



Workers' Compensation and the Opioid Epidemic: State of the Field in Opioid Prescription Management

SUMMARY

Workers' Compensation and the Opioid Epidemic: State of the Field in Opioid Prescription Management highlights the most promising policies, strategies, and practices for opioid prescription management between 2014 and 2019. The environmental scan covered approaches applied in workers' compensation programs and other health care settings, such as health insurance programs and health care systems. The supplemental resource provides detailed information on each of the reviewed studies with sort-and-filter capabilities.

The scan is a part of an ongoing study, [Workers' Compensation and the Opioid Epidemic: Analysis and Research Design Options](#), which analyzes existing evidence and identify innovative interventions and initiatives that may be relevant to the Federal Employees' Compensation Act (FECA) client/customer population and conduct analysis to generate new evidence in the field.

KEY TAKEAWAYS

- **Multi-pronged approaches involving more stakeholders and prescribing factors may be more effective than narrow ones.** State-level policies that target prescribers, pharmacists, health insurers, and patients may produce better results than policies targeting only one group.
- **Data and technology that can track and manage opioid prescribing can have advantages and may improve policy implementation.**
- **Some states and health care systems combined multiple intervention strategies.** The scan found the multifaceted approach effective in modifying opioid prescribing practices within health care systems.
- **Policies combining prescriber education with tracking and reinforcing can be effective.** For example, prescriber education was commonly paired with peer-based feedback and reinforcement.
- **Policies imposing dispensing limits can substantially reduce opioid prescriptions.**
- **Healthcare and insurance systems that adopt or enforce updated opioid prescribing guidelines** by federal and state authorities and by professional medical associations can reduce opioid prescribing rates, doses, and duration.

[SEE FULL REPORT](#)

STUDY TIMEFRAME: Review of studies published between 2014 and 2019
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