

## NIHA A Community for Healthcare



## An Integrated Medical Home's **Efforts to Combat Opioid Abuse**

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Omar A. Baker, M.D., F.A.A.P.

Co-President Chief Quality & Safety Officer Director, Performance Improvement

## **About Riverside Medical Group**

#### **Quick Facts**

- Started over 35 years ago
- Over 70 locations in Bergen, Hudson, Essex, and Passaic Counties
- Secaucus HQ open 365 days a year from 7 AM – Midnight including all major holidays.
- Extended Office Hours
- 100% Board Certified Medical Providers
- Accepts All Major Insurances including Medicaid!

#### **Specialties**

- Adult Medicine
- Allergy & Immunology
- Behavioral & Mental Health
- Cardiology
- Gastroenterology
- ENT/Facial Plastics & Audiology
- Ophthalmology
- Pain Management
- Pediatric Developmental
- Pediatric Gastroenterology
- Pediatric Medicine
- Physical Therapy
- Podiatry
- Pulmonology
- Rheumatology
- Sleep Medicine



## Riverside C.A.R.E.S Mandatory Educational Seminar

As an integrated patient centered medical home (PCMH), we continuously educate/inform our team on our mission, values, and care delivery system.

**C**ulture

Access/Accountability

Results

**E**ngagement

Satisfaction/Safety



## **Riverside Medical Education**

- Riverside provides continuous education to hundreds of medical students, nurse practitioners, and residents each year.
- Our medical providers are educating the future generation of doctors and medical practioners on the changes with an improved approach to diagnosing, managing, and treating pain.



## **Riverside Clinical Leadership**

#### Dr. Gaurang Brahmbhatt, Clinical Director of Adult Medicine:

• "The most important aspect of opioid addiction prevention is the collaboration and communication between our comprehensive care team consisting of the providers, nurses and other ancillary staff as well as community pharmacists. We always must approach patients empathetically and avoid being and accusatory in regards to their addiction which would only create a rift in their relationship with their health care team. Addiction is chronic disease just like diabetes and hypertension and deserves the same approach, time, and resources."

#### Dr. Michael Guma, Clinical Director of Rheumatology:

• "We need to stop thinking about pain as the fifth vital sign. It is not a vital sign... our entire rheumatology practice has no more than 5-10 people on a narcotic."

#### **Dr. Lenny Ramirez, Board Certified Podiatrist:**

 "Being a Podiatric foot and ankle surgeon for 25 years and possessing a degree in Pharmacology, the best pain relief that has worked for post op pain, which in my practice is musculoskeletal pain, is the use of NSAIDS which is non-addictive. I have always been in favor of utilizing NSAIDS vs. narcotics to control post op pain with tremendous success."

#### Dr. Bahar Hadjiesmaeiloo, Clinical Director of Behavioral & Mental Health:

 "People with mental health disorders are more likely to experience an alcohol or substance use disorder - including opioid use disorder. Identifying these patients and directing them towards our mental health services through the integrated system at Riverside can streamline access to mental health treatment."



## Riverside Goals in Prevention & Treatment

- 1. Prevention & Education
- 2. Minimize Early Exposure
- 3. Limit Supply
- 4. Identify At-Risk Patients
- 5. Target Chronic Pain Populations & Aid Those in Recovery



## **Riverside EMR Decision Support**

- One Shared EMR System Access to hospital, specialty, and primary care records.
- Care Everywhere Network Access to query mutual patient records from outside hospital systems.
- **EMR Best Practice Alerts** Used to aid medical providers with medical decision making. Based on evidence-based guidelines.
- **Patient Flags** Flag patients with active narcotic contracts.
- One-Click Access to the PMP Shortcut to access PMP embedded in EMR.
- CAGE-AID and Pain Questionnaires Used to screen patients annually to identify patients suffering from opioid and other drug additions
- Electronic Clinical Quality Measures (eCQM) Used to measure the Initiation and Engagement of Alcohol and Other Drug Dependence Treatment





## **Riverside Partner**



Riverside is a proud partner of the Hackensack Meridian Health Network (HMHN). Partnering with HMHN allows for a seamless inpatient partnership and further strengthens our integrated care delivery model.



