

Public Testimony Registration

1 message

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Thu, May 2, 2019 at 2:33 PM

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Representing Other? Yes

Representative of: Arizona Public Health Association (501-c-3)

Non-affiliated/private?

Statement of No Conflicts:Yes

Disclosures:

Organization1/Role1: / Organization2/Role2: / Organization3/Role3: /

Organization4/Role4: / Arizona Public Health Association

Summary of Testimony: I write on behalf of the Arizona Public Health Association - one of Arizona's oldest and largest membership organizations dedicated to improving the health of Arizona citizens and communities. An affiliate of the American Public Health Association, our members include health care professionals, state and county health employees, health educators, community advocates, doctors, nurses and students. Thank you for the opportunity to comment on the Pharmacy & Therapeutics Committee's recommendation regarding the Preferred Drug List for Medication-Assisted Treatment (MAT) for opioid use disorder. As Governor Ducey correctly declared, opioid addiction and abuse constitutes a public health emergency in Arizona. While the Arizona Opioid Epidemic Act passed last year included several evidence-based interventions that will have an impact on the public health crisis over time, we believe that additional measures are necessary to improve MAT options for clinicians and patients. In the area of medication options, we believe that more should be done to improve the therapeutic options available to clinicians as they treat patients for opioid use disorder. Buprenorphine products have demonstrated clinical efficacy in treating individuals with opioid addiction. There are now several FDA approved medications which each work differently and exist in several forms, strengths, and routes of administration. Physicians treating AHCCCS members with opioid use disorder should be able to take advantage of the growing number of therapeutic options and be able to select the optimal medication in consultation with their patient. The current PDL for AHCCCS members provides one buprenorphine treatment option: Suboxone film. While this medication may be the best currently available FDA approved option for many patients, evidence suggests that other patients may respond more positively to some of the other alternatives that are now FDA approved. While "non-preferred" MAT options can be obtained by physicians via pre-authorization for Medicaid members, the process represents an unnecessary barrier to treatment. Time is of the essence when treating patients with opioid use disorder, and delays between when an individual decides to seek treatment and begins his/her regimen can reduce the likelihood of treatment success. In summary, we ask that the Pharmacy & Therapeutics Committee recommend that AHCCCS open the Preferred Drug List to additional FDAapproved MAT medications. When evaluating the list of FDA approved medications for the Preferred Drug List, we urge the Committee and AHCCCS to take into consideration the various FDA approved forms, strengths, and routes of administration as well as individual medication risks for diversion and accidental poisoning. Using those criteria, we believe the Committee can responsibly recommend an expansion of the MAT Preferred Drug List for treating

AHCCCS members with an opioid use disorder that would improve outcomes for Medicaid members with an opioid use disorder. We commend the Governor, our state legislators, and the staff at the ADHS and AHCCCS for recognizing the public-health threat posed by opioid abuse and taking concrete steps to implement evidence-based interventions to save lives. Expanding options for MAT would be an additional concrete step toward that end. Drug/Product: Medication Assisted Treatment for Opioid Use Disorders

Therapeutic Drug Class: Medication Assisted Treatment for Opioid Use Disorders

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