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Title: Access to Safer Opioid Medications

Introduced by: Domenic Federico, MD, for the Kent County Delegation

Original Author: Sandy Dettmann, MD, Cara Poland, MD, and Joshua Suderman, MD

Referred to: Reference Committee B

House Action: **AMEND**

Whereas, the opioid epidemic in our country kills nearly 100 people per day, and

Whereas, prescription opioids are the second most likely drug to be abused after marijuana,
and

Whereas, traditional opioids such as morphine, oxycodone, and methadone carry significant risk of abuse and respiratory depression, and

Whereas, traditional opioids such as morphine, oxycodone, and methadone carry a high risk of tolerance and opioid-induced hyperalgesia, and

Whereas, buprenorphine has a unique mechanism of action at the mu opioid receptor through partial agonism and is an agonist at the kappa opioid receptor, and

Whereas, buprenorphine has been proven to carry less risk of abuse and harmful side effects such as respiratory depression, opioid induced hyperalgesia, opioid tolerance, constipation, and immune system suppression, and

Whereas, buprenorphine has been shown to reduce pain scores in patients on high dose opioids, and

Whereas, tapentadol (Nucynta) is an opioid agonist pain medication with approximately 1/5 the potency of oxycodone and a multimodal mechanism of action with mu-opioid receptor agonism combined with norepinephrine reuptake inhibition and minimal serotonin reuptake inhibition, and

Whereas, tapentadol (Nucynta) has been shown to have lower abuse and diversion rates than oxycodone and hydrocodone and similar rates of abuse and diversion compared to tramadol, and

Whereas, tapentadol (Nucynta) has shown improved tolerability and lower potency than oxycodone, and

Whereas, the Medicaid formulary does not offer these medications despite the high prevalence of opioid abuse in this population, and

Whereas, Medicare and commercial Health Insurance carriers only provide tiered access to buprenorphine and tapentadol (Nucynta) creating financial barriers to access for many patients at risk of side effects and adverse events from other traditional opioids on lower tiers of insurance formularies; therefore be it

53 RESOLVED: That MSMS lobby the Michigan Legislature for the introduction and passage of
54 legislation eliminating tiered pricing in allowing coverage by all health insurers for tapentadol
55 (Nucynta) and buprenorphine for the management of pain.
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58 WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE

Sources:

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Davis, Mellar P. "12 Reasons for Considering Buprenorphine as a Frontline Analgesic in the Management of Pain" J Support Oncol. 2012 Nov-Dec;10(6):209-19.

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