



Anthony Mader
Vice President, Public Policy
Anthem, Inc.
1121 L Street
Sacramento, CA 95814
(916) 403-0522

Submitted via the eCQM Tracker JIRA website:
<https://oncprojecttracking.healthit.gov/support/projects/PCQM/>

Alice Gao
Mathematica Policy Research
1100 1st St, NE, 12th floor
Washington, D.C. 20002-4221

Re: CMS eCQM Measure “*Potential Opioid Overuse*”

Dear Ms. Gao:

Anthem appreciates the opportunity to comment on the Centers for Medicare & Medicaid Services (CMS) proposed Electronic Clinical Quality Measure (eCQM), *Potential Opioid Overuse*. As detailed by CMS, the measure seeks to assess the percentage of patients age 18 years and older who receive opioid therapy for 90 days or longer and are prescribed an average daily dose Morphine Milligram Equivalent (MME) of 90 milligrams or greater.

Anthem is working to transform health care with trusted and caring solutions. Our health plan companies deliver quality products and services that give their members access to the care they need. With over 73 million people served by its affiliated companies, including more than 40 million within its family of health plans, Anthem is one of the nation’s leading health benefits companies. For more information about Anthem’s family of companies, please visit www.antheminc.com/companies.

The opioid crisis has reached a critical point. This epidemic continues to devastate communities, demanding an impactful response. Anthem recognizes the serious need for early and accurate identification and treatment of Substance Use Disorders (SUD). We are committed to the reduction of opioid abuse while promoting clinically appropriate care. Opioids can be an effective treatment for acute pain syndromes and painful conditions when properly administered, but carry significant risks when misused. Opioid misuse, SUDs, and substance use-related conditions are chronic conditions, best managed through an integrated approach to care and services, which requires evidence-based treatment to maintain stability and recovery. Given the importance placed on evidence-based models for addressing opioid misuse and abuse, we appreciate that CMS has worked to develop a quality measure aimed at deterring inappropriate prescribing and misuse of opioid pain relievers.

Anthem supports the underlying intent of the proposed eCQM. However, in order to create meaningful, widely adopted clinical quality measures, we recommend seeking alignment with existing measures. For instance, the National Committee for Quality Assurance (NCQA) has a measure in place with similar intent; however, the NCQA measure assesses a duration of 15 days or longer at a dosage of greater than 120 MME. While we do not take issue with assessing the percentage of patients prescribed opioid therapy for 90 days or longer at a dosage equal to or greater than 90 MME, we do believe conflicting quality measures in various stages of implementation can cause confusion. In the absence of a

standardized, evidence-based measure to detect risk of opioid misuse or abuse, adding a new measure to the mix could result in confusion throughout health care service delivery systems.

Many prevention and assessment measures exist currently. These include measures such as tracking dosage levels, tracking only the duration of the prescription, and tracking prescriber history patterns identifying multiple prescribers, potentially indicating “doctor-shopping”. Further complicating matters, embedded within the varying assessment methods are different criteria, such as the level of dosage or duration.

Anthem requests that CMS look to align the new eCQM for *Potential Opioid Overuse* to one that is currently utilized, such as the NCQA measures *Use of Opioids at High Dosage* and *Use of Opioids from Multiple Provider*. Alternatively, CMS could work with the NCQA and health care delivery system stakeholders to establish a standardized measure agreeable to all and generally accepted as industry best practice based on available research. To reiterate, while we support the ultimate intent to curb inappropriate opioid prescribing practices and reduce opioid overuse, we believe for ease of implementation and to garner greater adherence to the adoption of a measure that a single, standardized measure would best accomplish this goal.

We value the partnership that we have developed with CMS, and welcome the opportunity to discuss our recommendations to develop a standardized opioid overuse quality measurement. Should you have any questions or wish to discuss our comments further, please contact Hilary Felton-Reid at 470-538-5098, or hilary.felton-reid@anthem.com.

Sincerely,

A handwritten signature in black ink, appearing to read 'Anthony Mader', written in a cursive style.

Anthony Mader
Vice President, Public Policy