

Opioid Use and Poisonings Through the  
Population Health Lens:  
A Look at The Population in San Francisco

*Phillip Coffin, MD, MIA*

*Fiona Donald, MD*

*Priya John, MPH*

*Eloycsia Ratliff, MPH*

*Jessica Shost, Pharm D*

San Francisco Health Plan  
San Francisco Department of Public Health  
University of California San Francisco

# Disclosures

## San Francisco Health Plan

Nothing to disclose

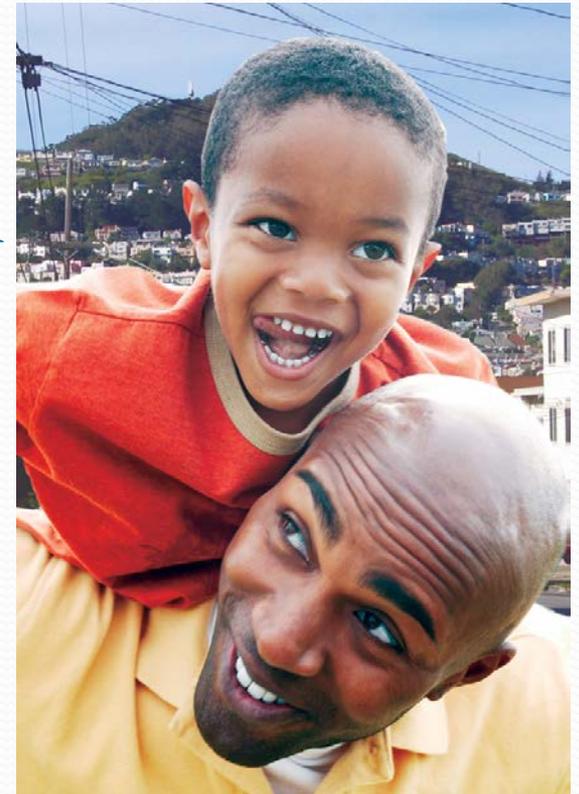
## Phillip Coffin

- Gilead – Donated ledipasvir-sofosbuvir  
NIH-funded study (2016-17)
- Alkermes – Donated ER-naltrexone  
NIH-funded study (2014-15)



# SFHP Organization Description

- San Francisco Health Plan (SFHP) is a community health plan
- Members have access to a full spectrum of medical services including:
  - Preventive care,
  - Specialty care,
  - Hospitalization,
  - Prescription drugs, and
  - Family planning services.

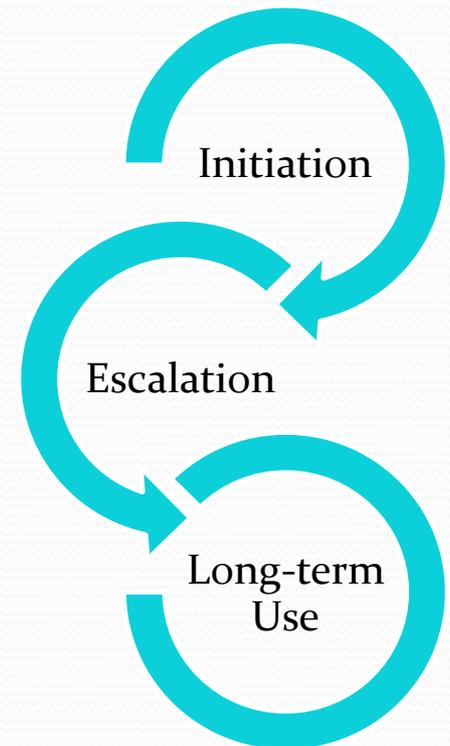


# SFHP Medical Groups – Medi-Cal



# Evolution of the Approach to Pain Management

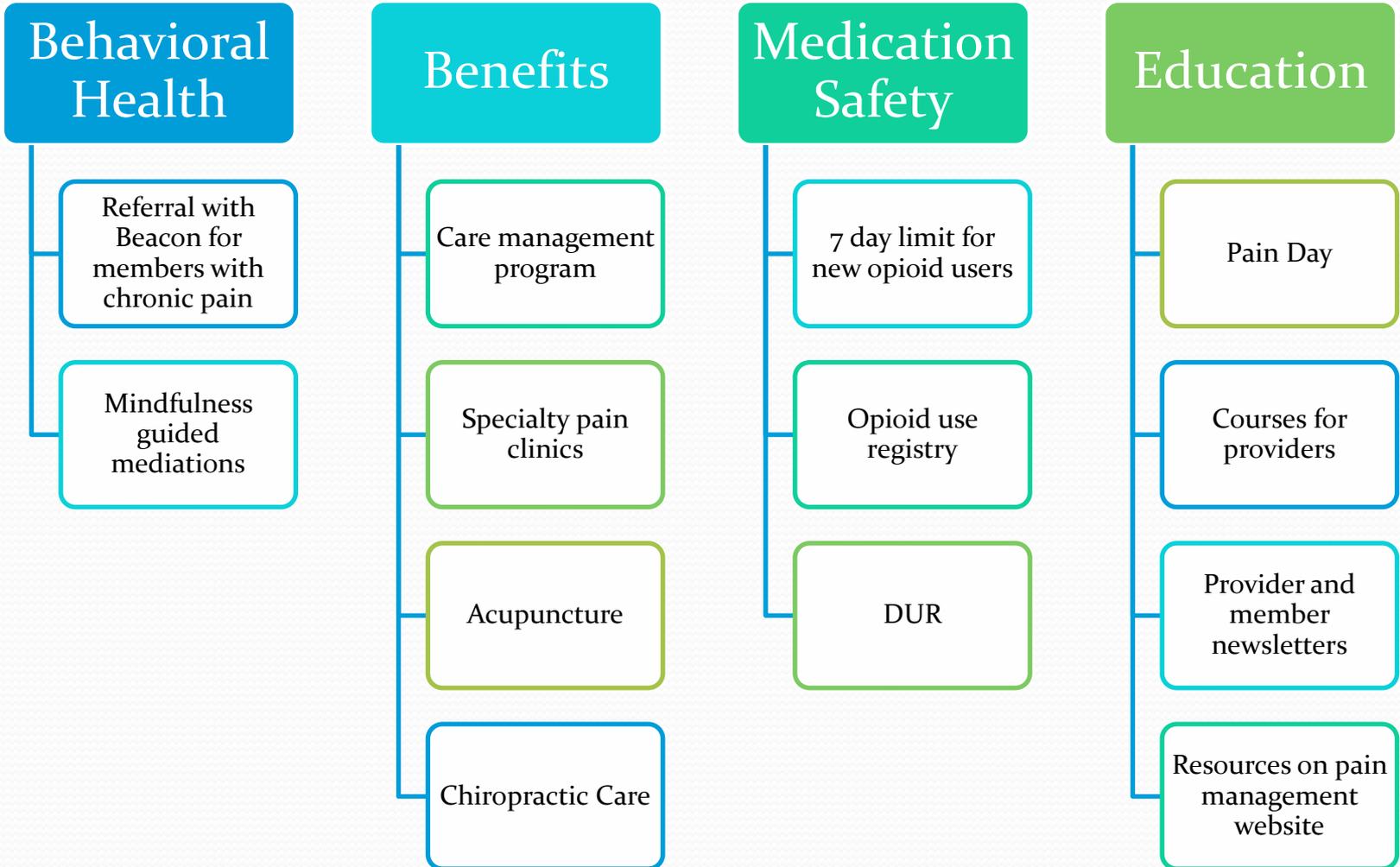
- The United States declared a Public Health Emergency in 2017 to address the National Opioid Crisis.
- According to the 2017 Annual Surveillance Report of Drug-Related Risks and Outcomes
  - 63.1% of drug overdose deaths in 2015 involved prescription or illicit opioids.
  - In 2014, opioids accounted for approximately 22.1% of emergency department visits for nonfatal, unintentional drug poisonings.



