



## **KEY FINDINGS SUMMARY: OPIOID ACCESS RESEARCH PROJECT**

### **Overview:**

- On behalf of the American Cancer Society Cancer Action Network (ACS CAN) and the Patient Quality of Life Coalition (PQLC), Public Opinion Strategies conducted the following research in 2018 on the topic of proposed legislation being considered by Congress on prescription opioid medications.
- This research tells an important story about how changes that have been implemented over the past two years related to prescription opioid medications are impacting patient access. Today, patients are reporting a good deal more difficulty in getting access to their prescription opioid medications than in 2016.
- Although there is overwhelming support for the more moderate policy proposals being considered by Congress, voters also tell us it is important to ensure that patient care and access do not get worse. Those patients with a legitimate need should be able to access their opioid pain medications. It is clear from this data that voters believe the more extreme policy proposals go too far in this regard.

### **Key Highlights:**

- The changes that have already been implemented are impacting patients. There has been a decrease over the past two years in the percentage of cancer survivors and chronic pain patients taking opioid prescription medications.

### **Percentage of patients taking an opioid prescription**

	<b><u>2016</u></b>	<b><u>2018</u></b>
<b>Cancer Patients</b>	<b>43%</b>	<b>43%</b>
<b>Cancer Survivors</b>	<b>24%</b>	<b>10%</b>
<b>Chronic Pain</b>	<b>48%</b>	<b>34%</b>
<b>Other Serious Illness</b>	<b>n/a</b>	<b>18%</b>

- There has been a significant increase in cancer patients and survivors being unable to access their opioid prescriptions since 2016, when the Centers for Disease Control and Prevention (CDC) finalized opioid prescribing guidelines.

### Problems at the Pharmacy

<b><i>Among Cancer Patients/Survivors Ranked by Net Difference</i></b>	<b>December 2016</b>	<b>May 2018</b>	<b>Net Difference</b>
Have you been unable to get your opioid prescription pain medication because the pharmacy did not have the particular drug in stock?	<b>16%</b>	<b>41%</b>	<b>+25%</b>
Have you been questioned by a pharmacist about why you needed your opioid prescription pain medication?	<b>16%</b>	<b>35%</b>	<b>+19%</b>
Have you been unable to get your opioid prescription pain medication because the pharmacist would not fill it for whatever reason even though they had it in stock?	<b>12%</b>	<b>27%</b>	<b>+15%</b>

### Problems with Insurance

<b><i>Among Cancer Patients/Survivors Ranked by Net Difference</i></b>	<b>December 2016</b>	<b>May 2018</b>	<b>Net Difference</b>
Have you been unable to get your opioid prescription pain medication because your insurance would not cover it?	<b>11%</b>	<b>30%</b>	<b>+19%</b>
Has your insurance company limited you to just one pharmacy to go to for filling your opioid prescription pain medication?	<b>14%</b>	<b>32%</b>	<b>+18%</b>
Has your insurance company reduced the number of times your opioid prescription could be refilled?	<b>21%</b>	<b>36%</b>	<b>+15%</b>
Has your insurance company reduced the number of pills in your opioid prescription pain medication?	<b>19%</b>	<b>25%</b>	<b>+6%</b>

- A growing number of restrictions on opioid prescribing are already impacting these patient populations.

### Impact of Opioid Prescribing Restrictions

	Cancer	Chronic Pain	Other Serious Illness
Has your doctor indicated his or her treatment options for your pain were limited by laws, guidelines, or your insurance coverage?	48%	40%	56%
Has your insurance company or pharmacy required you to only have opioid prescriptions from one doctor?	36%	25%	26%
Has your doctor refused to give you a prescription for an opioid pain medication?	35%	25%	36%
Has the pharmacist given you only part of your opioid prescription (for example: for 7 days instead of 30 days the prescription was written), and told you to call your doctor for a new prescription if you need more?	31%	18%	21%
Have you been unable to get your opioid prescription pain medication because the pharmacist or pharmacy sent you home without your prescription because they had to contact your doctor before filling the prescription?	26%	30%	22%
Has the pharmacist given you only part of your opioid prescription (for example: for 7 days instead of 30 days the prescription was written), and told you to come back if you need more?	25%	26%	26%
Has your doctor or pharmacist told you that you have been flagged in their system as a potential opioid abuser?	21%	14%	11%

## Voter Opinions on Policy Proposals to Address the Opioid Crisis

- We tested 20 different policies being considered by federal and state policymakers. The top five most supported by voters are:
  - Expanding the existing state prescription drug monitoring program databases (PDMPs) so doctors and pharmacists can check whether a patient has filled opioid prescriptions in other states (All Voters – 76% favor, 14% oppose);
  - Requiring all doctors and pharmacists to check their state’s prescription drug monitoring program database every time they write or fill a prescription for opioids to make sure their patient does not already have an existing opioid prescription from another doctor or pharmacist in their state (All Voters – 75% favor, 15% oppose);
  - Requiring patients who have gotten multiple opioid prescriptions from multiple doctors to instead now have only one designated doctor prescribe their opioid medications (All Voters – 75% favor, 16% oppose);
  - Increasing FDA (Food and Drug Administration) efforts to approve new non-opioid treatments for pain (All Voters - 74% favor, 17% oppose); and
  - Requiring health insurance plans to cover alternative ways to treat pain such as physical therapy and other non-medication treatments so these alternatives are at least as affordable for patients as opioids (All Voters - 73% favor, 17% oppose).
- Physician focus group participants also support these five policies as well as: increasing federal funding of research focused on improving pain treatment; organizing and implementing prescription drug take-back or drug disposal programs to get unused opioid medications out of medicine cabinets; and increasing the quality and availability of training for doctors and other health care professionals in pain management.
- The five individual policies that garnered the least support among voters, including two policies that lack majority support, are from the more extreme policy positions:
  - Setting a maximum limit on the quantity of opioid medication that doctors can prescribe to all patients (All Voters - 56% favor, 34% oppose);
  - Setting a limit on the number of days that doctors can prescribe an opioid medication for all first-time opioid prescriptions to 3-7 days regardless of a patient’s pain (All Voters - 51% favor, 15% oppose);
  - Requiring health insurance companies to implement limits through all of their health plans and for all patients on the number of days and the quantity for prescription opioid medications that would be covered by insurance (All Voters – 52% favor, 36% oppose);
  - Drastically reducing the overall number of prescription opioid pain medications allowed to be sold or dispensed nationally in the United States, which would make it hard for pharmacies to keep opioids in stock for patients filling prescriptions (All Voters - 43% favor, 45% oppose); and
  - Prohibiting the FDA (Food and Drug Administration) from approving any new prescription opioid pain medications (All Voters - 36% favor, 51% oppose).

***Methodology:***

On behalf of ACS CAN and the PQLC, Public Opinion Strategies conducted the research in 2018 on the topic of proposed policies being considered by policymakers on prescription opioid medications.

- April: A national online survey among N=1,816 registered voters.
- May: Two focus groups among physicians who prescribe opioids (primary care & other specialist physicians who treat patients with cancer and other serious illnesses).
- May: A national online survey among key patient populations who take or have taken opioid prescription medications.
  - N=300 cancer patients and survivors
  - N=150 patients with other serious illnesses
  - N=155 chronic pain patients

In addition, national online survey trend data is shown from research conducted on behalf of ACS CAN in 2016 among adults, cancer patients and survivors, and chronic pain patients.