Carolyn Beauchamp, President and CEO

MOUD Prescriber Study

What is MOUD?

Medication for Opioid Use Disorder (MOUD) is an evidence-based treatment option for individuals pursuing recovery from Opioid Use Disorder (OUD). Formerly known as Medication Assisted-Treatment (MAT), MOUD reduces the cravings and withdrawal symptoms associated with opioid use. As New Jersey continues to fight against the opioid epidemic, it is the position of the Mental Health Association in New Jersey (MHANJ) that MOUD can play a vital role in recovering from OUD and that access to such treatment, especially buprenorphine, should be increased throughout the state.

What is Buprenorphine?

Buprenorphine is a schedule III medication approved by the Food and Drug Administration to treat Opioid Use Disorder. Buprenorphine works by mimicking the effects of harmful opioids, such as heroin and methadone, to reduce physical dependency and lower the potential for misuse of opioids (SAMHSA). Buprenorphine is the first form of MOUD allowed by the federal government to be prescribed in physician offices, an opportunity which should have significantly increased access to OUD treatment. However, multiple barriers still exist that make it hard for individuals to access this medication despite its high rates of effectiveness in treating OUD.

Buprenorphine Practice Guidelines (& waiver exemption requirements):

<u>Federal Register :: Practice Guidelines for the Administration of Buprenorphine for Treating Opioid</u>
<u>Use Disorder</u> (A Notice by the Health and Human Services Department on 4/28/2021).

<u>Issues with Access to Buprenorphine</u>

The X-Waiver

One major barrier to buprenorphine access is the extensive training and certification process physicians must complete in order to prescribe buprenorphine. Physicians may only prescribe buprenorphine once they have completed a lengthy and costly training course, making it the only drug that requires specific authorization to prescribe despite its high rates of effectiveness in treating OUD.

In April 2021, the U.S. Department of Human Services updated the Buprenorphine Practice Guidelines to allow qualified clinicians to prescribe buprenorphine without obtaining the x-waiver. However, clinicians that forego buprenorphine training may only treat a maximum of 30 buprenorphine patients within their facility. While this is a step in the right direction, MHANJ continues to advocate for the **Mainstreaming Addiction Treatment Act** (HR1384) (H. R. 1384 (Introduced-in-House) (congress.gov). If passed, this bill would eliminate the x-waiver and its training requirements entirely, increasing the number of physicians and patients who can prescribe and utilize buprenorphine to achieve recovery over OUD.

Caps on Buprenorphine Sales

Recently, MHANJ has also learned that some individuals experience difficulties filling their prescriptions at retail community pharmacies. This is the result of major pressures placed by the Drug Enforcement Administration (DEA) on pharmaceutical distributors to monitor and restrict the quantity of opiates sold to retail pharmacies.

Risks of not filling buprenorphine prescription may include relapse or return to opioid use, which can lead to overdose and death. It is the position of MHANJ that an immediate repeal of the practice of capping buprenorphine to retail community pharmacies will allow individuals in recovery to receive and utilize this life-saving medication in a consistent and reliable manner.

MOUD Active Prescriber Study

In 2020, MHANJ conducted the MOUD Active Prescriber Study, the purpose of which was twofold:

- 1. To compile a list of current MOUD prescribers to inform callers to MHANJ's Connect for Recovery Line.
- 2. To identify physicians who obtained the x-waiver and are actively prescribing Medication for Opioid Use Disorder (MOUD) in New Jersey.

Over the course of 6 months, MHANJ surveyors contacted all prescribers named on SAMHSA's published prescriber list. Each physician was called a maximum of 3 times for request of survey participation, and were asked questions regarding their MOUD prescribing habits (i.e., Is Dr. (Name)/practice currently prescribing MOUD?; What type of MOUD?) as well as general information about their practices (i.e. What type of insurance/payment does your practice accept for MOUD?).

The study concluded with a low response rate; many prescribers could not be contacted or declined to participate in the survey. This outcome demonstrates the difficulties individuals experience when trying to connect with MOUD providers, as over 80% of prescribers on SAMHSA's list were inaccessible.

Key Findings

- 18.9% (154/815) of prescribers contacted agreed to participate in the survey.
- 97% (150/154) of those surveyed took the training and applied for the waiver to prescribe buprenorphine.
- 68% (102/150) of those waivered are currently prescribing MOUD.

Despite the study's low response rate, most prescribers contacted (97%) did report that they completed the training and received the x-waiver to prescribe buprenorphine. However, approximately only 2 out of 3 prescribers (68%) in New Jersey are actively prescribing MOUD. Ultimately, MHANJ found that not only are MOUD prescribers difficult to contact throughout New Jersey, but also that one-third of prescribers are not currently utilizing MOUD for their patients.

MHANJ's full study can be viewed here: MOUD Prescriber Study MHANJ.pdf.

Advocating for Better Access to MOUD

The MOUD Prescriber Study ultimately highlighted the need for greater access to MOUD prescribers throughout the state of New Jersey. As publicly available information, the list provided by SAMHSA is utilized by both health care professionals and consumers seeking opioid treatment options. Misinformation could serve as a potential barrier for those seeking treatment. It must be ensured that accurate, reliable resources are compiled to help connect individuals to treatment.

MHANJ will remain dedicated to improving access to MOUD and buprenorphine throughout New Jersey by advocating for legislation that will: 1) remove the x-waiver required to prescribe buprenorphine, and 2) eliminate the capping practice on buprenorphine by distributors.

Please ask your Federal Senators and House Representatives to support legislation to improve access to buprenorphine and MOUD thus improving outcomes for people achieving recovery over SUD. See link for a full list of New Jersey's Congressional Delegation here: (https://www.govtrack.us/congress/members/NJ#senators).

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