



GA FLEX Quality Improvement Project Monthly Meeting
June 23, 2026



Agenda

- Welcome
- Care Compare Review
- Opioid Maps (2024)
- CDC Clinical Practice Guideline for Prescribing Opioids for Pain (2022)
- Q&A/Wrap Up



GA FLEX Improvement Project Lead



Melody "Mel" Brown, MSM

Quality Program Manager

melody.brown@allianthealth.org

Melody has over 45 years of health care experience, including varied roles at Alliant Health Solutions. She currently works on projects with hospitals, nursing homes, and physician practices concentrating on quality improvement strategies and implementation of interventions.

Care Compare

<https://www.medicare.gov/care-compare/>

Safe use of Opioids

When prescription opioids, or opioids and benzodiazepines are given at the same time, patients are at a higher risk of unintentional overdose because of the increased risk of breathing problems. Not using both types of medications at the same time reduces the risk of ER and inpatient hospital stays.

[Read less](#)

Proportion of inpatient hospitalizations for patients 18 years of age and older prescribed, or continued on, two or more opioids or an opioid and benzodiazepine concurrently at discharge.

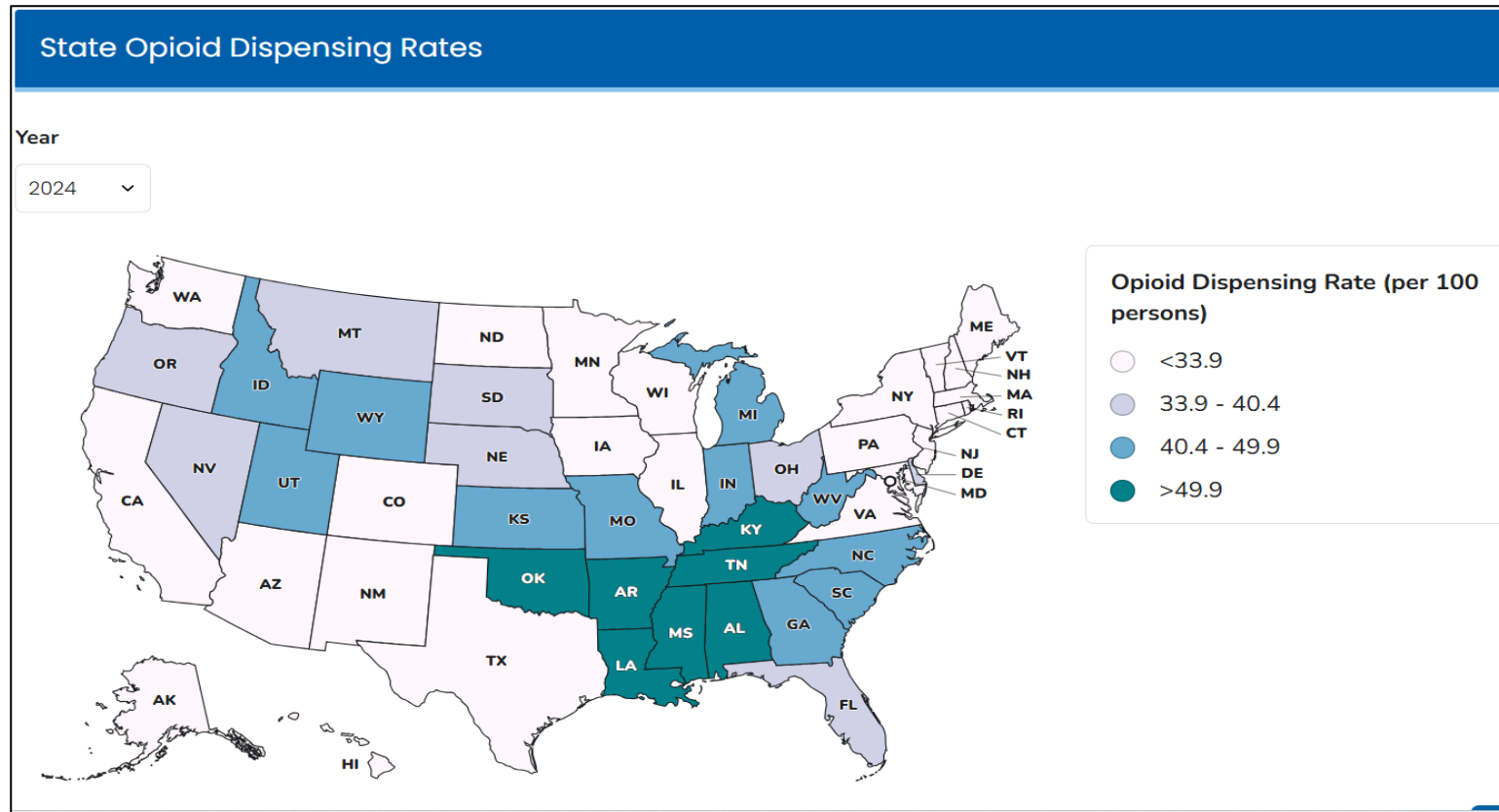
↓ *Lower percentages are better*

24%

National average: 15%

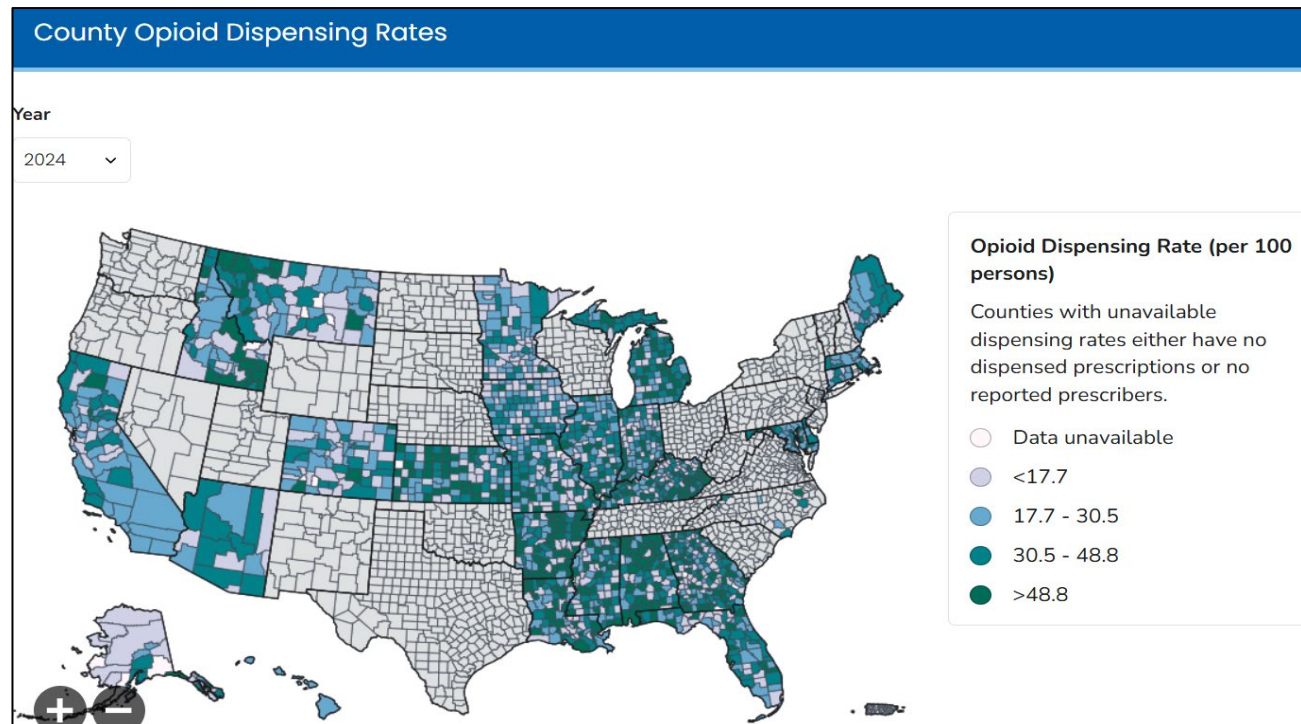
Georgia average: 15%

Opioid Dispensing Rate Maps



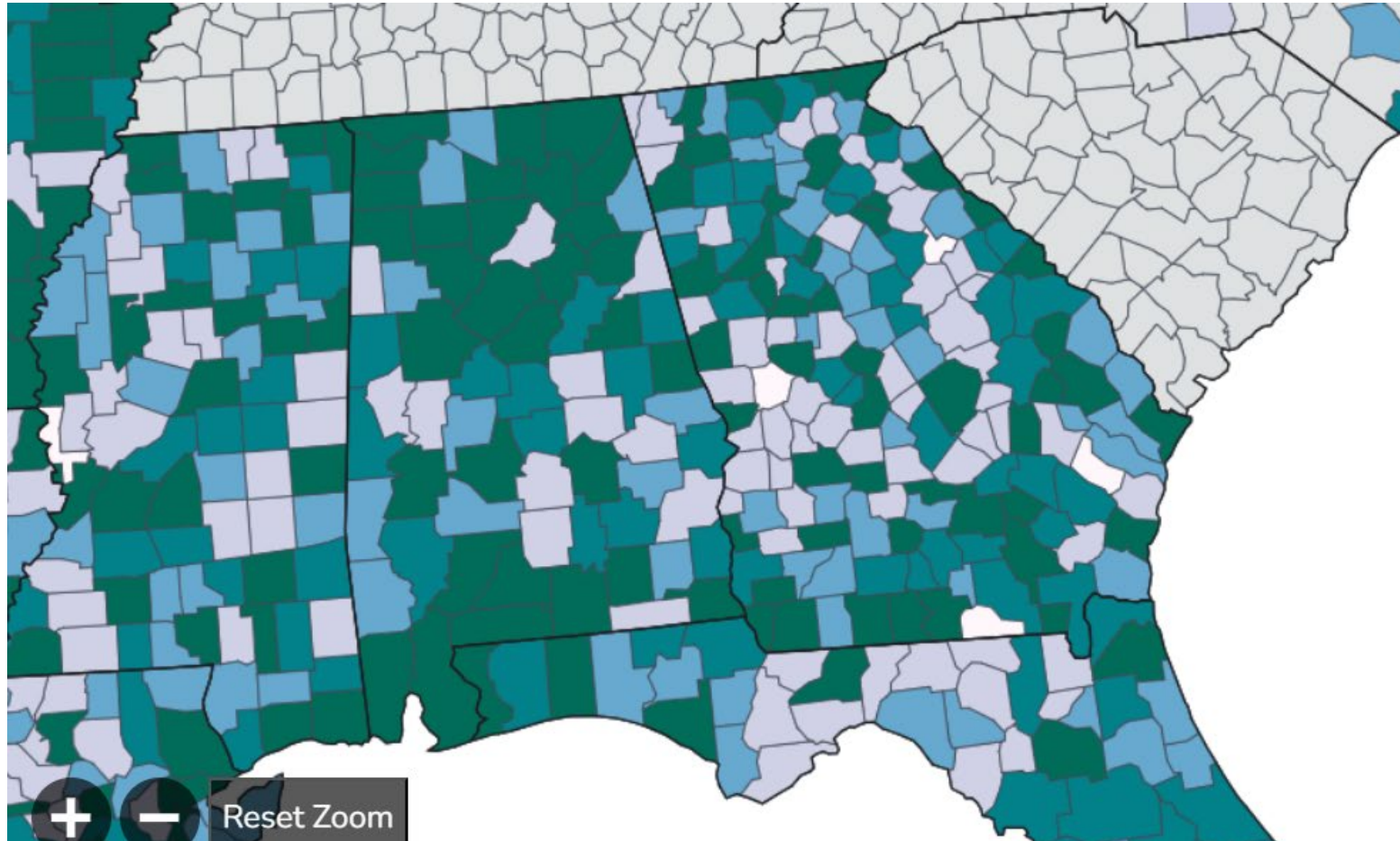
<https://www.cdc.gov/overdose-prevention/data-research/facts-stats/opioid-dispensing-rate-maps.html>

County Opioid Dispensing Rates



<https://www.cdc.gov/overdose-prevention/data-research/facts-stats/opioid-dispensing-rate-maps.html>

