

## Plan sponsors urged to sound ‘early-warning bells’ about opioid addiction



Jacqueline Louie | November 23, 2016

The benefits industry is in a unique position to make a difference to Canada’s growing opioid crisis, according to Margaret Wurzer, senior manager of benefits and product development at Alberta Blue Cross.

“We really have a place in sounding early-warning bells before a problem develops in terms of addicted members,” said Wurzer, noting the significant role played by illegal fentanyl in the opioid crisis. “The reality is that when patients get started on narcotics, there is a risk they will become addicted, and some of those addicted patients are turning to street fentanyl.”

People can become addicted to opioids after an initial prescription for a narcotic by a doctor to treat a legitimate pain condition, she told *Benefits Canada*’s Calgary Drug Trends Summit on Nov. 2.

**Read: [Navigating the drug approval labyrinth to ensure access to new medications](#)**

According to the federal government’s 2015 tobacco, alcohol and drugs survey, 13 per cent of Canadians used narcotic pain relievers in the past year and approximately two per cent of that group reported abusing them. Based on those statistics, Wurzer expects that for a benefits plan serving 1,000 members, there would be a risk of three of them abusing narcotic pain relievers.

She encourages plan sponsors to think carefully about their coverage policies, be aware of narcotic risks in their benefits plans and look for claim patterns that raise a concern.

“Look at how we’re covering narcotics on our plan,” said of the role of plan sponsors. “It may provide an opportunity early on to detect somebody on a trajectory toward opioid misuse or addiction.”

**Read: [A patient perspective on access to treatments](#)**

To that end, Wurzer suggests plan sponsors can establish a clinical threshold for coverage. “Once a person hits that limit of use, you could potentially put them through a special authorization process,” she said. “By doing that, you may flag for the prescriber the level of use by that individual, which may allow a physician to do a reassessment and engage in dialogue with the individual.”

For someone with an addiction to opioids, the key is to get help. And for plan sponsors, that means getting an addicted person access to treatment, said Wurzer, noting there are very effective medications available to assist. “Plan sponsors should make sure that plan members suffering from addiction have access to evidence-based treatment, which could also include detox, rehabilitation and possibly counseling.”

Particularly effective, she added, is putting people onto medication-assisted treatment using drugs like methadone or suboxone that show the best evidence for recovery.

**Read more articles from the [Calgary Drug Trends Conference](#)**