

Cigna Promises to Cut Opiate Prescriptions by 25 Percent



By Lila Abassi — May 20, 2016



Opioids via Shutterstock

Our compassion for someone else's pain has landed us in the hot seat. We find ourselves with [2.1 million Americans](#) ^[1] with some form of opiate-related substance use disorder as of 2012, as well as 467,000 heroin addicts. This compassion has created a monster that has contributed to the quadrupling of unintentional overdose deaths since 1999. Non-medical use of opioid pain medication and heroin abuse in the United States seem to go hand in hand.

Obviously, given our current state of affairs, there is hysteria-level panic among the government and policy makers to come up with a solution to this crisis. The problem is there is never going to be the perfect solution, and some people will suffer the consequences of increased prescribing restrictions. And doctors will have to bear the brunt of the responsibility that other players in healthcare, not just doctors, helped to create.

[Cigna](#) ^[2], a health insurer, has vowed to stand with the Center for Disease Control and Prevention as a joint force in battling addiction to pain killers. Cigna vows to cut customer prescription for opiates by 25 percent over the next three years. In addition, it will require doctors to check state databases for high-risk patients when needing to prescribe opioid analgesics for more than 21 days.

The idea of health insurance companies stepping in to demand changes in how physicians prescribe is essentially another ploy to cut reimbursements for those who cannot comply. Doctors will have to wait and speak with a representative of the insurance company to jump through their hoops for justifying prescriptions. This is inevitably going to be a major waste of the most precious resource – a doctor's time.

The focus of the battle should shift toward prevention of creating addicts by thoughtless prescribing. By trying to identify [drug-seeking behaviors in patients](#) ^[3], and utilizing government databases like [I-STOP](#) ^[4], the prescription monitoring program implemented by the state of New York, will help weed out the drug seekers. I shudder when I think about patient satisfaction scores -- a great way to hold physicians hostage by drug-seeking patients who know how to work

the system.

There should also be greater access to drug rehabilitation treatments for those struggling with opiate addictions. There needs to be a greater push to help people get their lives back on track.

I can appreciate Cigna wanting to seem as though they are backing the government to deal with the scourge that is opioid addiction. But sweeping, across-the-board cuts without working together with doctors, in my opinion, seems more like another weapon to demonize physicians while refusing to pay them. The last place decisions on patient care ought to be made is by insurance companies.

It would behoove those patients with legitimate chronic pain issues to deal with their own insurance companies ahead of time so that they don't suffer in the process.

In trying to triage our nation's painkiller addiction crisis, again, the focus needs to shift toward helping people with addictions to have access to proper drug treatment programs, as well as advocating for those patients who are in need of chronic pain management. *We need to also focus on* preventing the creation of new addicts by eliminating thoughtless prescribing and referencing prescription databases to spot drug seekers.

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[1] <https://www.drugabuse.gov/about-nida/legislative-activities/testimony-to-congress/2016/americas-addiction-to-opioids-heroin-prescription-drug-abuse>

[2] <http://www.reuters.com/article/us-cigna-opioids->

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[3] <http://www.deadiversion.usdoj.gov/pubs/brochures/drugabuser.htm>

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