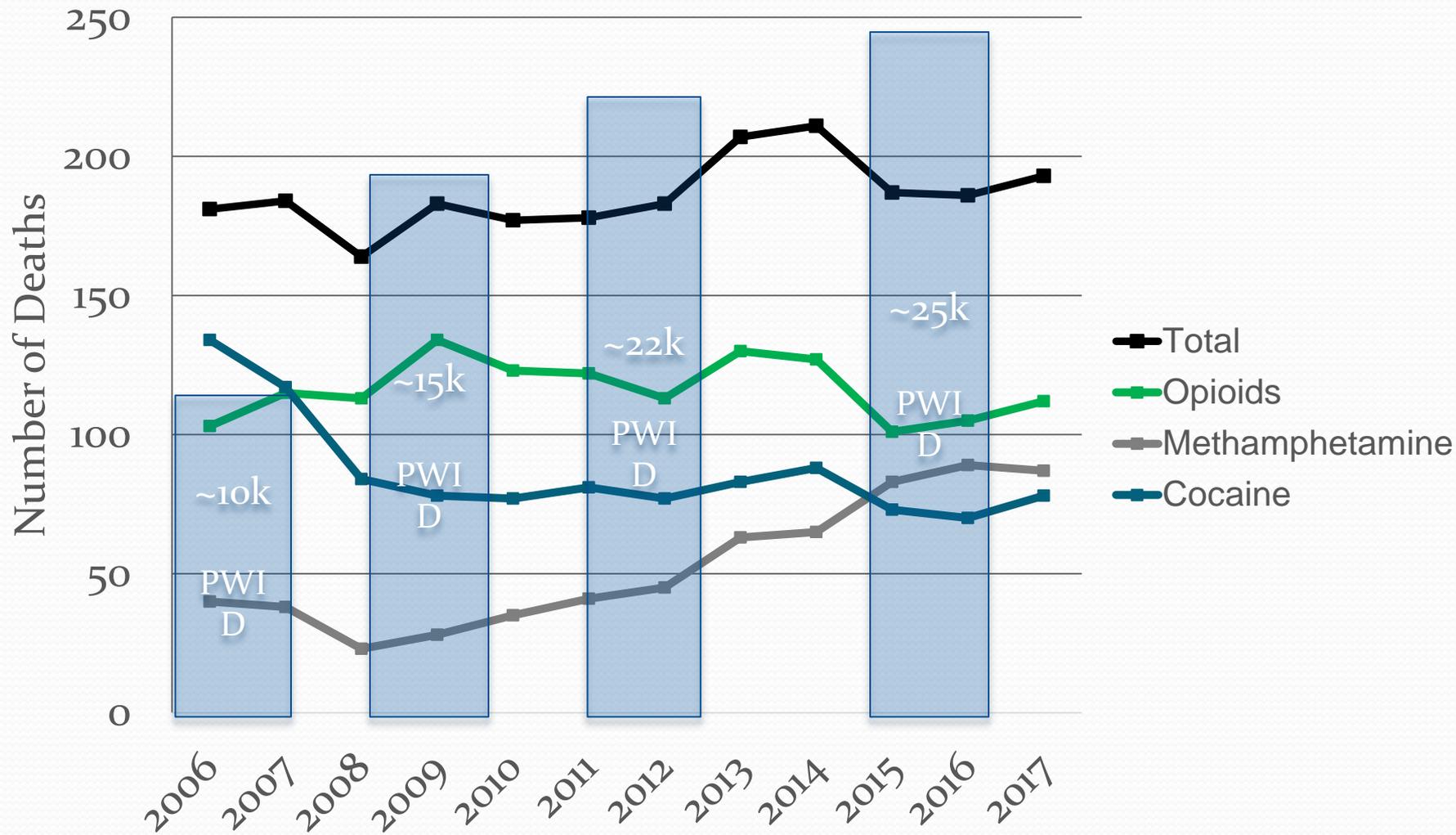
# Current National and State Efforts

- In 2016, the CDC released new recommendations for initial opioid prescriptions
- The State of California's overarching strategy to address the opioid epidemic includes five main components:
  - 1) Safe Prescribing
  - 2) Access to Treatment
  - 3) Naloxone Distribution
  - 4) Public Education Campaign
  - 5) Data Informed/Driven Interventions

