

California Prescription Drug Overdose Prevention Initiative

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The California Department of Public Health (CDPH) seeks to launch an intensive, multipronged approach to reduce improper opioid prescribing and use. This **California Prescription Drug Overdose Prevention Initiative** will expand efforts initiated by CDPH's Director's Prescription Opioid Misuse and Overdose Prevention Workgroup to address the prescription drug overdose epidemic. The workgroup includes CDPH, the Departments of Health Care Services (DHCS), Justice (DOJ), Education, Corrections and Consumer Affairs, California State Board of Pharmacy, Medical Board of California (MBC), Dental Board of California, Division of Workers Compensation, Emergency Medical Services Authority; with support from external partners, including University of California Davis Medical Center (UCDMC), California HealthCare Foundation (CHCF), San Francisco Department of Public Health (SFDPH). CDPH and its partners are poised to build upon the many activities underway in the state. The California DOJ's Controlled Substance Utilization Review and Evaluation System (CURES - the state's PDMP) is upgrading and preparing for the enactment of mandatory registration. The MBC released its Guidelines for Prescribing Controlled Substances for Pain. Naloxone is now available in MediCal's formulary and can be dispensed by pharmacist without prescription. There are also active coalitions in several counties (e.g., Shasta, Marin, Orange, San Diego, San Francisco) and statewide groups (e.g., CHCF) working on safe prescribing practices.

CDPH's Initiative is responding to two priority strategies: 1) Enhancing and maximizing PDMPs; and 2) Implementing community or insurer/health system interventions. CDPH and its multiple partners are poised to develop and pursue four interrelated strategies: a) broad enhancement and promotion of California's existing CURES; b) engagement of health insurance plans (e.g., Medi-Cal plans), health departments and health care systems to review current policies and practices and implement safe prescribing changes; c) targeted educational outreach to physicians and pharmacists in select high-burden regions to reduce over prescribing; and d) support to strengthen the capacity of local prescription drug prevention coalitions in targeted high-burden communities to implement community based prescribing safety initiatives. The Initiative will conduct in-depth surveillance of prescription drug use, overdose risk, and health outcomes. Using de-duplicated, de-identified CURES and state health data, CDPH will expand the capacity of health departments, health insurers, health systems and coalitions to access and disseminate data on prescribing and dispensing patterns and consequences.

CDPH and UCDMC will implement a robust process and outcome evaluation plan to evaluate program activities. Key outcomes include: 1) Increased registration and use of CURES proactive reports; 2) Increased engagement with health plans, health care systems and health departments on policy and practice changes; 3) Heightened effectiveness of prescription surveillance efforts; 4) Increased safe prescribing practices and decreased improper opioid prescriptions; and 5) Decreased prescription opioid and heroin morbidity and mortality.