Preventive, routine and advanced pain management in primary care. All practices have basic competence in pain management while a subset have specialized expertise, supported by Centers of Excellence in pain management. Some practices specialize in Medication Assisted Treatment for opioid addiction.

**CONSUMERS CAN...**
- Learn how to manage acute and chronic pain as part of regular primary care
- Work with your primary care team to reduce your pain and address its causes
- Avoid opioids with access to traditional and alternative therapies for pain, including affordable medications
- Meet with a behavioral health clinician in the primary care office to address emotional contributors to pain and learn new pain management strategies
- Receive Medication Assisted Treatment (MAT) for opioid addiction or see a specialist for treatment

**PRIMARY CARE TEAMS CAN...**
- Develop expertise in evidence-based pain prevention and the routine management of chronic pain with reduced reliance on opioids
- Use decision support and analytics to identify patients who have severe chronic pain or are at risk of opioid addiction
- Apply a team-based approach that may combine physical medicine, behavioral health and alternative therapies
- Offer options for pain management to practices with pain management expertise in your primary care network or to a Center of Excellence

**PATIENT EXPERIENCE IN PRIMARY CARE MODERNIZATION**

Michelle's shoulder and back still hurt months after falling on the ice. The pain is so intense that she can't go to work, sleep or get anything done. Her prescription for pain relievers ran out and no one will refill it.

Michelle goes to see a new primary care team who she heard specializes in pain management. She hopes they offer her a stronger dose. The primary care provider takes a detailed history and screens Michelle for risk of addiction.

The primary care provider follows FDA opioid prescribing guidelines. After consulting with the pharmacist, her primary care provider offers Michelle an effective but less addictive pain medication.

The primary care provider also suggests that Michelle try other therapies. The care coordinator assists with making appointments for cognitive behavioral health therapy, physical therapy, and acupuncture.

**WE WANT TO HEAR FROM YOU!**
SIM@CT.gov
Care Team and Network Requirements

All primary care practices

- Offer routine care for patients with acute and chronic pain in the primary care practice, including patient education on pain management
- Train teams on bio-psycho-social approach to pain management that promotes patient activation and self-management and appropriate prescribing for pain, especially when starting or continuing opioid therapy
- Establish protocols for referrals and hand offs to primary care practice with specialized pain management expertise
- Provide access to clinical decision support tools at the point of care and provide web- and phone-based self-management resources for patients
- Referral assistance and tracking to support access to primary care providers that specialize in advanced primary care pain management and those who provide MAT for opioid addiction.
- Formal pain management training arrangement with Centers of Excellence
- Two-way communication between primary care team and MAT clinicians

Subset of primary care providers specialize in advanced primary care pain management and or MAT

- Receive advanced training through Project Echo/Centers of Excellence
- E-consults with pain management experts for complex cases and ongoing knowledge development
- Connect patients with complementary community-based therapies
- Provide re-assessments of patients with chronic pain and refer back to routine primary care provider

Health Information Technology Requirements

- EHR configuration or complementary platform to support telemedicine and e-Consult
- EHR process to ensure capture of all interactions between patient and care team members, including non-office-based care
- Analytic tools to identify patients with chronic pain and those at risk for opioid abuse
- EHR configuration to support outcomes measurement and performance accountability
- Referral management platform with interoperability to confirm visits with behavioral health specialists and community-based organizations
- Consent and confidentiality management solution

MEASURING IMPACT

☑️ Patient Experience

- Improved patient experience with respect to care team's caring and concern, communication, provider support and overall provider satisfaction
- Less time off from work; improved functioning at work

⭐ Quality

- Reduced use of opioid painkillers and less opioid addiction
- Earlier recognition of risk for opioid addiction
- Improved opioid use disorder treatment outcomes

$ Cost

- Reduced avoidable visits and treatments for chronic pain
- Reduced emergency department visits
- Reduced costs associated with time off work due to acute pain

Access

- Easier access to high quality pain management support from primary care team
- Improved access to medication assisted treatment resulting from increased in-network capacity and improved identification of patients who would benefit

IMPROVING HEALTH EQUITY

People of color and other historically underserved communities face disparities in pain assessment and treatment. To reduce this disparity, primary care will change in the following ways:

☑️ Networks track pain prevalence and treatment across populations to identify disparities and overprescribing in vulnerable populations

☑️ Community health workers available to help find transportation and childcare for appointments.

☑️ Provide options for more affordable medications, behavioral health services, and alternative treatments through integrated pain management in primary care.

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