

Pain Management Best Practices HHS Led Inter-Agency Task Force Report

Updates, Gaps, Inconsistencies, and Recommendations

The Pain Management Best Practices Inter-Agency Task Force (Task Force) was convened by the Health and Human Services (HHS) in conjunction with the Department of Defense, and the Veterans Administration with the Office of National Drug Control Policy to identify updates, gaps, and inconsistencies, and to make recommendations for best practices for managing acute and chronic pain. The Task Force was comprised of public and government representatives, including the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention.

The Task Force Report emphasizes the development of an effective pain treatment plan after proper evaluation to establish a diagnosis with measurable outcomes that focus on improvements including quality of life, improved functionality, and activities of daily living.

THE IMPACT OF PAIN IN THE US

 **50**
MILLION
adults have
chronic daily pain

19.6
MILLION
adults experience high-impact
chronic pain that interferes with
daily life or work activities

\$ 560-635
BILLION
is the estimated
annual cost of pain

Achieving excellence in acute and chronic pain care depends on the following:

- An individualized patient-centered approach to the diagnosis and treatment of pain to establish a patient–clinician alliance
- A multimodal approach to acute pain that includes medications, nerve blocks, physical therapy, and other modalities
- A multidisciplinary approach for chronic pain across various disciplines, utilizing one or more treatment modalities
 - Medications
 - Restorative therapies
 - Interventional approaches
 - Behavioral health
 - Complementary & integrative health
- Effective multidisciplinary management of the potentially complex aspects of acute and chronic pain based on a biopsychosocial model of care
- Consideration for the pain management needs of the special populations that are confronted with unique challenges associated with acute and chronic pain
- A thorough patient assessment and evaluation for treatment that includes risk–benefit analysis
- Compassionate, empathetic care centered on the patient–clinician relationship
- More effective education about pain conditions and treatment for patients, families, caregivers, clinicians, and policymakers
- Addressing access to care barriers, including coverage and payment for different pain management modalities
- Continued medical and scientific research in key areas of acute and chronic pain

Inter-Agency Task Force Encourages Primary Use of Buprenorphine When Opioids Are Appropriate for Chronic Pain

The Task Force noted the importance of buprenorphine in the treatment regimen of patients suffering from chronic pain. In particular, they noted the safety profile of buprenorphine.

“Buprenorphine, an opioid medication that the FDA has approved for clinical use, is a partial agonist at the mu opioid receptor and therefore has a reduced potential for respiratory depression...”

—Pain Management Best Practices Inter-Agency Task Force Report

Gap and Recommendations for the Use of Buprenorphine in the Treatment of Chronic Pain

Gap: Barriers include lack of coverage and reimbursement for buprenorphine, as well as the lack of education and training on the proper usage of buprenorphine. There has been a lack of access to buprenorphine treatment for chronic pain.

RECOMMENDATIONS

- a:** Make buprenorphine treatment for chronic pain available for specific groups of patients, and include buprenorphine in third-party payer and hospital formularies.
- b:** Encourage CMS and private payers to provide coverage and reimbursement for buprenorphine treatment, both for opioid use disorder and for chronic pain. Encourage primary use of buprenorphine rather than use only after failure of standard mu agonist opioids such as hydrocodone or fentanyl, if clinically indicated.
- c:** Encourage clinical trials using buprenorphine for chronic pain to better understand indication, usage, and dosage.

Source: U.S. Department of Health and Human Services (2019, May). Pain Management Best Practices Inter-Agency Task Force Report: Updates, Gaps, Inconsistencies, and Recommendations. Retrieved from U. S. Department of Health and Human Services website: <https://www.hhs.gov/ash/advisory-committees/pain/reports/index.html>

TO READ THE FULL REPORT GO TO:

<https://www.hhs.gov/sites/default/files/pmtf-final-report-2019-05-23.pdf>