

Draft scripting for talking with patients on chronic opioid therapy (COT) about urine drug screening (UDS) requirements

Below is a scripting option written by a Kaiser Permanente provider to help frame conversations with patients on COT about the requirement to have a urine drug screen. While this script uses UDS as an example, the style of scripting can be used for other challenging conversation topics.

Key Points to Consider:

- Research shows that patients on COT frequently feel stigmatized during their interactions with the health care system
- While UDS is a requirement that patients on COT need to know about, how providers inform patients about this and other requirements has a substantial impact on the formation of a therapeutic relationship with the patient.
- The following scripting provides an example of the warmth and empathy that is essential to creating an alliance with the patient and avoiding unintentional stigmatization.

Example: Ms. J, a 57-year-old female new to the clinic who has been on COT for chronic knee pain since 2012.

Agenda Setting: *Sets up expectations for discussion at the outset; can help to prevent patients from feeling “ambushed” by difficult topics.*

As we get started with your visit to review your pain management, I’d like to create an agenda for our visit together. Do you have specific issues that you want to make sure we address today?

[gather patient list]

Great, we will make sure to address those topics today [or, if needed, ask patient to prioritize top #1 or #2 and then make plans to follow-up on other items later].

Also, since you are a new member to our clinic, I’d like to add to our agenda discussing the requirements Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) has for any member who is taking an opiate medicine long-term.

Requirements Discussion, i.e. UDS

One of the specific requirements for Kaiser Permanente patients taking chronic opioids for pain management is that they submit a regular urine drug screen. While most patients on chronic opioid therapy take their medicines appropriately, there is a small fraction of our patients who take dangerous combinations of substances that could lead to serious harm or even death. By making it a requirement that every member taking COT has to complete a urine drug screen, providers can feel confident that patients are not at this risk, and no one patient is left feeling “singled out” since it’s a requirement shared by all.

In addition, some patients have given feedback that collecting urine for this test can be physically painful. To reduce the physical discomfort of this test, our clinic can provide a collection container that inserts onto the toilet seat so that you can remain in the most comfortable position possible. Would this be something you’d like to try?

If patient still shows concern:

- If not already explored/discussed, ask if patient has physical concerns or financial concerns:

If physical concerns: To reduce the physical discomfort of this test, our clinic can provide a collection container that inserts onto the toilet seat so that you can remain in the most comfortable position possible. Would this be something you'd like to try?

If financial concerns: Kaiser Permanente has a Medical Financial Assistance (MFA) program which may be able to help you cover the cost of the urine drug screen and other medical care. To see if you are eligible, call 1-800-442-4014. You can also search for this program at <https://about.kaiserpermanente.org/>

- If concerns are more about the regulations in general, consider the following:

Thank you for being up front with me and sharing your concerns. I hear where you are coming from: not only are you dealing with pain that can be debilitating, but you are now having to manage additional regulations to get your medication, including the urine drug screen. It has been a big adjustment for both health care workers and patients to learn and abide by the new state and federal laws governing opioid prescribing, though I know that the impact is greatest on you as a person living with chronic pain.

[Ask if patient is aware of changes to the laws and why the changes were made. If not aware, give brief overview that due to alarming rise in opioid related deaths nationwide, changes were instituted including opioid prescribing limits, mandatory quarterly visits between patient and provider, and at least annual UDS].

While I cannot make an exception to following these requirements, I do think it is essential that the people making these rules hear from you about your experience. You can call Kaiser Permanente member services line to share your experience.