Georgia by County

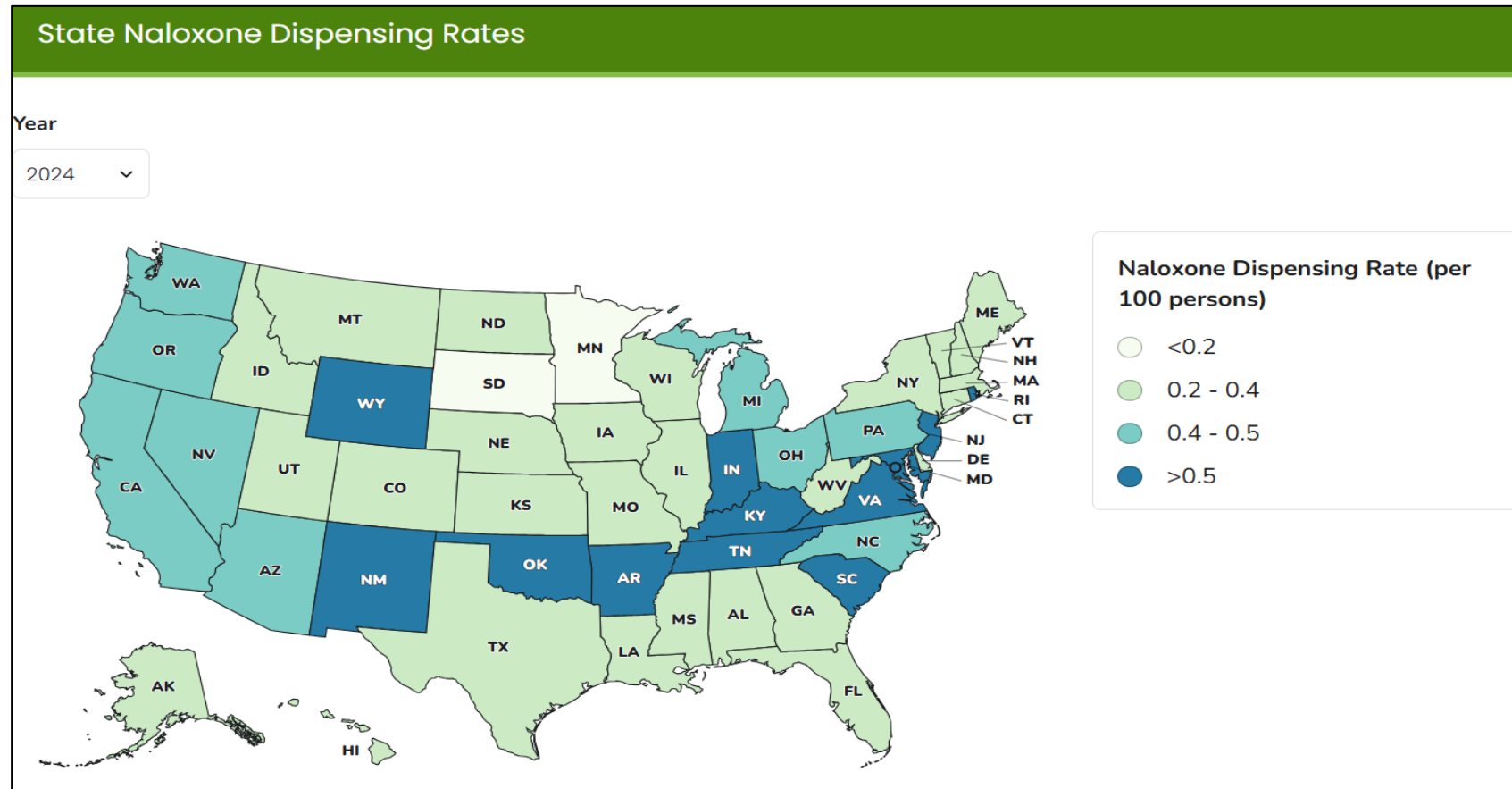


Opioid Dispensing Rate (per 100 persons)

Counties with unavailable dispensing rates either have no dispensed prescriptions or no reported prescribers.

- Data unavailable
- <17.7
- 17.7 - 30.5
- 30.5 - 48.8
- >48.8

State Naloxone Dispensing Rates



<https://www.cdc.gov/overdose-prevention/data-research/facts-stats/naloxone-dispensing-rate-maps.html>

Preventing Opioid Use Disorder


KEY POINTS

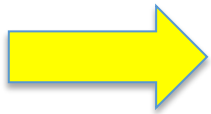
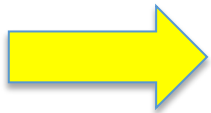
- Opioid Use Disorder (OUD) is a problematic pattern of opioid use that causes significant impairment or distress.
- Anyone who takes prescription opioids can become addicted to them.
- Prescription drug monitoring programs and education around the risks of prescription opioids are some ways to help prevent OUD.

<https://www.cdc.gov/overdose-prevention/prevention/preventing-opioid-use-disorder.html>

Ways to Prevent Opioid Use Disorder

There are a variety of ways to help reduce exposure to opioids and prevent opioid use disorder.

