

Summer 2022



Table of contents

Behavioral Health Spotlight: New treatment option to prevent opioid overdose	2	Bright Start Provider Training Program	5
Find a Doctor, Drug, or Pharmacy	4	Early and Periodic Screening, Diagnosis and Treatment (EPSDT).....	6



Behavioral Health Spotlight: New treatment option to prevent opioid overdose

Presented by Dr. Yavar Moghimi, Behavioral Health Medical Director

AmeriHealth Caritas Delaware, like many parts of the country, is dealing with an opioid epidemic that is a public health crisis. This crisis is fueled by the overprescribing of prescription painkillers that can transition to heroin use. In order to put this public health problem in context, health care providers wrote 259 million prescriptions for painkillers in 2012, which are enough painkillers for every American adult to have a bottle of pills.¹ In Delaware, health care providers prescribed 86 painkiller prescriptions per 100 people. For the first time in two decades, opioid prescriptions have begun to decline, but the rate of fatal overdoses continues to rise. In 2014, 28,647 drug overdose deaths involved some type of opioid, making it one of the leading causes of accidental deaths.

With these statistics in mind, it is important to discuss how providers can address the issue of opioid dependence and prevent overdoses.

1. The first step is to do a thorough assessment of the patient's history of drug use to determine whether they are appropriate for prescription of opioid analgesics.
2. In emergency situations, prescribe the smallest amount of opioid analgesic possible, one that lasts no more than three days. In nonemergency situations, prescribe only enough until the next appointment.

3. Use CRISP, external Rx history, and/or a prescription drug monitoring program to ensure the patient is not securing medication from multiple providers
4. Prescribe naloxone nasal spray or Narcan® (currently on our formulary) with initial opioid prescription or if the patient reports history/current opioid use disorder.

Naloxone works as an opioid antidote, temporarily moving opioids off of the opiate receptors and reversing the effects of the overdose long enough to secure emergency help. Naloxone should be seen as an emergency means of reversing opioid overdoses and should be a standard of care for those who are:

1. Taking high doses of opioids for long-term management of chronic malignant or nonmalignant pain
2. Receiving rotating opioid medication regimens
3. Discharged from emergency medical care following an opioid intoxication or poisoning
4. At high risk for overdose because of a legitimate medical need for analgesia, coupled with a suspected or confirmed history of substance use disorder or nonmedical use of prescription or illicit opioids

(continued on page 3)

5. On certain opioid preparations that may increase risk for opioid overdose, such as extended release/ long-acting preparations
6. Completing mandatory opioid detoxification or abstinence programs
7. Recently released from incarceration and with a history of opioid use disorder

It is advised that at-risk patients should create an overdose plan to share with friends, partners, and/or caregivers, as they would be administering the naloxone and calling 911. They would discuss the signs of opioid overdose, which are:

1. Unusual sleepiness
2. Slow or shallow breathing
3. Pinpoint pupils in someone who is difficult to wake

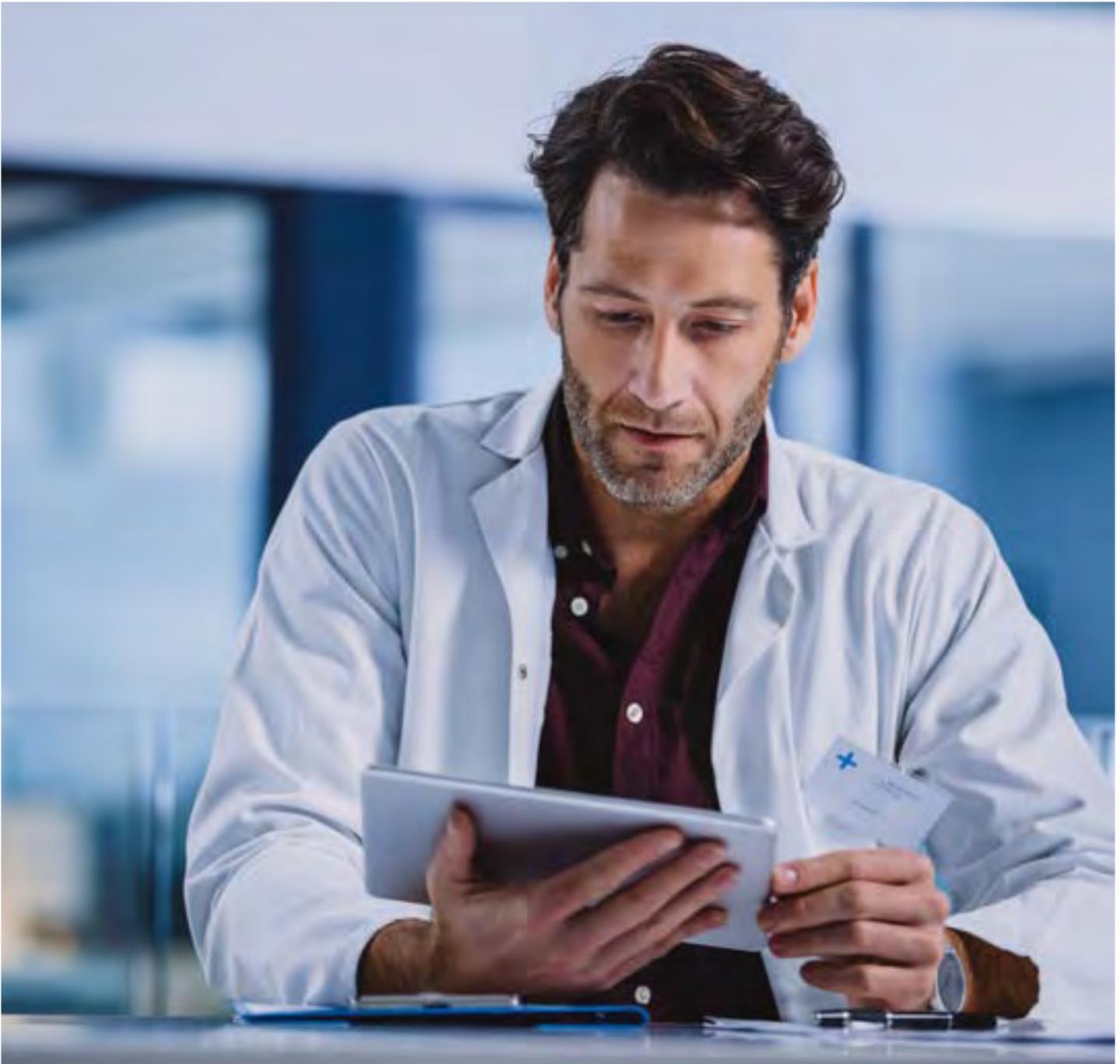
Naloxone nasal spray should be thought of in the same way that EpiPens® are prescribed for those with severe allergies or glucagon for those with diabetes. It

is important to remember that all deaths from opioid overdose are preventable deaths. As a provider, it is imperative that you educate your patients on the dangers of overusing prescription painkillers. If your patient has a history of opioid abuse, it is good practice to ensure they and their family members know how and when it is appropriate to administer naloxone. Patients and their family should know they will not be punished for administering naloxone to anyone who is suffering from an opioid overdose. It is also vital that patients know that naloxone is not the only treatment needed after a possible overdose; they should always go to the emergency room for care after its administration.

¹ Centers for Disease Control and Prevention, “Opioid Painkiller Prescribing: Where You Live Makes a Difference,” CDC.gov, September 5, 2018, <http://www.cdc.gov/vitalsigns/opioid-prescribing/index.html>

² Centers for Disease Control and Prevention, “Prescription Painkiller Overdoses in the US,” CDC.gov, November 1, 2011, <http://www.cdc.gov/vitalsigns/painkilleroverdoses/index.html>