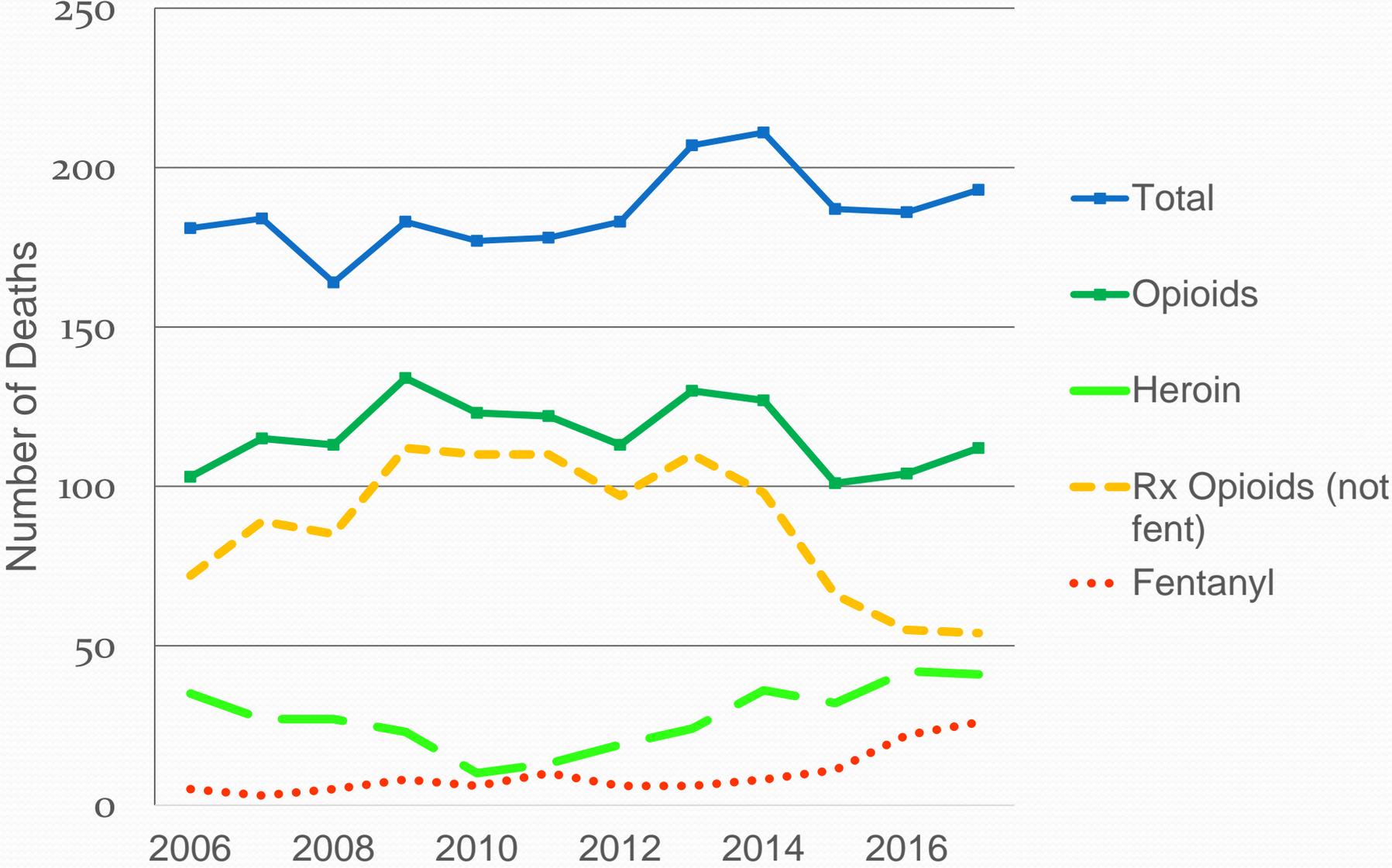
# Current SFHP Efforts



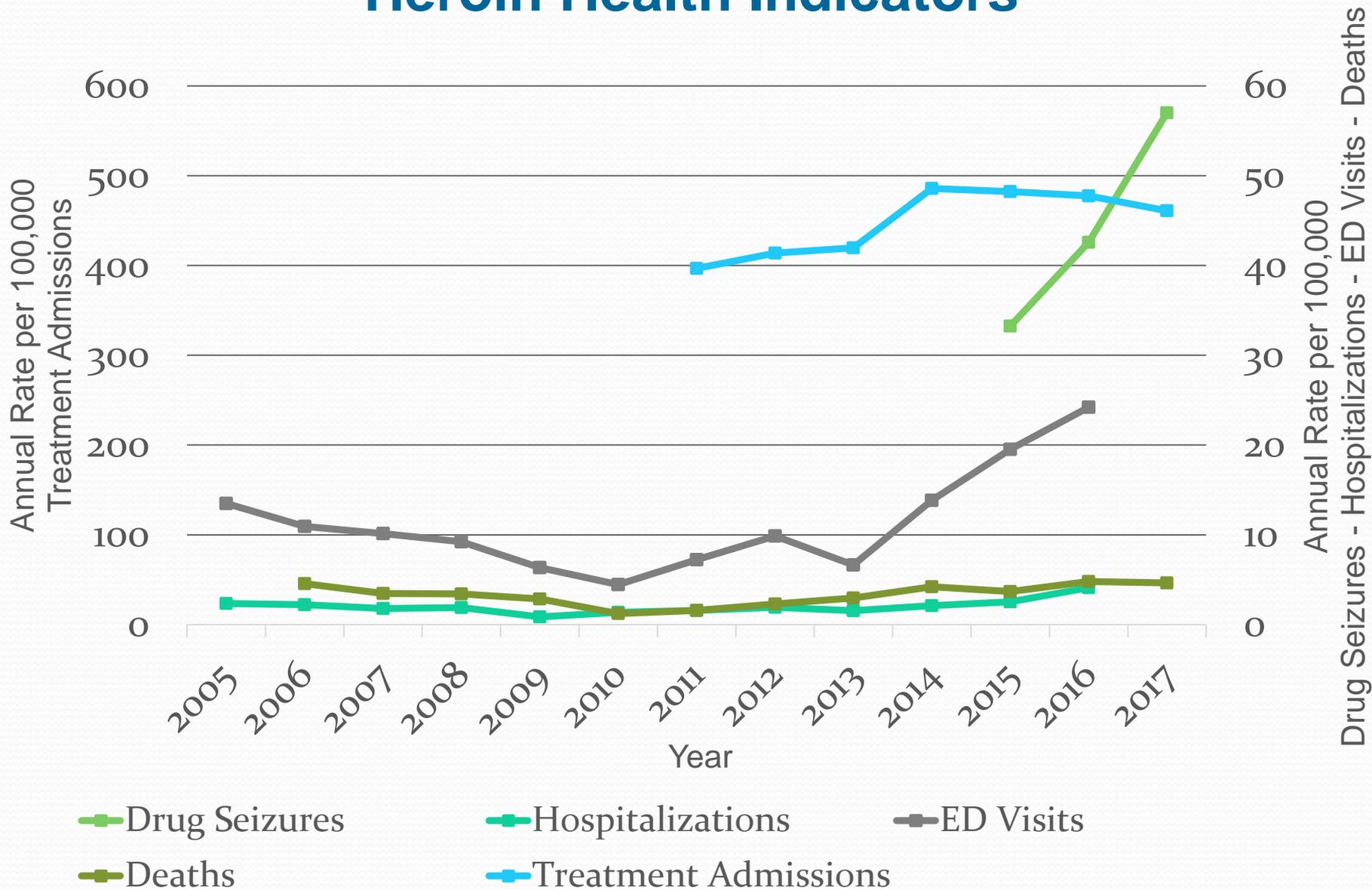
# Opioid/Meth/Cocaine Overdose Deaths in SF