## **National Recognition**



NCQA Recognized Level 3 Patient Centered Medical Home (PCMH)



CMS Comprehensive Primary Care Plus (CPC+) Participating Practice





## **PCMH Attributes Supporting**

## **Opioid Prevention**

- Physician Leadership Clinical leadership has prioritized this epidemic, by implementing protocols and policies throughout the practice.
- 2. Population Health Analytics Continuous monitoring of prescribing rates, Analysis of historical claims and clinical data to predict patients with potential opioid abuse.
- 3. Primary Care-Specialty Collaboration Specialty care available in all primary care sites. Allows for open communication between referring provider and specialty provider.
- **4. Nurse Care Coordinators** Nurses devoted to assisting high risk patients to navigate the complex healthcare system.
- 5. Community Resources Patients connected to local Substance Abuse Treatment Resources



## Evidence Based Quality Model – Donabedian Model of Care

### Structure – Quality Assurance

- Multidisciplinary Population Health Team
- Integrated Sub-Specialties Using Shared EMR System
- Clinical Medical Directors For Each Specialty

#### Process – Care Delivery

- Evidence-Based Medical Protocols
- Consistent Practice Inspections Ensuring Health and Safety

## Outcome – Quality Reporting

- Weekly Correspondence with Riverside Care Teams
- Year-round Chart Audits
- Physician Scorecards
- Manager Performance Reports





## Proactive, Protocol, Policy



#### Controlled Substances Policy

Initial: June 17th, 2016 Approved By: Dr. Gaurang Brahmbhatt

Dr. Michael Guma

Dr. Bahar Hadjiesmaeiloo

#### Purpose:

In order to prevent the nonmedical use and abuse of controlled prescription medications, Riverside Medical Group requires all providers to perform a comprehensive review of a patient's medical, prescription, and social history. In addition, Riverside requires patients to sign a Contract for Controlled Substance Prescriptions if prescribed a high risk controlled substance for longer than 30 days.

#### Policy:

- New Patients: Medical records from former treating physician must be retrieved and reviewed by Riverside provider.
- Urine Drug Screening: Must be completed when patient is first prescribed opioids. Subsequent Random Urine Drug screening is up to discretion of provider but should be performed at least every 3 months.
- 3. Before issuing a prescription, Riverside providers must access the New Jersey Prescription Monitoring Program (NJPMP) website to review the CDS prescription history of the patient. Patient information in the NJPMP is intended to supplement an evaluation of a patient, confirm a patient's drug history, or document compliance with a therapeutic regimen. To obtain access to the website, visit: NJRxReport.com
- 4. When prescribers identify a patient as potentially having an issue of concern regarding drug use, they are encouraged to help the patient locate assistance and take any other action the prescriber deems appropriate.
- Prescribe Naloxone (Brand: Narcan or Evzio) opiate antidote to patients who are at high risk of "bad reaction" to opioids. High Risk Patients include those with Sleep Apnea, Co-morbidities, and/or History of Addiction.
- Riverside Providers are not to prescribe more than a 7 day prescription for acute pain.
- If acute problem becomes chronic problem refer to Pain Management before giving long term prescription.
- Contract for Controlled Substance Prescriptions Long Term Use: At the visit when
  the first prescription is provided for a controlled substance, if long term use is
  anticipated the provider should initiate with the patient completion of the "Contract
  or Controlled Substance Prescriptions". The contract is scanned into the Epic
  medical record. labeled "CDS Contract." and noted on the Problem List.



#### PRESCRIPTION RULES

- 1. Lost prescriptions will not be replaced
- No early refills will be given.
- 3. Refill requests must be made within 7 days of running out of medication
- 4. NJPMP will be checked quarterly for patients prescribed a controlled substance.
- 5. After hours or weekend telephone requests for controlled medications will not be
- All controlled substance prescriptions should be printed and signed by the treating provider.
- 7. Encourage patients to use only one pharmacy.
- 8. The following patient behaviors will result in terminating prescriptions:
  - a. Patient fails to comply with drug testing as requested
  - Patient fails to comply with any medical evaluation(s) and/or diagnostic studies ordered
  - Does not report treatment with opoids/controlled substances by other physicians
  - d. Prescriptions patient reports to taking daily are not dected on drug screen
  - Patient tests positive for controlled substance not prescribed by this
    physician
  - f. Patient test positive for illicit substances
  - g. Misses appointments during the year without proper cancellation

#### DRUG DIVERSION

Drug diversion is the illegal distribution or abuse of prescription drugs and their use for purposes not intended by the prescriber. Riverside Medical Group expects all practitioners to take the necessary precautions to minimize drug diversion.

#### Precautions include:

- Exercise caution with patient who use or request combination or "layered" drugs for enhanced effects.
- 2. Document throughtly when prescribing narcotics or choosing not to prescribe
- 3. Protect access to prescription paper and/or pads
- 4. Keep DEA or license number confidential
- 5. Ensure that prescriptions are written clearly to minimize the potential for forgery.

"At Riverside we want to prevent disease through wellness, education, and patient-centric team based care. Sustaining and maintaining health is our mission; treating and curing disease is the last option but lets be the best and most compassionate at this."



# Riverside's care delivery model aims to be scalable, customizable, and nationally relevant.

Thank you to:

Behnaz Baker, MBA
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Health Services Manager

