

# Rate of High-Risk Opioid Prescribing from the Same Doctor Differs Across Medicaid, Commercial, and Self-Pay Patients



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## THE ISSUE

High-risk opioid prescriptions such as initial prescriptions >7 days or >90 morphine milligram equivalents are potential indicators of poor quality because they are associated with harms such as increased danger of overdose, development of opioid use disorder, and poorer health outcomes. Quality of opioid prescribing differs by insurance type because of differences in where patients receive care, but we do not know if clinicians treat patients with different insurance status differently.



## STUDY FOCUS

The research team used national pharmacy claims data to determine if patients seeing the same clinician were more or less likely to receive prescriptions for high-risk opioids based on the patients' type of insurance. The team also examined which physician specialties were more likely to prescribe differently depending on insurance type.



## KEY FINDINGS

- More than 1 in 10 clinicians prescribed in a significantly different way to patients based on their type of insurance
- High-risk opioid prescriptions were more likely for self-pay patients than for Medicaid or commercial pay patients even when they saw the same clinician
- Pain specialists were the most likely to prescribe differently based on insurance type



## IMPLICATIONS FOR POLICY

Study findings may reflect barriers to access to care for patients without insurance, clinician efforts to limit out-of-pocket costs to uninsured patients, limitations of current opioid prescribing monitoring systems, or some clinician's propensity to prescribe differently to different patient populations. The findings may further support the need for health insurance expansion and other policy interventions to address the disparities apparent in differential prescribing by the same clinician to different populations of patients.

Schulson, L. B., Dick, A., Sheng, F., & Stein, B. D. (2023). An Exploratory Analysis of Differential Prescribing of High-Risk Opioids by Insurance Type Among Patients Seen by the Same Clinician. *Journal of General Internal Medicine*, 1-8. <https://doi.org/10.1007/s11606-023-08025-6>