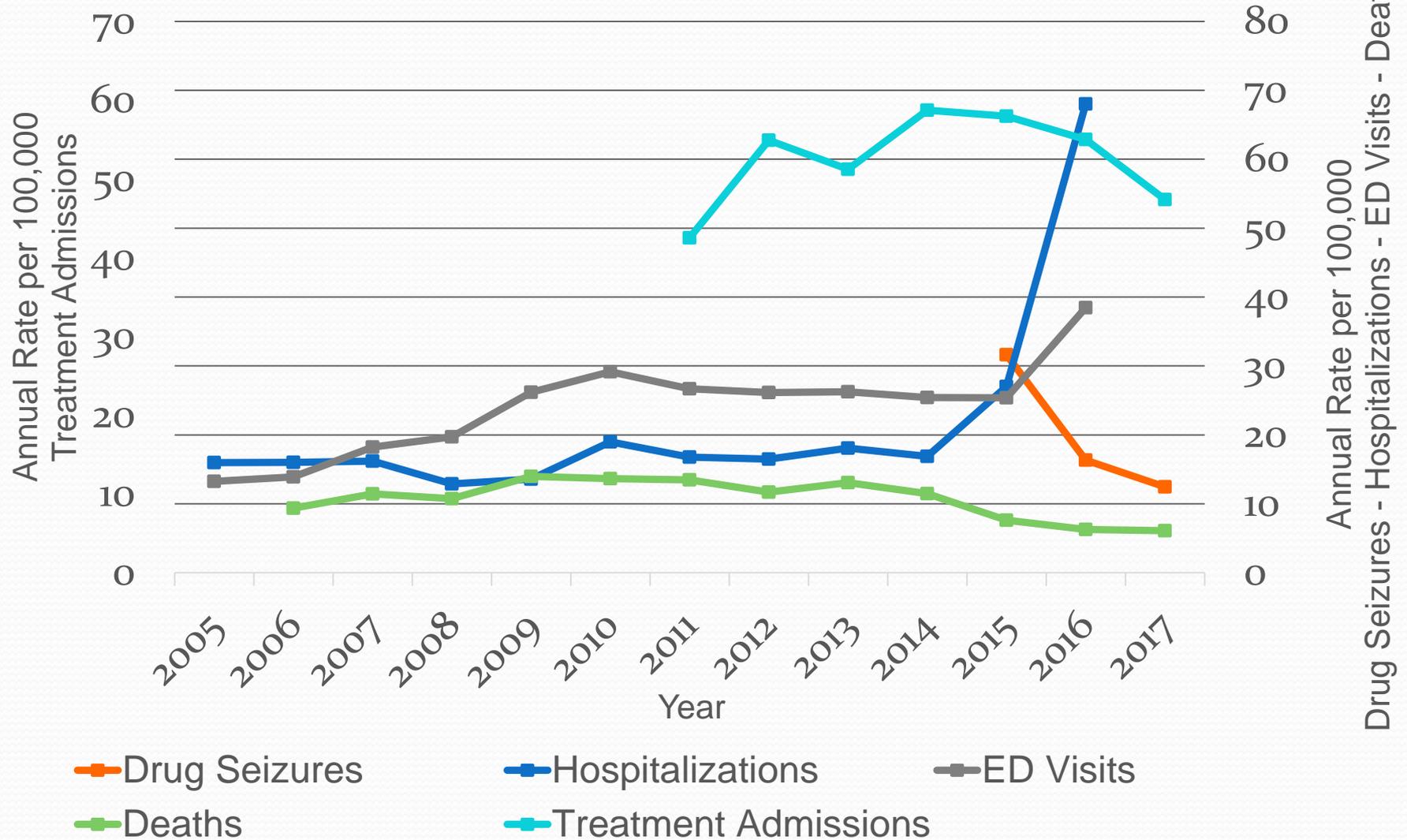
# Overdose Deaths by Opioid, SF



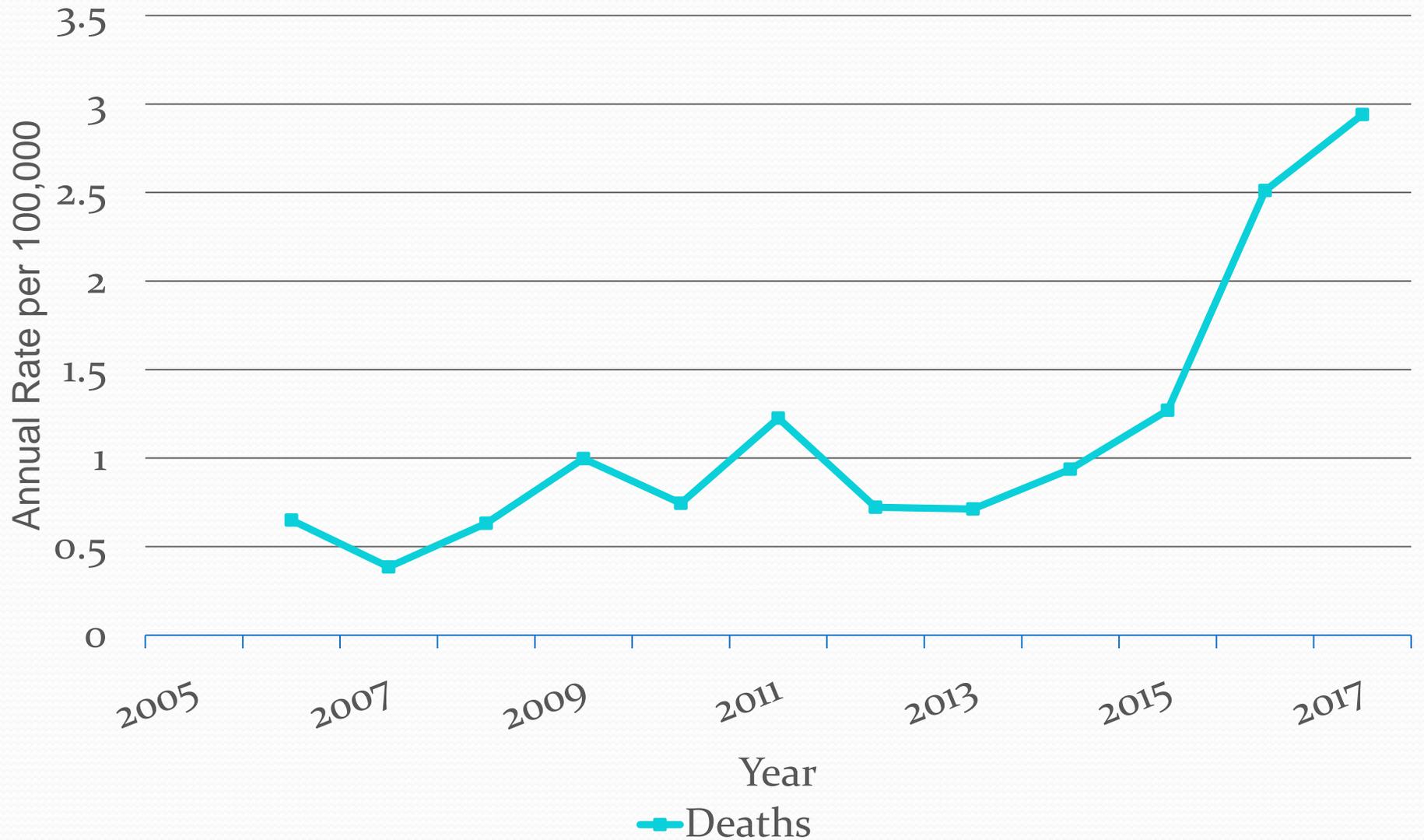
# Heroin Health Indicators



# Prescription Opioid Health Indicators

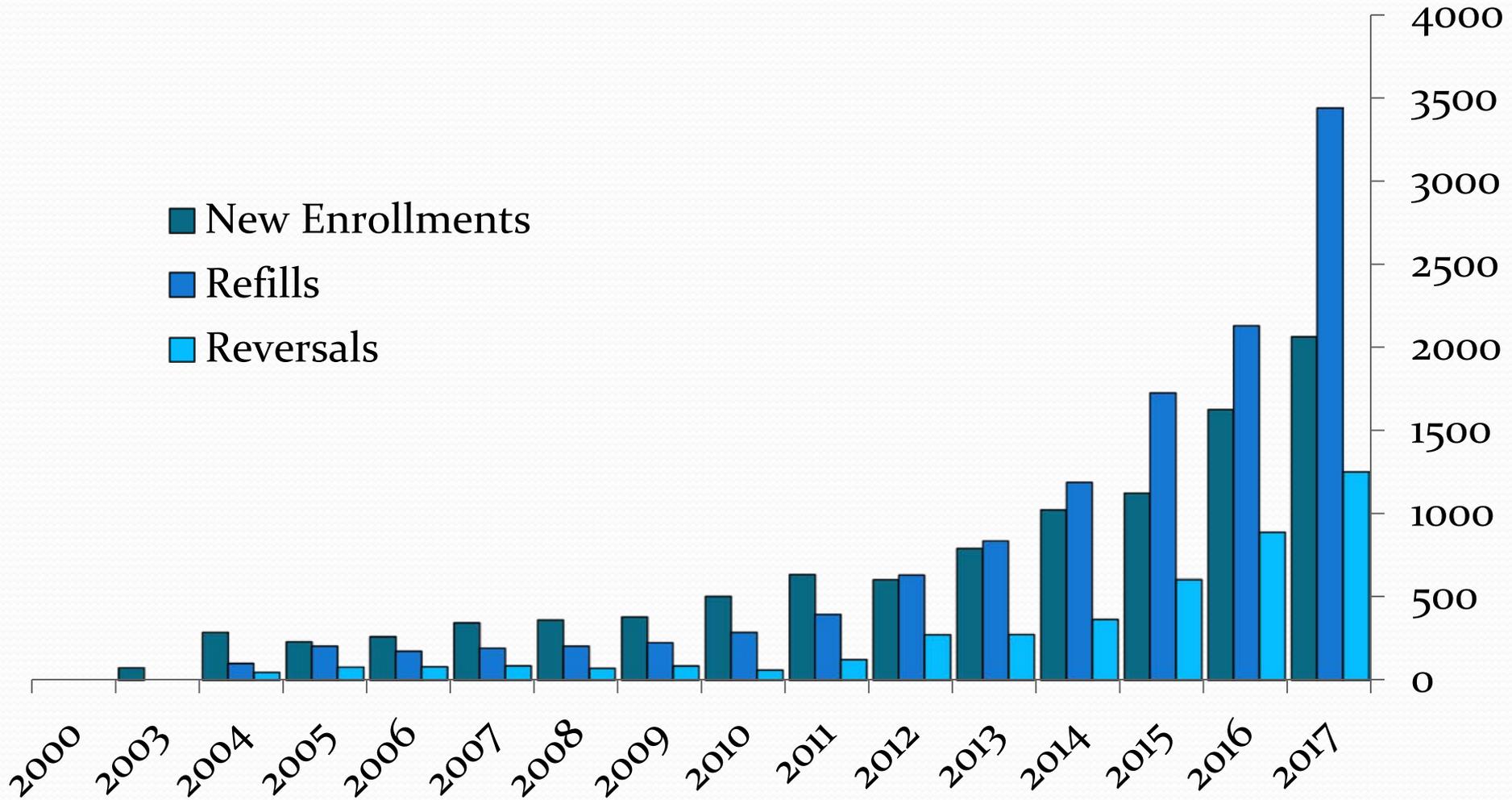


# Fentanyl Health Indicators

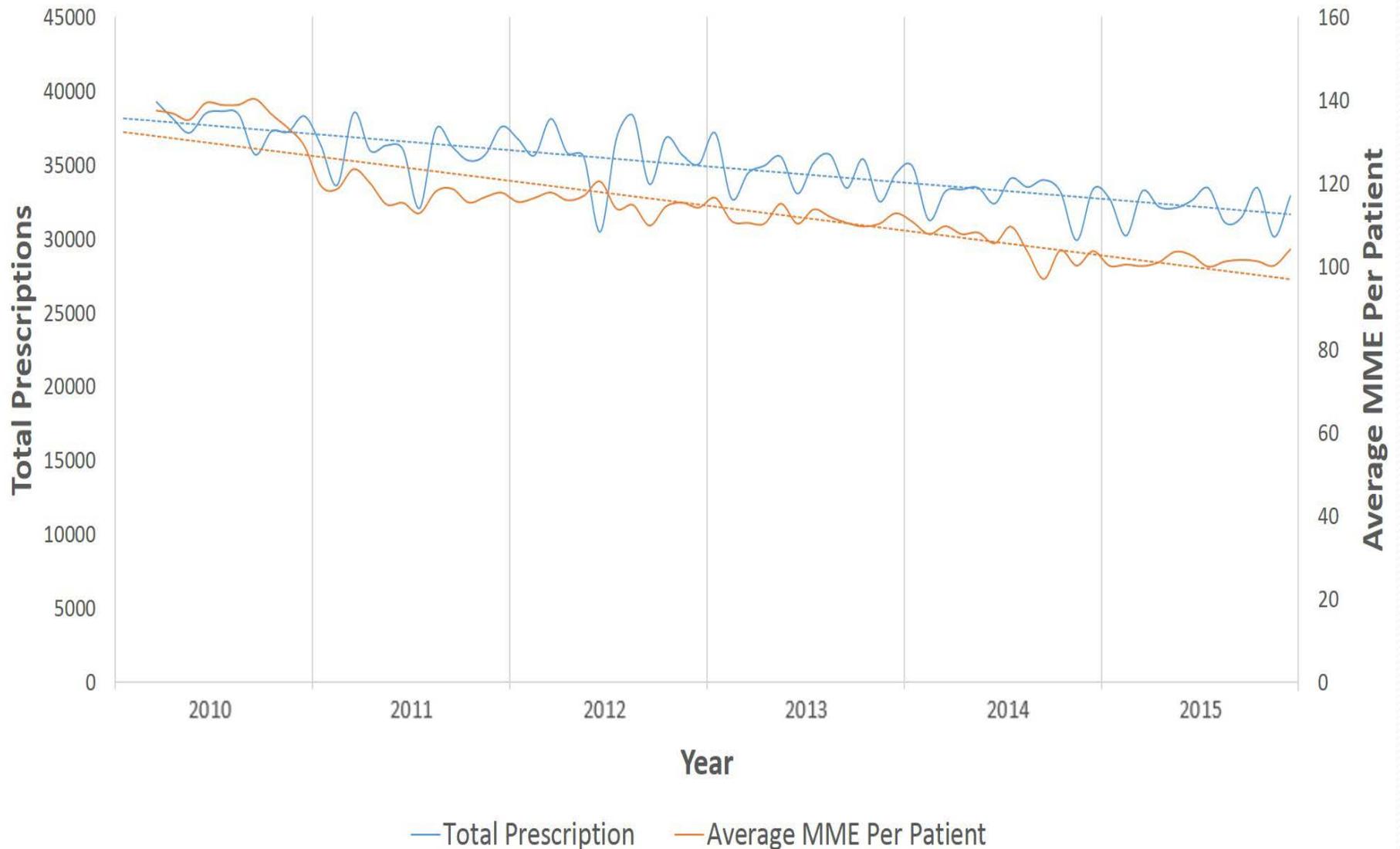


# Naloxone Enrollments, Refills, and Reversal Reports to the Drug Overdose Prevention and Education Project, 2003-2016

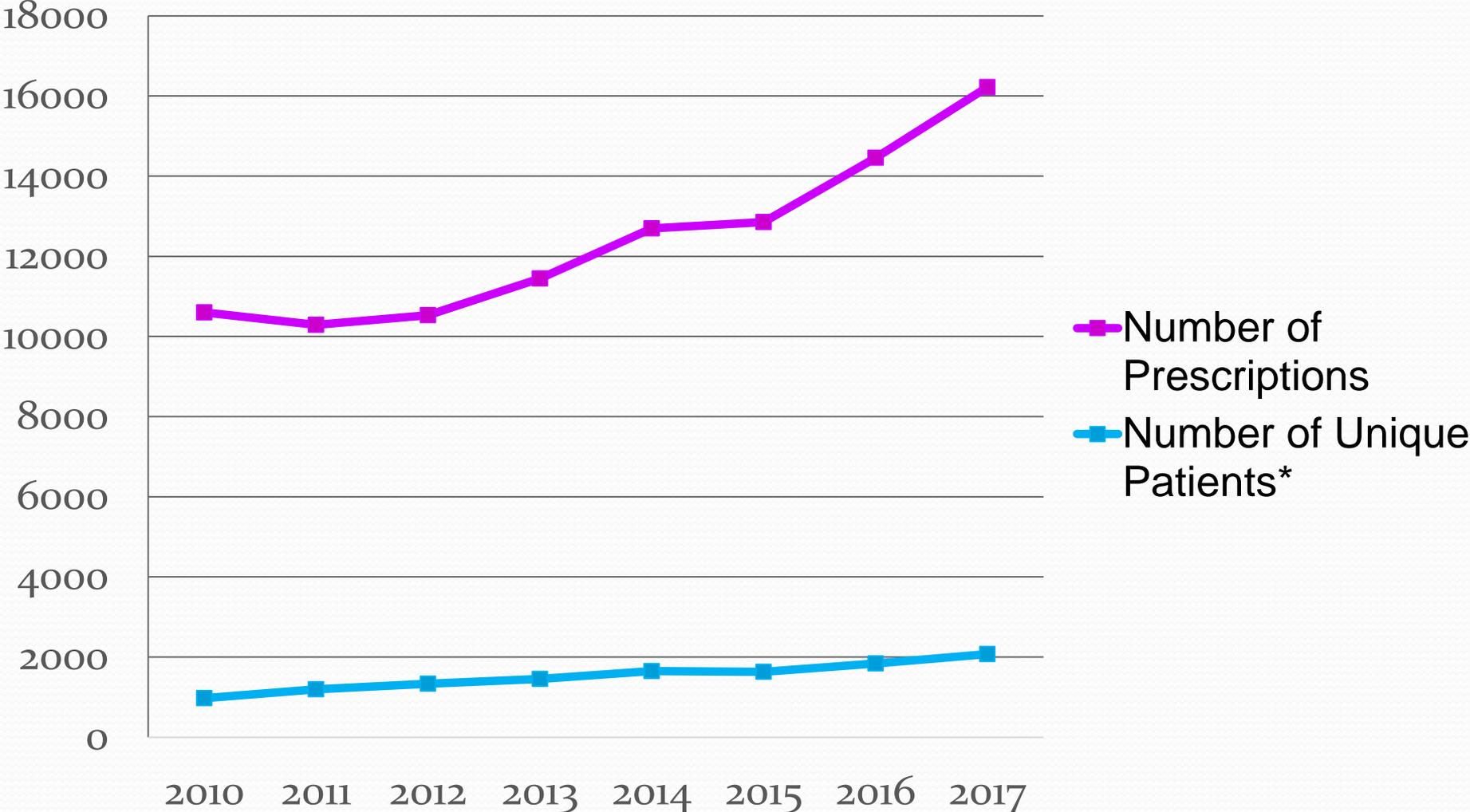