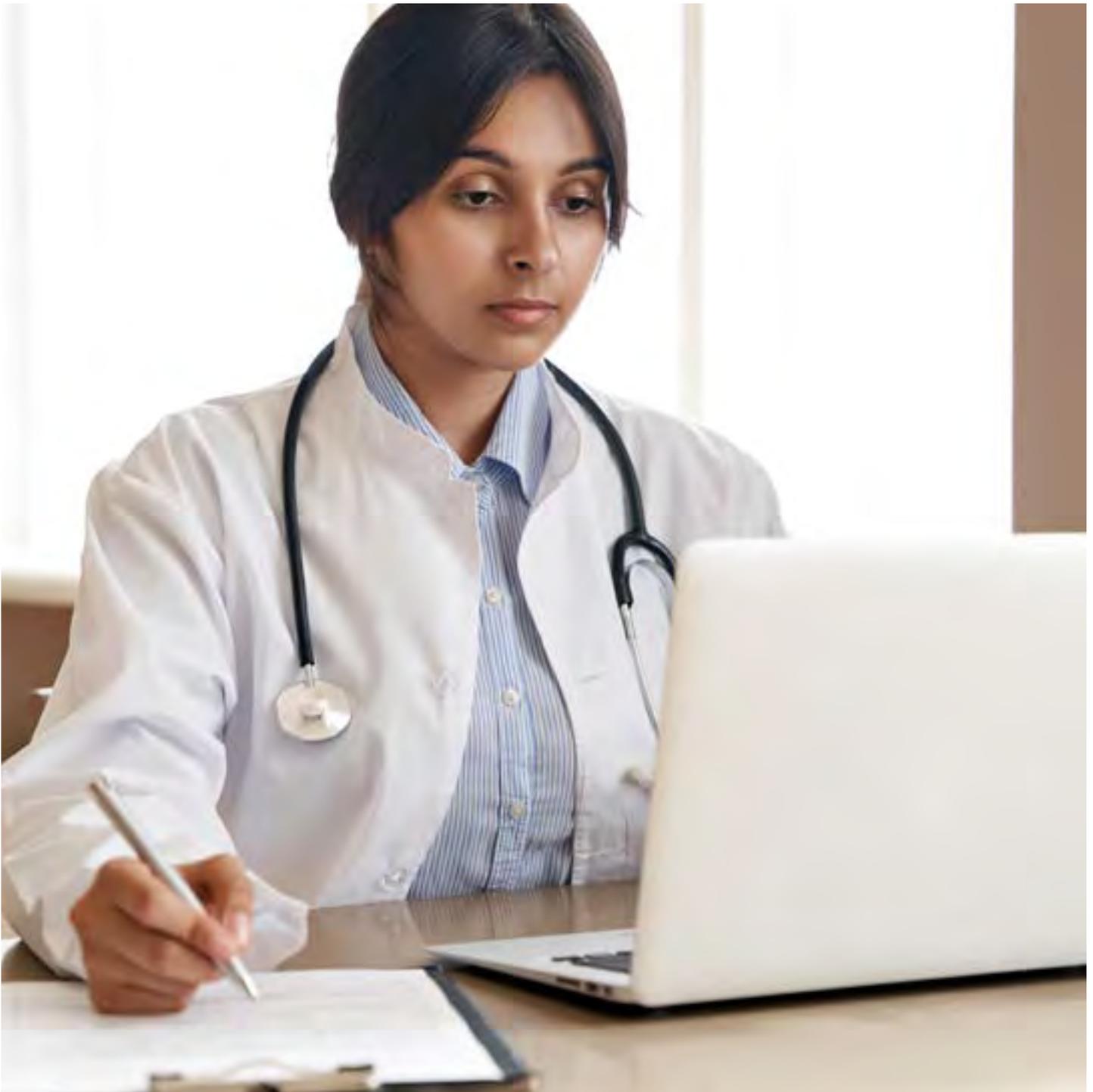


Find a Doctor, Drug, or Pharmacy

As an AmeriHealth Caritas Delaware provider, you are a part of a dedicated network that is ready to meet our members' health care needs. We'll work with you to ensure that our members receive access to the quality health care they need.

Our network is designed to provide our members with integrated care. Find other committed providers like you in the directories below.

<https://www.amerihhealthcaritasde.com/provider/find-provider/index.aspx>



Bright Start Provider Training Program

The Bright Start® program is a focused collaboration designed to improve prenatal care for pregnant Participants by promoting healthy behaviors and controlling risk factors during pregnancy, with the ultimate outcome of our Participants delivering healthy, full-term infants who will have a bright start in their new life.

<https://www.amerihhealthcaritasde.com/assets/pdf/provider/bright-start-provider-training-guide.pdf>

Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services.

- **Early:** Assessing and identifying problems early.
- **Periodic:** Checking children's health at periodic, age-appropriate intervals.
- **Screening:** Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems.
- **Diagnostic:** Performing diagnostic tests to follow up when a risk is identified, and treatment: Control, correct or reduce health problems found.
- **Treatment:** Control, correct or reduce health problems found.

<https://www.amerihhealthcaritasde.com/assets/pdf/provider/updates/072922-provider-alert-epsdt-dental-communication.pdf>





AmeriHealth *Caritas*[™]

Delaware

www.amerihealthcaritasde.com



AmeriHealthCaritasDE



@AmeriHealthCaritasDE

Follow AmeriHealth Caritas Delaware on Facebook or Instagram for event information, health tips, member information, and more. Search for **@AmeriHealthCaritasDE** on either social platform to find us.