Pain Parity for Kentucky

Preventing Opioid Use Disorder Before It Begins



Pain is one of the most common reasons people visit their doctor.

Each year, nearly 80 million Americansⁱ seek treatment to manage acute pain symptoms and opioids are often prescribed as a solution. While they can be effective, they can also pose significant health risks and increase chances of opioid dependency.ⁱⁱ

But breakthroughs in pain medication are enabling patients to have a choice in their pain management. Amidst the ongoing opioid epidemic, it is critical that patients have access to the treatments they want and need to address their pain.



Need for increased access to all pain treatment options

- Within one year of receiving an opioid medication to manage acute pain, approximately 85,000 Americans were diagnosed with an opioid use disorder.ⁱⁱⁱ
- Prescribing rates have fallen, but opioid use disorders and overdoses remain high. In 2023, Kentucky reported:
 - More than 3,700 opioid-overdose related emergency room visitsiv
 - More than 1,600 opioid overdose deaths^v
 - A dispensing rate of approximately 58.3 opioid prescriptions per 100 persons^{vi}
 - More than 160,000 doses of naloxone distributed^{vii}
- Furthermore, in Kentucky, opioid use disorder cost Medicaid over \$1.11 billion in excess costs in 2022.



Pain parity legislation for equal access to pain treatment options

Across the country, states are introducing legislation to expand access to non-opioid treatments and therapies. These policy efforts, often referred to as "pain parity" legislation, address the health insurance barriers many patients face when trying to access non-opioid treatment options. Pain parity legislation ensures patients are not disadvantaged when accessing non-opioid options by:

- Prohibiting the use of utilization controls such as prior authorization and step therapy
- Equalizing cost-sharing for the non-opioid prescription drug and the opioid prescription drug



Pain parity legislation in Kentucky

In Kentucky there is important legislation focused on pain parity to help patients and families.

S.B. 128

State Senator Gerald A. Neal (D-33) introduced S.B. 128, a bill that prohibits the Department for Medicaid Services. any Medicaid managed care organization contracted by the department, and the Medicaid state pharmacy benefit manager from denying coverage of non-opioid prescription drugs in favor of opioid prescription drugs by:

 Establishing more restrictive or extensive utilization controls, including but not limited to more restrictive or more extensive prior authorization or step therapy requirements, for clinically appropriate non-opioid drugs compared to opioid drugs.

Contact your representative to let them know Kentucky needs pain parity and help prevent addiction before it begins.

https://legislature.ky.gov/Pages/index.aspx

Visit www.families-network.org to learn more about Take Control of Pain and the state of pain parity across the U.S.

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Updated October 2025

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- iii. Schoenfeld AJ, et al. An Evaluation of the Incidence of Opioid Use Disorder Among People with Acute and Chronic Pain Managed with Prescription Opioids and the Associated Economic and Societal Burden in the United States. Presented at PAINWeek 2024, Las Vegas, NV.
- iv. Centers for Disease Control and Prevention. 2025. Dose-DIS Dashboard: Nonfatal Overdose Emergency Department and Inpatient Hospitalization Discharge Data. https://www.cdc.gov/overdose-prevention/data-research/facts-stats/dose-dashboard-nonfatal-discharge-data.html
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- iii. Kentucky Office of Drug Control Policy and Kentucky Agency for Substance Abuse Policy. 2023. 2023 Combined Annual Report. https://odcp.ky.gov/Reports/2023%20ODCP%20KY-ASAP%20Annual%20Report%20-%20Final.pdf
- ii. Health Management Associates. 2025. Opioid Use Disorder in the Medicaid Fee-For-Service Program Economic Analysis.

 https://www.healthmanagement.com/wp-content/uploads/Opioid-Use-Disorder-Economic-Impact-on-Medicaid-Program-073125.pdf