- New Enrollments
- Refills
- Reversals



# Monthly Opioid Prescriptions in SF



# Buprenorphine Prescriptions in SF



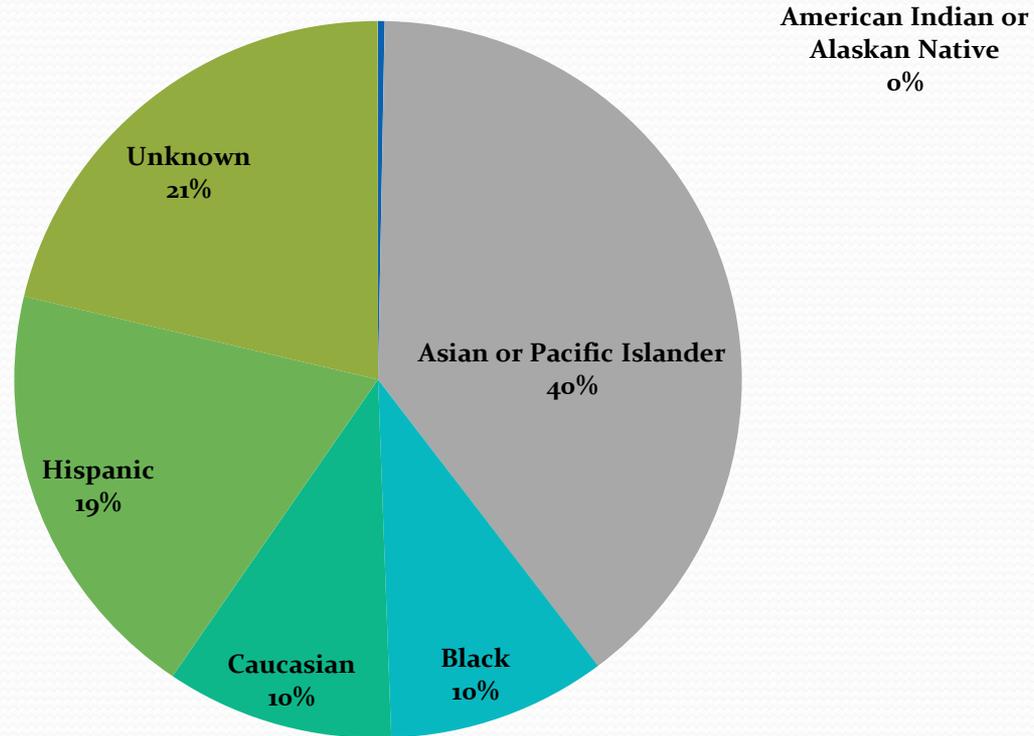
# SFHP Opioid Data Analysis

- In order to effectively compare various opiate prescriptions, SFHP has utilized Morphine Milligram Equivalent (MME) conversion factors to create opioid prescription levels. The defined prescription levels are
