

Pain Policy Report Card

2018



Iowa

Yellow

Pain Policy in Iowa

Cancer patients, cancer survivors and other patients with serious illness often need pain treatment. State laws, policies and regulations can affect whether patients get the treatment they need, and the quality of that treatment. The American Cancer Society (ACS) and the American Cancer Society Cancer Action Network (ACS CAN), working with the University of Wisconsin, have graded state pain policies as of December 31, 2017. The following are results for our state.

Points

Policy Definitions & Prescription Limits

6 out of 6

Iowa does well in this category acknowledging that standard medical practice does include the proper treatment of pain when needed by patients. Additionally, prescription amounts and validity periods are not arbitrarily established under state statute or regulation.

Efforts to Assess & Improve Pain Treatment

4 out of 6

Iowa does fairly well in this category but needs to enact policies that acknowledge individual case characteristics should determine proper pain treatment.

Requirements for Treating Pain

5 out of 6

Iowa does very well in this category regarding policies that encourage integrative, individualized patient care while prioritizing the assessment of benefits/risks before treatment and monitoring benefits/risks during treatment. Pro-actively engaging in shared treatment decision making with patients would enhance the overall pain policy grade in this category.

Prescription Monitoring Programs (PMP)

2 out of 6

Iowa does a good job allowing shared data with other state PMPs but should establishing a timeframe for submitting dispensing data (within 24 hours or the next business day). Iowa is also lacking in requiring practitioners to check the PMP before initially prescribing and requiring review to identify inappropriate medication use.

Total points

17

Green – Matches model policy **Yellow** – Making progress toward model policy **Red** – Matches 50% or less of model policy