

### **Executive Order No. 2017-43**

**WHEREAS**, South Carolina recognizes the growing epidemic caused by the misuse and abuse of prescription opioids, including prescription pain relievers such as hydrocodone, oxycodone, codeine, and morphine; and

**WHEREAS**, opioids are often used as conventional treatment for pain when there are other, less addictive options that can be used to treat pain-related symptoms and conditions;

**WHEREAS**, practical limitations on opioid prescribing behaviors for acute and post-operative pain management may prevent future drug dependency and addiction; and

**WHEREAS**, the State should mitigate opportunities for prescription diversion that enable substance use disorders involving both prescription drugs and illegal drugs; and

**WHEREAS**, a 2013 study by the National Institute on Drug Abuse found that 80 percent of heroin users reported using prescription opioids before heroin; and

**WHEREAS**, statistics from the Centers for Disease Control and Prevention show that from 1999 to 2014, sales of prescription opioids in the United States almost quadrupled without changes in pain reported; and

**WHEREAS**, the Centers for Disease Control and Prevention's "Annual Surveillance Report of Drug-related Risks and Outcomes—United States, 2017" publication states that nationally almost 20% of individuals receive one or more opioid prescriptions per year; and

**WHEREAS**, the State should be a leader on the management of pain medications and encourage health providers to adopt a common policy on opioid prescribing limitations; and

**WHEREAS**, current national data supports limiting opioid prescription length and dosage; and

**WHEREAS**, physicians should prescribe opioids in the lowest dose and for the shortest length of time necessary to address acute and post-operative pain issues; and

**WHEREAS**, South Carolina has recognized this need and in August of 2017, the South Carolina State Boards of Dentistry, Medical Examiners, Nursing, and Pharmacy issued "Joint Revised Pain Management Guidelines" indicating that in many acute and post-operative pain management cases, a prescription of three (3) days or less is sufficient, and a seven (7) day prescription is rarely needed; and

**WHEREAS**, data released by the Centers for Disease Control and Prevention shows that the probability of long-term opioid use increases in the first few days of therapy, with the sharpest increase in long-term opioid use observed after the fifth and thirty-first days of opioid therapy prescribed; and

**WHEREAS**, the State should curtail the use of public resources that may enable prescription diversion.

**NOW, THEREFORE**, by virtue of the authority vested in me as Governor of the State of South Carolina and pursuant to the Constitution and Laws of this State and the powers conferred upon me therein, I hereby direct the South Carolina Department of Health and Human Services ("DHHS") to develop and publish a two-part policy applicable to all healthcare providers DHHS reimburses directly or through a

third-party for services that include prescribing, dispensing, or administering controlled substances. The two-part policy will apply to all programs administered by DHHS, to include Medicaid reimbursement.

(1) DHHS shall develop and publish a policy with a 5-day prescription limitation on initial opioid prescriptions for acute and post-operative pain management. The policy shall provide for exceptions to this limitation when clinically indicated for situations such as chronic pain, cancer pain, and palliative care.

(2) DHHS shall develop and publish a policy regarding opioid dosing thresholds and recommend best practices that require legislative or regulatory solutions to the Opioid Emergency Response Team.

DHHS shall develop and publish said two-part policy on or before March 1, 2018, and said policies shall be implemented as soon as reasonable after publication.

Nothing in this Executive Order is intended to invade the practitioner–patient relationship or intrude into the prescriber’s area of expertise. The purpose of the Executive Order is to limit the scope of acute and post-operative situations to prevent the initiation of dependency and addiction.

This Order is effective immediately.

**GIVEN UNDER MY HAND AND THE  
GREAT SEAL OF THE STATE OF SOUTH  
CAROLINA, THIS 18th DAY OF  
DECEMBER, 2017.**

**HENRY MCMASTER  
Governor**