

# A Low-Cost Intervention for Better-Informed Opioid Prescribing

## CONVERSATION WITH THE RESEARCHER



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### Q: How does this study differ from previous studies?

**A:** *The bulk of the research on prescription monitoring programs (PMPs) has focused on their effects on opioid prescribing and adverse patient outcomes like overdose. This work has been pretty mixed on the benefits of PMPs. One potential takeaway is that clinician engagement with PMPs might be a prerequisite for them to be helpful. However, there is less research on how to get clinicians using PMPs.*

*Unlike most prior studies, we use randomization to test interventions. We used that approach because it allows us to more clearly see the cause and effect of the interventions under study.*

### Q: What are the implications of this work?

**A:** *Surprisingly, of the three letters we tested, the simplest letter had the largest effects on searching and account-holding. It mentioned the new mandate to check the PMP before prescribing. Since it contained no protected health information, it's much easier to send a message like this by e-mail or postal mail. Other PMPs or health care organizations might consider using messages like this one to raise PMP engagement.*

*The results also show that the effects of the letter were very durable, lasting at least 8 months. The clinicians who searched or made accounts due to the letter would likely not have done so for 8 months or more. So this intervention could help get hard-to-reach clinicians connected with the PMP.*

## SYNOPSIS

Researchers found that letters to clinicians successfully increased use of the Prescription Monitoring Program. These findings may interest policymakers and organizations seeking to promote clinician engagement with these systems to facilitate better-informed opioid prescribing.



## A Low-Cost Intervention for Better-Informed Opioid Prescribing



**Prescription Monitoring Programs (PMPs)** are statewide databases that inform clinicians about a patient's prescription history prior to prescribing opioids



However, many clinicians still **do not use** the PMP in their state

A randomized trial of three types of letters to clinicians found that:



**Highlighting a state mandate to check the PMP** increased the number of PMP accounts created and searches for patients' prescribing history



**Letters mentioning the mandate and adding information on the risk of coprescribing** also increased accounts created and searches, but not more than the letters mentioning only the mandate



**Mentioning coprescribing risks for patients, on its own**, did not detectably increase PMP engagement

Sacarny, Avilova, Powell, Williamson, Merrick, and Jacobson, 2023

For full citation, go to [www.nihcm.org](http://www.nihcm.org)

## SIMPLE MESSAGING INFORMS PRESCRIBING

Overdoses from prescribed opioids remain high. A growing number of states mandate checking prescription monitoring programs (PMPs), which are statewide databases that allow clinicians to view a patient's prescription history, prior to prescribing opioids. However, many clinicians still do not use the PMP in their state. Letters informing Minnesota clinicians of a new mandate to check the PMP encouraged engagement by increasing the number of PMP accounts created and database searches for patients. Interacting with the PMP has the potential to aid clinicians in identifying individuals at risk of overdose and managing their care.

Letters to clinicians are an easy, affordable intervention with the potential to promote informed prescribing and improve patient safety. This study may be useful for stakeholders seeking ways to facilitate safe prescribing by increasing the use of the PMPs. It also highlights the importance of using rigorous evidence to create informative messaging.

### CITATION

A Sacarny, T Avilova, D Powell, I Williamson, W Merrick, and M Jacobson. "A Randomized Trial Of Letters To Encourage Prescription Monitoring Program Use And Safe Opioid Prescribing." Health Affairs. January 2023. <https://doi.org/10.1377/hlthaff.2022.00859>

### FOR MORE INFORMATION

For more information about this study, contact Adam Sacarny, PhD, at [ajs2102@columbia.edu](mailto:ajs2102@columbia.edu). For more information about the NIHCM Foundation Investigator-Initiated Research Grant Program, contact Cait Ellis at [cellis@nihcm.org](mailto:cellis@nihcm.org).

### KEY FINDINGS

Among 12,000 clinicians participating in the study, 3,000 were sent mandate letters reminding them about the new state requirement to check the PMP when prescribing opioids, 3,000 were sent information letters on the risk of prescribing opioids alongside benzodiazepines or gabapentinoids, and 3,000 were sent combined letters that described both the mandate and information on coprescribing risks. The remaining 3,000 clinicians served as a control group and were not sent letters.

- Compared to the control group who received no letter, the mandate letter increased the PMP search rate by 4.5 percentage points.
- The combined letter's effect was similar but slightly smaller than the mandate message alone, raising search rates by 4.0 percentage points.
- The researchers did detect an effect of the information letter on searching the PMP.
- The mandate and combined letters both increased the number of physicians registering for a PMP account.
- There were no detected effects of any letter on coprescribing, which may reflect an awareness of the opioid crisis and that risky coprescribing has decreased in recent years.

### STUDY METHODS

The study used a four-arm parallel-group design to randomize clinicians into the control arm or one of the three letter treatment arms. The treatment groups were sent initial letters in March 2021 and second letters with the same message in May 2021. Study participants were clinicians who had at least one patient with overlapping prescriptions for opioids and either benzodiazepines or gabapentinoids. Of the clinicians, 60.6% were physicians and 32.8% were nurse practitioners or physician assistants. The intervention letters were sent by the Minnesota Board of Pharmacy, which runs the state's PMP. The researchers used multivariable linear regression models to evaluate the effects of the interventions.