## **Penn Medicine Opioid Task Force**

Commitment Statement for NAM Action Collaborative on Countering the US Opioid Epidemic

Penn Medicine is a national leader in education, health care, and biomedical research and includes the Perelman

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2017, the Penn Medicine Opioid Task Force has led Penn's response to the US Opioid Epidemic through provider education initiatives, quality improvement interventions, and community outreach efforts to promote opioid stewardship and evidence-based treatments for individuals with opioid use disorder.

Penn Medicine is fully committed to partnering with the National Academy of Medicine in this vitally important Action Collaborative. Specific initiatives within Penn Medicine in the Action Collaborative's priority areas include:

**Health professional education and training:** Penn Medicine initiatives support education and training across the learning spectrum through: curricular innovations for Penn medical students focused on opioid use disorder, related stigma, medication assisted therapy (MAT) and naloxone prescribing and administration; development of system-

training and DEA registration for emergency department and primary care physicians.

**Opioid prescribing guidelines and evidence standards:** Initiatives led by Penn Medicine's Opioid Task Force include development of targeted behavioral strategies, including EMR-based "nudges" to promote guideline-concordant opioid dispensing for patients with acute conditions; routine naloxone co-prescribing for patients at elevated risk of unintended overdose; and controlled medication completion for indicated patients. Through alignment with Penn Medicine's enterprise-wide ERAS (Enhanced Recovery After Surgery) collaborative, the Opioid Task Force works to identify and promote opioid-sparing approaches to pain management after surgical cases and support evidence-based postoperative prescribing practices.

**Prevention, treatment, and recovery:** Penn Medicine is continually developing novel approaches for to support prevention, treatment, and recovery related to opioid use disorder. Since 2017, Penn Medicine has dramatically expanded its capacities for MAT initiation in inpatient and outpatient settings with sustained growth over time in X-Waiver registration among Penn Medicine Physicians. Innovative data tools automatically identify Penn Medicine patients with relevant diagnoses for evaluation by Certified Recovery Specialists, with pathways for MAT initiation and warm handoffs to community providers. In-development services include a dedicated unit for care of patients with long-term acute care needs related to sequelae of opioid use, such as osteomyelitis and endocarditis.

Research, data, and metrics: Penn Medicine investigators are engaged in a range of efforts to fill key knowledge gaps related to the opioid crisis. Ongoing work by Penn Medicine investigators involves novel initiatives to capture patient pain experiences and opioid use patterns after surgery via automated text messaging; to assess outcomes of opioid-benzodiazepine co-prescribing across diverse treatment contexts using big data methods; and to measure the outcomes of behavioral interventions such as EMR based "nudges" on physician prescribing behavior.

Moreover, Penn's system-level EMR provides a unique data platform to support providm- á M s a uni