
| Dental clinics | 91,578 ² |
| Care group total | 3,428,545 |
| Health plan | 2,150,973 ³ |

1. Based on number of pills prescribed from August 2015–July 2016 compared to August 2016–July 2017

2. 2017 annualized rate compared to 2014

3. Based on number of pills filled from August 2015–July 2016 compared to August 2016–July 2017

Studying new approaches to chronic pain relief

We are exploring integrative therapies, such as yoga, to reduce pain. HealthPartners Institute researchers are analyzing feedback from patients who practiced yoga for 10 weeks to determine its effectiveness in relieving chronic pain.