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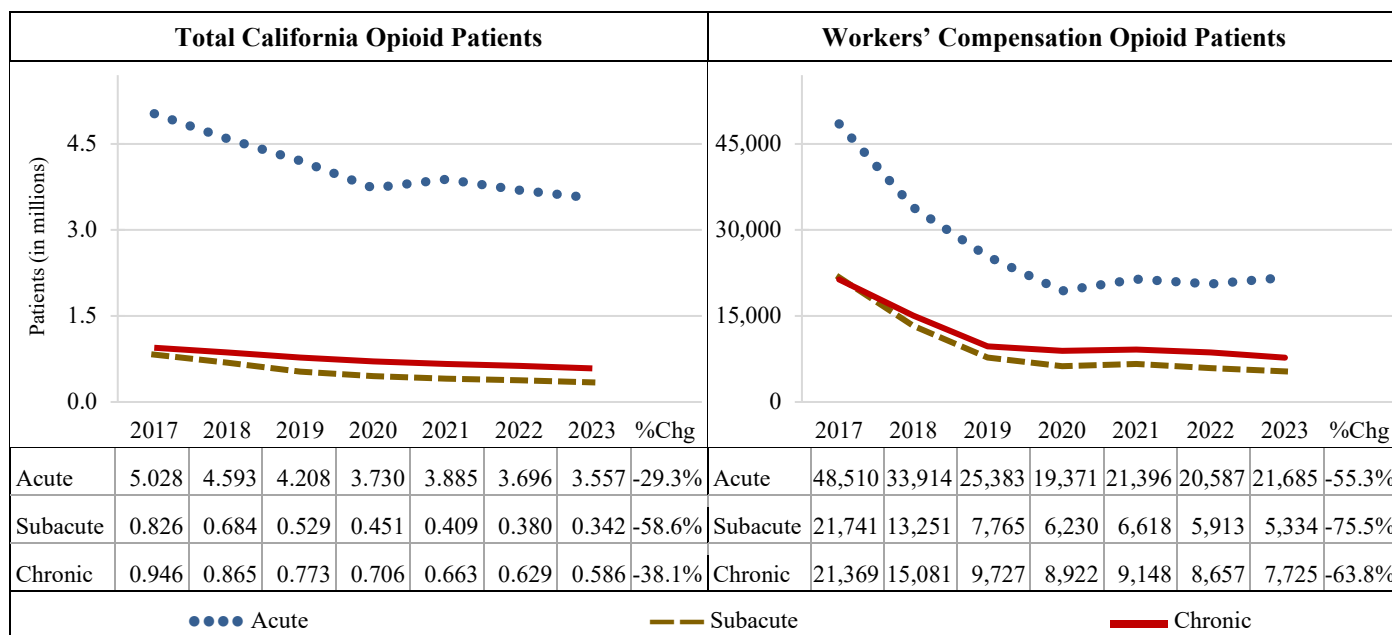
The decline in the use of opioids in California workers' compensation has outpaced the decline among all opioid patients in the state according to a CWCI analysis of 2017-2023 prescription data from the California Department of Justice's Controlled Substance Utilization Review and Evaluation System (CURES) database.

The new analysis builds on prior CWCI studies by tracking opioid utilization patterns, noting the percentage change in the number of opioid patients over the study period and changes in the average strength of the daily dose of morphine equivalents (the morphine equivalent dose, or MED) and the average duration of opioid use for workers' compensation opioid patients. Duration of use and MED level are highly correlated with addiction and the harmful side effects of opioids, including overdose and overdose-related death. The study also compares these metrics to opioid treatment guidelines to identify the proportion of patients whose opioid use exceeded guideline levels and how that proportion changed over time.

The CURES data show that nearly 22.3 million Californians were prescribed opioids between 2017 and 2023, with workers' compensation patients accounting for 242,067, or 1.1 percent, of that total. The annual number of Californians who were prescribed opioids fell 34 percent from 6.8 million in 2017 (17.3 percent of the state's total population) to 4.5 million in 2023 (11.5 percent of the population), far exceeding the 0.7 percent decline in the state's population during that period. At the same time, the number of workers' compensation patients who were prescribed opioids fell 62 percent from 91,620 in 2017 to 34,744 in 2023.

