Decrease the rate of opioid use disorder and reduce deaths by focusing on preventing opioid overuse, increasing access to treatment, and targeting improvements through data analysis.

- The CMS Opioid Strategy focuses on three key areas to empower patients with the information they need to make the best health care decisions for themselves and their families through:
  - **Prevention**: preventing and reducing opioid use disorder (OUD) by promoting safe opioid prescribing and encouraging non-opioid pain treatments;
  - **Treatment**: increasing access to evidence-based treatment for OUD; and
  - **Data**: leveraging data to target prevention and treatment efforts and to support fraud, waste, and abuse detection.

- CMS will work to encourage the safe prescribing of opioids, improve access to OUD treatment, and leverage innovative waiver authorities to expand treatment options for vulnerable beneficiaries.
  - We are expanding Medicare coverage to opioid treatment programs (OTPs) that deliver Medication-Assisted Treatment (MAT) to people suffering from Opioid Use Disorder (OUD) beginning on January 1, 2020. OTPs are programs or providers that provide a range of services to people with opioid use disorder, including medication-assisted treatment and counseling.

- Prevention and treatment efforts addressing misuse, overuse and over-prescribing of opioids will help reduce hospitalizations, Emergency Department visits, and family crises associated with the epidemic.

Our actions have delivered results

- As of December 2019, CMS approved **27 state Medicaid 1115 demonstrations** to improve access to substance use disorder treatment, which includes opioid use disorder treatment, including new flexibility to cover inpatient and residential treatment.

- Through the Integrated Care for Kids (InCK) and the Maternal Opioids Misuse (MoM) payment models, we are focusing on coordinating and increasing access to treatment for vulnerable populations: children and pregnant women.

- CMS engaged over 4,000 hospitals, 120,000 clinicians, and 5,000 outpatient settings through national quality improvement networks to rapidly generate results in reducing opioid-related events.
• We introduced new Medicare Part D opioid safety policies to reduce prescription opioid misuse while preserving medically necessary access to these medications. The new opioid policies include improved safety alerts at the pharmacy for Part D beneficiaries who are filling their initial opioid prescription or who are receiving high doses of prescription opioids.

• We are working to increase the capacity of Medicaid providers to deliver treatment and recovery services in 15 states through $47.5 million in planning grants.