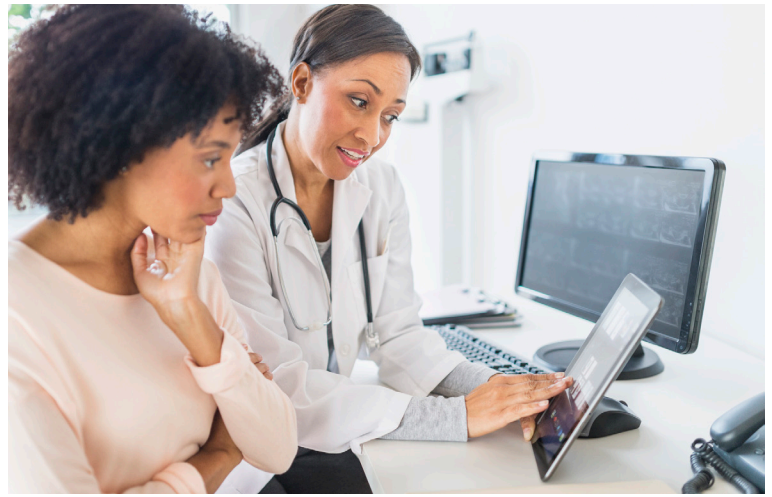




Helmsman
Management Services LLC®

Advocacy with action:

Cutting opioid use among injured workers by 40%¹



Between 2007 and 2017, deaths from drug overdoses jumped 82 percent to 21.7 deaths per 100,000 people. The U.S. Centers for Disease Control (CDC) estimates the economic cost of the opioid epidemic to total \$696 billion in 2018 alone.²

This crisis likely leaves few in our country untouched. In the industry, the impacts of opioid use and abuse on disability and recovery is well-documented, and it's clear in some cases, prescription opioids have provided a gateway to illicit drug dependency. Addressing this crisis requires advocacy and sustained, evolving action.



Protecting workers, improving disability outcomes

Helmsman's long history of injured worker advocacy includes tackling the impact of opioids in workers compensation. This is reflected in how we work to build trust with injured workers and the use of data to create actionable insights.



Investing in expertise. Looking to data scientists to update analytics and predictive models regularly helps identify at-risk patients and engage clinical resources where needed. Models recognized that opioids, psycho-social, and comorbid complexity influence outcomes. By using these models to deliver alerts to case owners and nurse teams, we better ensure needs are recognized and met.

Helmsman's medical directors design proprietary drug strategies that help ensure patients are protected from dangerous drug combinations and are prescribed medications appropriate for their injuries. This takes teamwork with our pharmacy benefit partners and concerted efforts to innovate, educate, and engage.



Improving the workers compensation system. After providing commentary to the CDC before it formulated opioid guidelines, Helmsman was the first TPA to incorporate CDC opioid guidelines into WC drug strategies. In the next two years, average **morphine equivalent dosages dropped by 11 percentage points** for customers and injured workers served by Helmsman.¹

Medical directors and WC experts also get involved with state legislatures, advocating for smart reforms — including evidenced-based treatment guidelines and formularies. When new formularies are adopted, it's important to consider safeguards and take a patient-centric approach to anticipate and diminish unintended consequences.

¹ Managed Care Analytics team, July 2019

² The Centers for Disease Control and Prevention National Center for Health Statistics, "The Role of Opioid Prices in the Evolving Opioid Crisis," April 2019.



Advocating for injured workers.

Helmsman routinely measures the quality of care delivered by medical providers. Effective steps include evaluating prescribing patterns (including early opioid scripts and dosage) and pinpointing early diagnostic testing that could lead to unnecessary surgery. Then, put this data to work by sharing it with doctors to implement corrections as needed. In 2018, Helmsman's interventions **lowered the prevalence of high-morphine equivalent dosages (>450 MED), to the point where 60-91 percent fewer injured workers received them.**¹

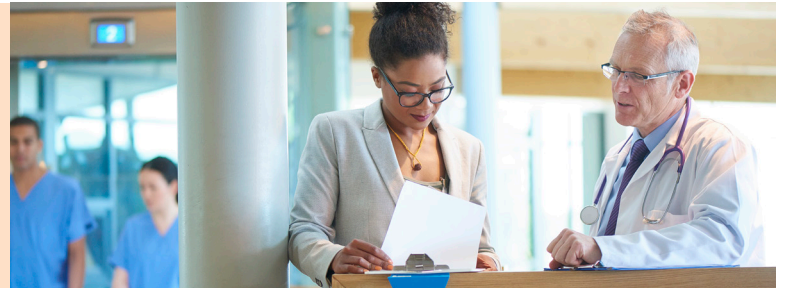
Once injury has occurred, it's critical to do what's right for the injured worker. This starts with caring, empathetic case owners and nurses. It also calls for plain language that makes it easier for injured workers to navigate care and recovery ([learn more here](#)). Additional effective strategies include listening carefully to identify

potential barriers to return to work, educating workers on the risks of opioids, discussing care with providers, implementing real-time pharmacy alerts, and exploring safer alternatives and weaning programs, to continually keep what's best for injured workers in mind.

Medical directors play an important role in advocating for workers, by connecting and intervening with their peers continually throughout the year. At Helmsman, thousands of interventions led to an **18 percent drop in opioid prescriptions** (45 percent in acute, 13 percent in chronic cases) and a **19 percent reduction in average MED** (60 percent for acute, 15 percent for chronic cases).¹

There is another opportunity to stand up for workers when care, recovery, and a case reach resolution. Medicare teams can systematically review drug utilization to ensure medications — including opioids — are well-documented, necessary, and mitigated.

These varied actions all have a place in advocating to help protect injured workers from the dangers of opioids and reducing the negative impact they can have on recovery. These efforts serve employees and customers alike — both rely on a healthy, capable workforce to secure the future.



The importance of individual attention and care at the right time

A recent case illustrates that advocacy with action means being ready to help the injured worker at any time during recovery. This case involved a 66-year-old with chronic lower back pain who started taking opioids early in the claim. He ended up in long-term pain management with a very high MED of 830. (The current CDC recommendation is 90 MED or lower.) His pain level remained significant despite the opioids, and his treating provider felt the treatment plan was “working perfectly.”

We connected with the injured worker to explore his interest in an inpatient detoxification program near his home in New York. Our nurse case manager and medical director recommended an interdisciplinary functional restoration program. Upon admission he was taking a high dosage of opioids, and after a successful stay he was discharged with reduced pain and no opioids, with gabapentin prescribed for pain and amitriptyline for sleep. We got the best “thank you” possible when he told us, “I feel like I have my life back.”

Action equals progress!

Over the past three years, Helmsman customers have seen positive changes, with more protection for injured workers, and a healthier financial picture. Consider these statistics¹:

- 40%** fewer injured workers have received opioids
- 42%** fewer opioid prescriptions
- 39%** fewer opioid prescriptions in the first 90 days following injury
- 43%** lower morphine equivalent dosage of opioids

This data and these actions are meaningful. Opioid use is correlated with an increase of days in disability by an average of 69 days, and triple the likelihood for surgery — which further underlines the importance of advocacy and action.¹

¹ Managed Care Analytics team, July 2019