Breaking the results out by level of patient acuity the study found that the number of acute California opioid patients (< 30 days of opioid use) fell an average of 4.9 percent per year between 2017 and 2023 versus 9.2 percent per year for acute workers' compensation opioid patients; the number of subacute California opioid patients (30-89 days of opioid use) declined an average of 9.8 percent per year versus 12.6 percent for subacute opioid workers' comp patients; and the number of chronic California opioid patients (90+ days of opioid use) fell 6.3 percent per year versus an average of 10.6 percent for chronic workers' comp patients.

Number of Opioid Patients by Acuity (Total Calif. Opioid Patients vs. Calif. WC Opioid Patients, 2017-2023)



Looking at other opioid utilization metrics for workers' comp patients the study found that over the 7-year study period, the average daily morphine equivalent dose declined across all levels of acuity, falling 26 percent for chronic patients, 23.6 percent for acute patients, and 17.6 percent for subacute patients. At the same time, the proportion of new acute workers' comp patients that exceeded the recommended 50 MED per day threshold declined by 9.9 percentage points, while the proportion that was within the 20-50 MED range increased by 13.3 percentage points.

Another key utilization metric is the number of days' worth of opioids supplied to new acute patients. The proportion of acute workers' comp patients receiving opioid prescriptions that exceeded the recommended 5-day supply decreased by 8.2 percentage points during the study period, with 2/3 of that decrease occurring in 2018, immediately after the state incorporated Pain Management and Opioid Treatment Guidelines into the Medical Treatment Utilization Schedule (MTUS) and implemented the MTUS Formulary. At the same time, the average strength of opioid prescriptions dispensed to chronic opioid patients in workers' comp declined, as the share of their total days' supply that involved a morphine equivalent dose over 50 dropped from 27.1 percent in 2017 to 21.3 percent in 2023.

During each calendar year in the study period, most workers' compensation chronic opioid patients also received opioid prescriptions from other payer systems, though the percentage of those patients who received opioids from both workers' compensation and other systems declined slightly, falling from 72.1 percent in 2017 to 68.7 percent in 2023. Furthermore, over the 7-year span the total daily morphine equivalent dose (from all payers) for workers' comp patients declined by 17.1 MED, with the portion of the MED covered by workers' compensation dropping by 8.4 MED (or 24.1 percent), while the portion covered by other payers declined by 8.6 MED (or 32.6 percent).

The data also reveal that a declining proportion of workers' compensation opioid patients had prescriptions in which their days' supply of opioids from other payers overlapped with their workers' comp prescriptions. Between 2017 and 2023, the proportion of the days' supply that overlapped multiple systems fell by more than half, declining from 8.0 percent in 2017 to 3.7 percent in 2023, indicating that the reductions in opioid utilization in workers' compensation did not lead to increased opioid use in other systems.

While opioid use nationwide has declined across different health care systems, the steep decline in California workers' compensation, which the CWCI study shows exceeded the decline noted for the general population at all levels of acuity, reflects the success of reforms enacted over the past two decades. These included a mandate that medical treatment provided to injured workers conform to evidence-based standards; the addition of Chronic Pain and Opioid Guidelines into the MTUS; implementation of the MTUS Formulary; a requirement that dispensers enter prescription and patient information for opioid prescriptions into CURES within one day of dispensing the drug; and a requirement that doctors check CURES before prescribing a controlled substance to a patient for the first time and at least once every four months when continuing to prescribe these drugs to the patient.

CWCI will continue to monitor the utilization and reimbursement of opioids in California workers' compensation and report back in future studies. In the meantime, the results of the current study have been published in a Report to the Industry, "Opioid Prescribing for Injured Workers Covered by California Workers' Compensation System and Other Payers: 2017-2023." The report is available under the Research tab of the Institute's website at www.cwci.org,

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