

ABUSE-DETERRENT FORMULATIONS ARE NOT A CURE-ALL FOR THE NATION'S OPIOID CRISIS

Basic facts

- Abuse-deterrent formulation (ADF) opioids are only one part of a more comprehensive solution to mitigate opioid abuse
- FDA-approved labeling for drugs with abuse-deterrent properties does not mean that the product is impossible to abuse or that these properties necessarily prevent overdose and death¹
- Disallowing substitution of existing — and equally effective — generics in favor of expensive alternative formulations dramatically raises health care costs and does little to improve opioid abuse problems

ADF coverage mandates exacerbate state budget problems

California

A 2015 ADF coverage mandate bill would have increased employer costs by an estimated \$5.8 million and consumers' premiums by \$1.2 million, in addition to increasing costs for the state employee program and Medicaid²

New York

"[A]buse-deterrent opioid drugs are approximately two to three times more expensive on a daily basis than opioid drugs that lack abuse-deterrent properties, thus resulting in increased, and unplanned, costs to the State and consumers"³

New Jersey

A 2015 bill to mandate coverage for ADF opioids would cost the state an estimated \$11.3 million in fiscal year (FY) 2017, \$11.8 million in FY 2018, and \$12.3 million in FY 2019⁴

1 <http://www.fda.gov/newsevents/newsroom/factsheets/ucm514939.htm>

2 State of California Assembly Committee on Appropriations Fiscal Note, AB 623. (May 27, 2015).

3 Governor Andrew Cuomo, Veto of A.B. 7427-A. (December 11, 2015).

4 State of New Jersey Fiscal Note No. 3036. (July 27, 2015).



PATIENT NAME _____
ADDRESS _____

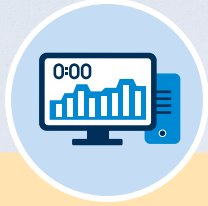
PRESCRIPTION

SOLUTIONS FOR A BETTER PRESCRIPTION



Mandatory e-prescribing for controlled substances

The adoption of e-prescribing dramatically reduces medication errors and fraud



Improve State Prescription Drug Monitoring Programs (PDMPs)

More accessible, user-friendly, better integrated PDMPs across the country will improve real-time data accuracy



Required provider check of PDMPs for controlled substance prescriptions

Prescribers should be required to check state PDMP databases when prescribing a Schedule II opioid



Stronger measures to remove or discipline rogue pharmacies

Any Willing Provider laws make it difficult for health plans and PBMs to remove from plan networks pharmacies that engage in fraudulent practices



Public education on dangers of controlled substances

Drug manufacturers should fund a campaign to warn prescribers and consumers about the inappropriate use of opioids and other controlled substances



Drug take-back program expansion

The Drug Enforcement Administration should coordinate a nationwide program with neighborhood pharmacies, local law enforcement, and community advocates