  - No Opioid Prescription
  - Less than 121 MME
  - Between 121 and 1000 MME
  - More than 1000 MME
- SFHP reviewed the emergency department visits as they relate to the defined opioid prescription levels.

# Membership

## Current SFHP Medi-Cal enrollment: 131,885

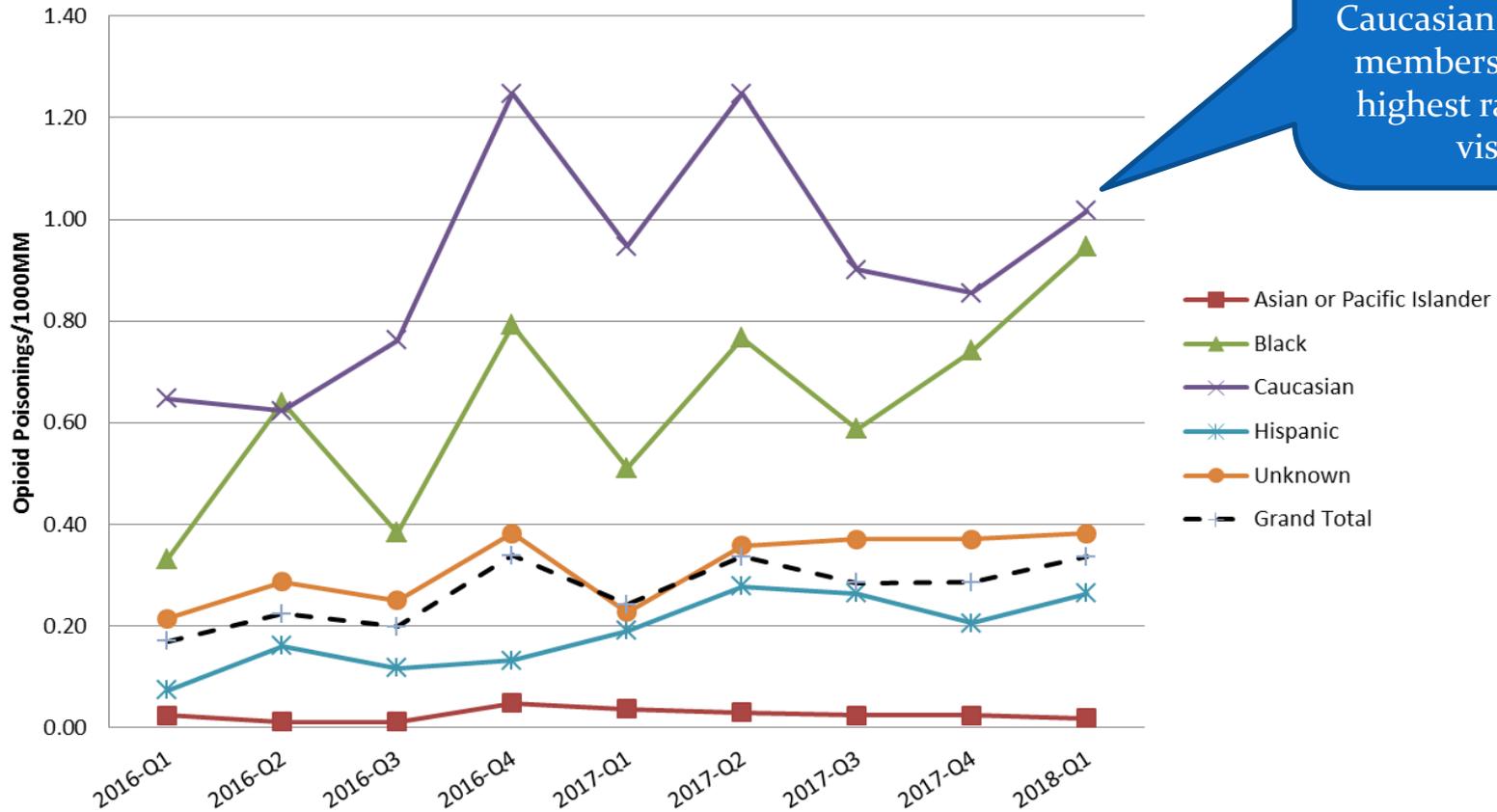
### 2018-Q1 Breakout of MC Membership by Ethnicity



