CONDUCT OF DATA-BASED CASE REVIEWS OF PATIENTS WITH OPIOID-RELATED RISK FACTORS

1. VHA is committed to enhancing the safe and efficacious care of Veterans who are exposed to opioid drugs. Deploying risk mitigation strategies or modifying treatment plans for patients at elevated risk of experiencing an adverse event related to an opioid prescription or opioid use disorder diagnosis can reduce the likelihood of these events and improve patient outcomes.

2. This VHA notice establishes policy on implementation of Opioid Safety Initiative (OSI) case reviews, and Title IX, Subtitle A, Section 911(a)(2) of the Comprehensive Addiction and Recovery Act (CARA). These case reviews must be documented in the medical record using a note title or titles that include the terms “Opioid Risk Review” and “Data-based”. These both require completion and documentation of case reviews of opioid-related risks, specifically for the following two groups of patients:

   (a) Patients identified as being in the “Very High – Opioid Prescription” risk category for an overdose or suicide-related event by the Stratification Tool for Opioid Risk Mitigation (STORM); these patients must be included in the interdisciplinary OSI case reviews of patients with high risk opioid prescribing at each facility.

   (b) Patients with new opioid prescribing, before initiating opioid therapy by the health care provider.

3. Detailed background, implementation instructions, and monitoring plans regarding this guidance are available at:

4. Staff from the Program Evaluation and Resource Center (PERC) within the Office of Mental Health and Suicide Prevention (OMHSP) will conduct a series of seminars that provide an overview of STORM and suggestions on how to use STORM for case review. The STORM implementation team will be available for technical assistance with the STORM dashboard or to assist with developing strategies and processes for case review.

5. Local facility leadership should facilitate implementation of case reviews in four additional ways:

   (a) Designate a contact person or team of people for this initiative and notify the STORM implementation team at V21PALSTORMteam@va.gov of the name and contact information for each team member. We expect these contacts will typically comprise or include the current Opioid Safety Initiative Point of Contact (OSI POC; see
attached list). This contact person or team will receive information about updates and
trainings on STORM and opioid risk mitigation and may be contacted for qualitative
information about their local implementation.

(b) Ensure that staff on the Pain Management Teams, mandated in the 10N
memorandum, Comprehensive Addiction and Recovery Act Requirements from Section
911(c) Pain Management Team Facility Report, dated May 22, 2017, found here
https://vaww.va.gov/vhapublications/ViewPublication.asp?pub_ID=5915, or Opioid
Safety Initiative review teams have interdisciplinary representation and adequate time
dedicated to complete the case reviews and follow-up required in 2(a). **NOTE: This is
an internal VA Web site that is not available to the public.**

(c) Ensure training and adequate encounter time for clinicians considering initiating
opioid therapy to conduct reviews of opioid-related risk per 2(b).

(d) Require a Clinical Application Coordinator (CAC) at the facility to establish a local
pre-defined progress note(s) including “Opioid Risk Review” and “Data-based” in the
title.

6. Questions regarding this VHA notice should be directed to Dr. Friedhelm Sandbrink,
Acting Director, National Pain Management Program, VHA, at
Friedhelm.Sandbrink@va.gov or the STORM implementation team at
V21PALSSTORMteam@va.gov.

7. This VHA notice will be archived as of March 31, 2019. However, the information will
remain in effect.

Carolyn M. Clancy, M.D.
Executive in Charge

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