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Title: Prescription Coverage of the Lidocaine Transdermal Patch
Introduced by: Lee Begrow, DO, for the Kent County Delegation
Original Author: Jayne E. Courts, MD
Referred to: Reference Committee A
House Action: **APPROVED**

Whereas, the opioid epidemic has led to an increased focus on non-opioid-containing medications to treat pain, especially chronic, non-malignant pain, and

Whereas, research is increasingly showing that opioid therapy for chronic, non-malignant pain is ineffective and may lead to hyperalgesia, and

Whereas, topical lidocaine is effective for the treatment of pain, and

Whereas, topical lidocaine has minimal side effects and is generally well tolerated, and

Whereas, topical lidocaine is available over the counter in cream and transdermal patch forms, and

Whereas, lidocaine as a transdermal patch is an effective, topical pain treatment which may be a reasonable alternative to opioid-containing medications, and

Whereas, transdermal lidocaine has only one Food and Drug Administration-approved indication for use as a prescribed medication (for the treatment of post-herpetic neuralgia) with related limitations in insurance coverage, and

Whereas, third-party payers will not provide prescription coverage for this medication for any off label uses, and

Whereas, other medications are occasionally covered by third party payers for off label uses if other effective treatment options are unavailable or have limited availability, and

Whereas, opioid and controlled substance laws and application of the Centers for Disease Control safe opioid prescribing guidelines are making access to opioid-containing and non-opioid containing medications for the treatment of pain more limited; therefore be it

RESOLVED: That MSMS work with third-party payers in the State of Michigan to urge the provision of insurance coverage of transdermal lidocaine patches for other indications in addition to post-herpetic neuralgia; and be it further

RESOLVED: That the Michigan Delegation to the American Medical Association (AMA) ask our AMA to encourage the United States Food and Drug Administration to consider approving other indications in addition to post-herpetic neuralgia for transdermal lidocaine patches; and be it further

RESOLVED: That the Michigan Delegation to the American Medical Association (AMA) ask our AMA to urge the Centers for Medicare and Medicaid Services and third-party payers to provide insurance coverage of lidocaine transdermal patches for other indications in addition to post-herpetic neuralgia.

55 WAYS AND MEANS COMMITTEE FISCAL NOTE: \$25,000.00 or more as this resolution directs MSMS to pursue
56 payer advocacy.

Relevant MSMS Policy: None

Relevant AMA Policy:

Workforce and Coverage for Pain Management H-185.931

1. Our AMA supports efforts to improve the quality of care for patients with pain, ensuring access to multiple analgesic strategies, including non-opioid options and interventional approaches when appropriate, with a focus on achieving improvement in function and activities of daily living.
2. Our AMA supports guidance on pain management for different clinical indications developed by the specialties who manage those conditions and disseminated the same way other clinical guidelines are promoted, such as through medical journals, medical societies, and other appropriate outlets.
3. Our AMA will advocate for an increased focus on comprehensive, multidisciplinary pain management approaches that include the ability to assess co-occurring mental health or substance use conditions, are physician led, and recognize the interdependency of treatment methods in addressing chronic pain.
4. Our AMA supports health insurance coverage that gives patients access to the full range of evidence-based chronic pain management modalities, and that coverage for these services be equivalent to coverage provided for medical or surgical benefits.
5. Our AMA supports efforts to expand the capacity of practitioners and programs capable of providing physician-led interdisciplinary pain management services, as well as an expanded behavioral health workforce to improve the availability of services to address the psychological, behavioral, and social aspects of pain and pain management within multidisciplinary pain clinics. Patients and their caregivers should be involved in the decision-making process.
6. Our AMA supports an expanded availability of comprehensive multidisciplinary pain medicine clinics for patients in both urban and rural areas, and an improvement in payment models for comprehensive multidisciplinary pain clinics services such that such services can become more financially viable.