\*Includes members who were active at any period in the quarter

# Opioid Poisonings by Ethnicity

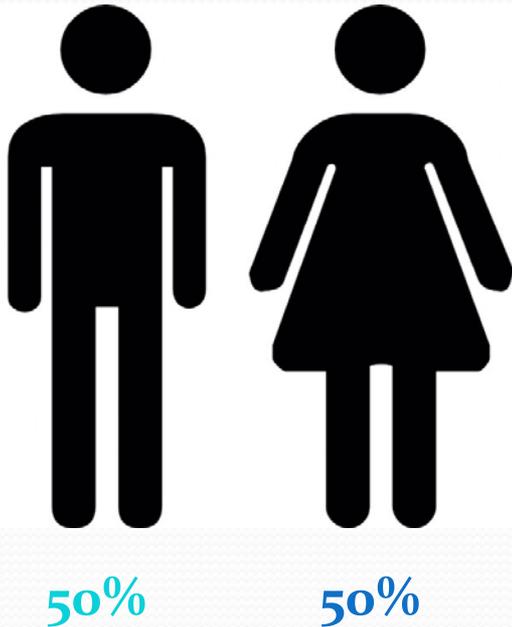
## ED Visit Related Opioid Poisonings/1000MM by Ethnicity



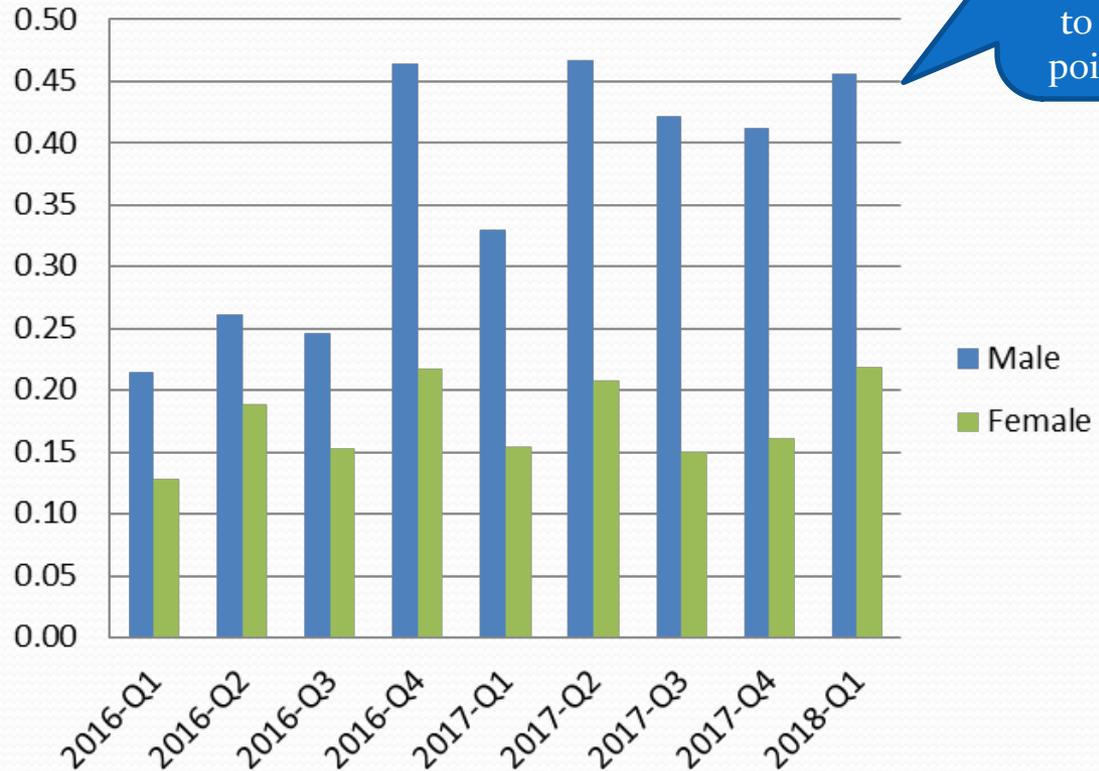
A majority of our members are Asian/Pacific-Islanders, however; Caucasian and Black members have the highest rate of ED visits

# Opioid Poisoning by Gender

2018 Q1 SFHP Medi-Cal  
Membership Breakdown by  
Gender\*



ED Visit Related Opioid Poisonings/1000 MM  
by Gender

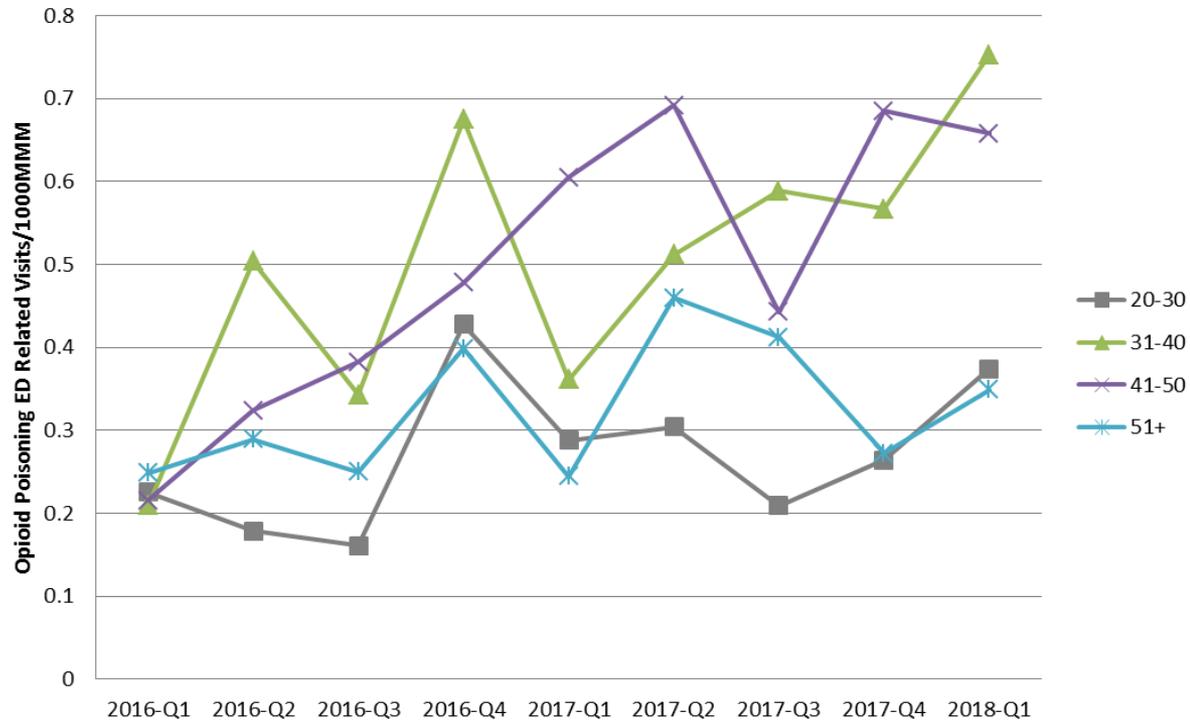


\*Includes all members who were active during the time period

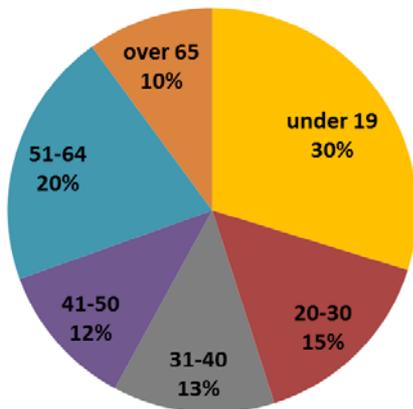
# Opioid Poisonings By Age

Although nationally the trend is younger, opioid poisonings are most common in the 31-50 age group for Medi-Cal members in SF

