

# Help Spot Risky Opioid and Benzodiazepine Combos

A new Medicare Star Rating will lead to **an even bigger push to avoid benzodiazepine (diazepam, etc) and opioid (morphine, etc) combinations.**

You're well aware of the dangers of taking opioids and benzos together, including increased respiratory depression and death...and Beers Criteria concerns of falls and cognitive impairment in older patients.

Starting in 2027, Centers for Medicare and Medicaid Services (CMS) will track concurrent use of opioids and benzos as a Star Rating quality measure for drug plans.

But this matters NOW...since ratings are based on data from 2 years prior. Anticipate payer or MTM alerts for older patients who are taking an opioid and benzo concurrently for at least 30 days.

Refocus your efforts to ensure safe use and CMS compliance.

Ensure patient profiles are updated. Patients with cancer, with sickle cell disease, or in palliative care are exempt from the CMS measure.

Double-check Rx's for indications. Opioids and benzos aren't usually first-line for treating most types of pain, muscle spasms, or insomnia.

Expect to see Rx's for alternative meds to avoid opioid and benzo use.

For instance, patients can take duloxetine or gabapentin for nerve pain...SSRIs (fluoxetine, etc) or buspirone for anxiety...NSAIDs (ibuprofen, etc) for pain...and doxepin or melatonin for insomnia.

Alert your pharmacist if opioids are dispensed with benzos. They can help evaluate whether a benzo or opioid is still needed...or if patients may benefit from a taper.

Watch for drug changes...and help discontinue old Rx's if needed. Prescribers may switch from alprazolam to lorazepam or oxazepam...or from morphine to oxycodone...due to better safety profiles in older patients.

Send patients with questions about stopping benzos to the pharmacist...for counseling on risks, alternate drugs, and nondrug solutions (sleep hygiene for insomnia, relaxation exercises, etc).

Help your pharmacist check your state's Rx drug monitoring program (PDMP) to spot Rx's from other providers too.

Ensure patients have naloxone or nalmefene on hand. Overdose risk increases with opioid and benzo combos, especially in older patients.

Get our comprehensive med list and more tips with our resources, [Appropriate Use of Benzodiazepines and Appropriate Opioid Use](#).

## Key References:

-Centers for Medicare & Medicaid Services. Concurrent Use of Opioids and Benzodiazepines in a Medicare Part D Population May 2016. <https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Downloads/Concurrent-Use-of-Opioids-and-Benzodiazepines-in-a-Medicare-Part-D-Population-CY-2015.pdf> (Accessed March 3, 2025).

-Olson M, King M, Schoenbaum M. Benzodiazepine use in the United States. *JAMA Psychiatry*. 2015 Feb;72(2):136-42.

-Anderson TS, Wang BX, Lindenberg JH, et al. Older Adult and Primary Care Practitioner Perspectives on Using, Prescribing, and Deprescribing Opioids for Chronic Pain. *JAMA Netw Open*. 2024 Mar 4;7(3):e241342.

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