Opioid management presents complex challenges, and early intervention is imperative to reduce risk and avoid dependence, addiction, or diversion.

### Opioid Overdose Prevention and Treatment

Understanding the risks of opioid use allows Coventry to apply the most effective and efficient interventions.

#### Who is Most At-Risk for Overdose?

<table>
<thead>
<tr>
<th><strong>Patient</strong></th>
<th><strong>Population</strong></th>
<th><strong>Medication</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior opioid overdose</td>
<td>Middle-aged adults</td>
<td>Starting or switching to new opioids</td>
</tr>
<tr>
<td>Recreational opioid use</td>
<td>More men than women</td>
<td>Extended-release or long-acting opioid</td>
</tr>
<tr>
<td>Mental health disorders</td>
<td>Whites and American Indian or Alaska Natives</td>
<td>Resumption of opioid therapy after period of abstinence</td>
</tr>
<tr>
<td>Untreated sleep disorders</td>
<td>People in rural areas</td>
<td>Morphine Equivalent Dose (MED) greater than 50 or aggressive dose increases</td>
</tr>
<tr>
<td>Lung disease</td>
<td>Residents of states with higher sales and non-medical use of prescription painkillers</td>
<td>Multiple prescriptions or prescribers</td>
</tr>
<tr>
<td>Kidney or liver problems</td>
<td></td>
<td>Route of administration (injectables)</td>
</tr>
</tbody>
</table>

- More men than women
- Whites and American Indian or Alaska Natives
- Starting or switching to new opioids
- Morphine Equivalent Dose (MED) greater than 50 or aggressive dose increases
- Multiple prescriptions or prescribers
- Route of administration (injectables)
- Concurrent Central Nervous System (CNS) depressants prescribed
Proactively Addressing Opioid Risk
- Risk modeling applies predictive analytics to identify potential dependence, abuse, or overdose risk
- First-line opioid medication checks, daily dose restrictions, day supply limits, duplicate therapy constraints, and early refill restrictions
- Early opioid fill identification and prescriber outreach allow for meaningful provider engagement
- Automated prior authorizations provide adjusters with clinical recommendations for safer and/or less costly alternatives

The Case for Take-Home Naloxone
The opioid overdose reversal agent naloxone continues to gain momentum for its life-saving implications, with expanding access driven by medical, law enforcement, government, and community efforts. All 50 states have enacted statutes that expand access to naloxone, 40 states and D.C. provide overdose “Good Samaritan” protections, and naloxone is available without a prescription in 41 states.\(^2\,^3\)

Recommendations for Care Following an Overdose
- Treatment for substance or opioid use disorder
- Referral to pain specialist for ongoing management
- Interventional, behavioral, or rehabilitation modalities

Coventry Solutions
Prescriber and injured worker outreach and education combined with recognition and coordination opportunities for recovery are critical to effectively address the opioid crisis. Coventry tools and programs are designed to prevent, manage, and ultimately mitigate the risk of death and adverse claim outcomes related to the use of opioids.

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