### ED Visits Related to Opioid Poisonings/1000 MM by Age Groupings



### 2018Q1 Breakout of Medi-Cal Membership by Age



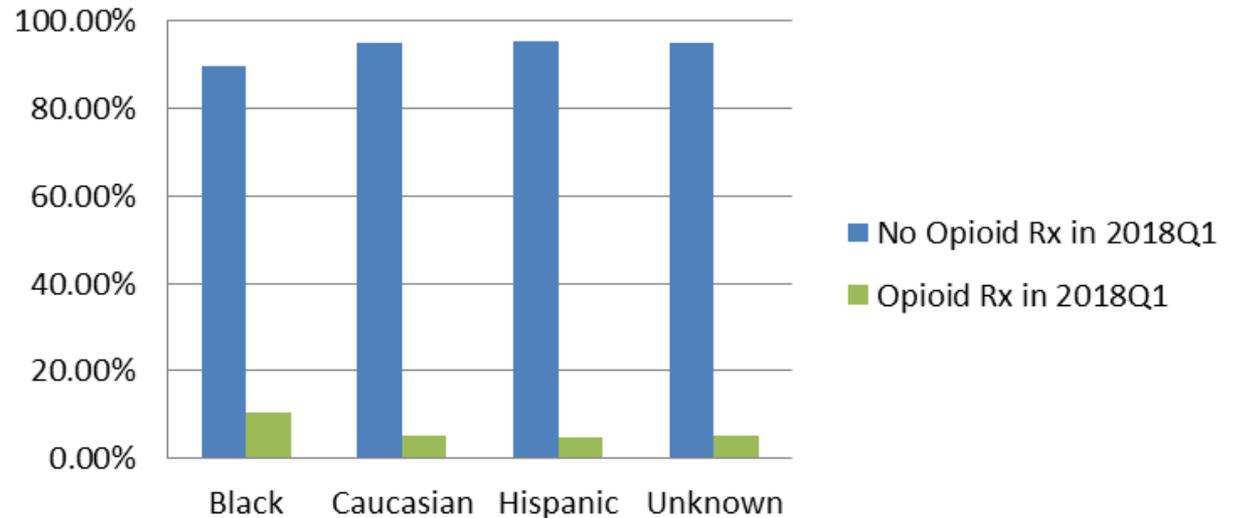
# Opioid Poisonings By Presence of Opioid Rx

Members with a Opioid Poisoning Related ED Visit

No Opioid Rx

Opioid Rx

## Percent of Members by Presence of Opioid Rx by Ethnicity



\*Includes members who did not have continuous eligibility but had to have at least 1 Opioid Related ED visit during 2018Q1.

# Opioid Poisonings By Presence of Historical Rx

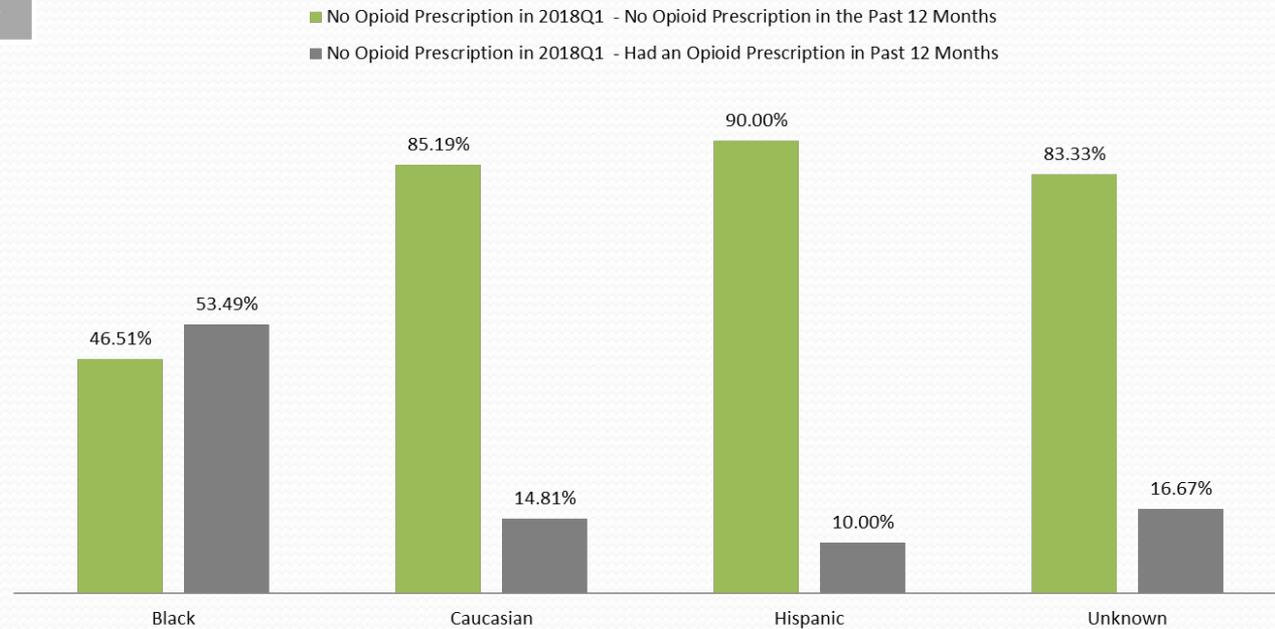
Members with a  
Opioid Poisoning  
Related ED Visit

No Opioid Rx

Opioid Rx in Prior 12  
Months

No Opioid Rx in  
Prior 12 Months

### Comparison of Members with No Opioids Who Had a Opioid Prescription in the Past 12 Months by Ethnicity



\*Includes members who did not have continuous eligibility but had to have at least 1 Opioid Related ED visit during 2018Q1.

# Data Highlights



- San Francisco has experienced an increase in the number of persons who inject drugs; however, opioid poisoning deaths have remained stable.
- Prescription opioid deaths have decreased; heroin and fentanyl deaths have increased.



- ED visits for opioid poisoning, treatment for heroin, and community use of the reversal agent naloxone have been increasing.

- Prescribing of buprenorphine has increased.



- Preliminary data from SFHN clinics suggest that opioid cessation is associated with increased illegal opioid use.



# Data Highlights



- Caucasian members are prescribed opioids at a higher rate than other racial/ethnic groups.

- Males are twice as likely to have an ED visit related to opioid poisonings as women.



- Caucasian and Black members have the highest rates of opioid related ED visits.

- Members 31-50 years of age are more likely to visit the ED for an opioid poisoning.