- [Prescription drug monitoring programs](#), which are state-run databases that track prescriptions for controlled substances and can help improve opioid prescribing, inform clinical practice, and protect those at risk.
- [Academic detailing](#)  to educate providers about opioid prescribing guidelines and facilitating conversations with patients about the risks and benefits of pain treatment options
- Quality improvement programs in health care systems to increase implementation of recommended prescribing practices
- Patient education on the safe storage and disposal of prescription opioids
- Improve awareness and share resources about the risks of prescription opioids, and the cost of overdose for patients and families.
 - See CDC's [Rx Awareness](#) Campaign website



Free Mind Toolkit

<https://www.cdc.gov/free-mind/toolkit/index.html>



Free Mind

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Facts About Substances

Free Mind for Teens +

Free Mind for Parents and
Caregivers +

Campaign Toolkit



Free Mind Campaign Partner Toolkit

[Print](#)



Free Mind Toolkit

<https://www.cdc.gov/free-mind/toolkit/index.html>

Opioids



Doctors sometimes prescribe opioids, which are natural or synthetic (made in a lab) substances used to reduce pain. However, even prescription opioids can lead to addiction, overdose, and death.⁹ Illegal opioids may contain deadly levels of fentanyl, and you wouldn't be able to see it, taste it, or smell it.¹⁰

Learn more about opioids:

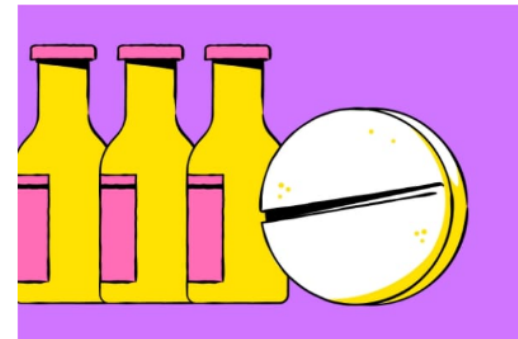
[About Prescription Opioids](#) (CDC)

[Fentanyl](#) (CDC)

Polysubstance Use

Polysubstance use happens when a person intentionally or unintentionally takes more than one drug at the same time. Mixing drugs like this can be dangerous. This is because we don't always know how the drugs will affect each other or the person taking them.¹¹ Learn more about polysubstance use:

[Stop Overdose: Polysubstance Use](#) (CDC)



CDC Clinical Practice Guideline for Prescribing Opioids for Pain (2022)

Core Principles

- **Use a patient-centered approach:** decisions should be individualized and not applied as rigid rules. [\[cdc.gov\]](https://www.cdc.gov)
- **Balance benefits and risks** for every patient. [\[cdc.gov\]](https://www.cdc.gov)
- **Prioritize safety and function**, not just pain reduction. [\[cdc.gov\]](https://www.cdc.gov)
- **Use multimodal pain management** (non-drug + non-opioid + behavioral approaches). [\[cdc.gov\]](https://www.cdc.gov)

The 2022 Clinical Practice Guideline is intended to help clinicians:

- Improve communication with patients about the benefits and risks of pain treatments, including opioid therapy for pain
- Improve the safety and effectiveness of pain treatment
- Mitigate pain
- Improve function and quality of life for patients with pain
- Reduce the risks associated with opioid pain therapy (including opioid use disorder, overdose, and death)

<https://www.cdc.gov/overdose-prevention/hcp/clinical-guidance/index.html>

The 12 recommendations are grouped into four areas of consideration.

- Determining whether or not to initiate opioids for pain (Recommendations 1, 2)
- Selecting opioids and determining opioid dosages (Recommendations 3, 4, 5)
- Deciding duration of initial opioid prescription and conducting follow-up (Recommendations 6, 7)
- Assessing risk and addressing potential harms of opioid use (Recommendations 8, 9, 10, 11, 12)

Intended use of the 2022 Clinical Practice Guideline

This clinical practice guideline provides recommendations only. It does not replace clinical judgment and individualized, patient-centered decision-making. Use the following lists as a quick reference for the intentions of the 2022 Clinical Practice Guideline.

The 2022 Clinical Practice Guideline is:

- A clinical tool to improve communication between clinicians and patients and empower them to make informed, person-centered decisions related to pain care together.
- Intended for primary care clinicians and other clinicians providing pain care for outpatients 18 years or older with:
 - acute pain (duration less than 1 month);
 - subacute pain (duration of 1-3 months); or
 - chronic pain (duration of more than 3 months).
- Intended to be flexible to enable person-centered decision-making, taking into account an individual's expected health outcomes and well-being.

The 2022 Clinical Practice Guideline **is not:**

- A replacement for clinical judgment or individualized, person-centered care.
- Intended to be applied as inflexible standards of care across patients, and/or patient populations by healthcare professionals, health systems, pharmacies, third-party payers, or governmental jurisdictions or to lead to the rapid tapering or abrupt discontinuation of opioids for patients.
- A law, regulation, and/or policy that dictates clinical practice or a substitute for FDA-approved labeling.
- Applicable to: management of pain related to sickle cell disease; management of cancer-related pain; palliative care; or end-of-life care.
- Focused on opioids prescribed for opioid use disorder.

Find Treatment

<https://findtreatment.gov/>

 U.S. Department of Health & Human Services

[En Español](#)

FindTreatment.gov

SAMHSA
Substance Abuse and Mental Health
Services Administration

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State Agencies

Facility Registration

FAQs

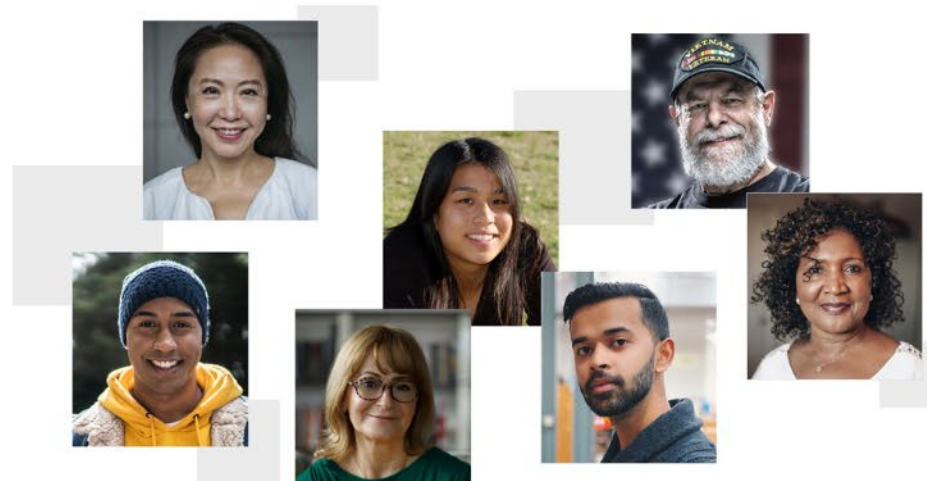
Help

About

Contact Us

Millions of Americans have mental and substance use disorders. Find treatment here.

Welcome to FindTreatment.gov, the confidential and anonymous resource for persons seeking treatment for mental and substance use disorders in the United States and its territories.



A^A



Find Treatment

Find a Treatment Facility

Enter your address, city, zip code, or facility name

Search

Help Resources

988 Suicide & Crisis Lifeline

Free and confidential support for people in distress, 24/7.

Call or text 988

National Helpline

Treatment referral and information, 24/7.

1-800-662-HELP (4357)

Disaster Distress Helpline

Immediate crisis counseling related to disasters, 24/7.

1-800-985-5990

Project Timeline

Date	To-Do List
4 th Tuesday of each month 10AM EST	<input type="checkbox"/> Monthly calls
July 28, 2026	<input type="checkbox"/> July Session



Email melody.brown@allianthealth.org to schedule a meeting.

Alliant Health Website and GA Flex Resources

<https://quality.allianthealth.org/ga-flex/>



GA Flex Resources

Hospital Resources

[Medicare Beneficiary Quality Improvement Project \(MBQIP\) 2025 Measure Core Set Information Guide – Version 2.2 – 3.1.2025](#) ➔

[The Rural Quality Improvement Technical Assistance \(RQITA\) Resource Center](#) ➔

Safe Use of Opioids

[Safe Use of Opioids – Concurrent Prescribing](#) ➔

Social Determinants of Health (SDOH)

[Screening for SDOH Measure and the Screen Positive Rate Measure](#) ➔

[FAQs Social Determinants of Health \(SDOH\) Measures](#) ➔

[Discharge Referral List](#) ➔

[Improving the Collection of Social Determinants of Health \(SDOH\) Data with ICD-10-CM Z Codes](#) ➔

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Resources

1. The Rural Quality Improvement Technical Assistance (RQITA) Resource Center: <https://www.telligen.com/rqita/>
2. Rural Health Information Hub website: <https://www.ruralhealthinfo.org/>
3. Rural Health Research Gateway: <https://www.ruralcenter.org/>

Questions?

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State Office of Rural Health
A Division of the Georgia Department of Community Health