UPDATED April 2023 by Comagine Health

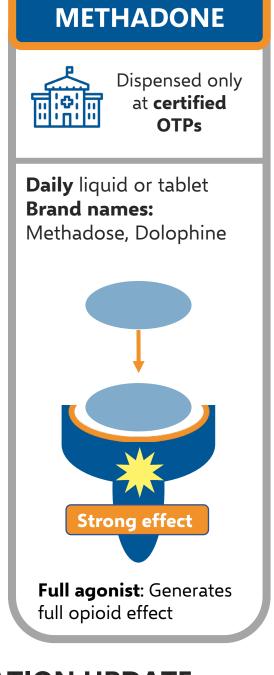


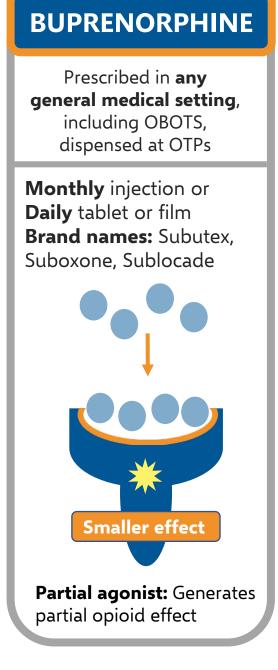
A QUICK INTRODUCTION TO MEDICATIONS FOR OPIOID USE DISORDER (MOUD)

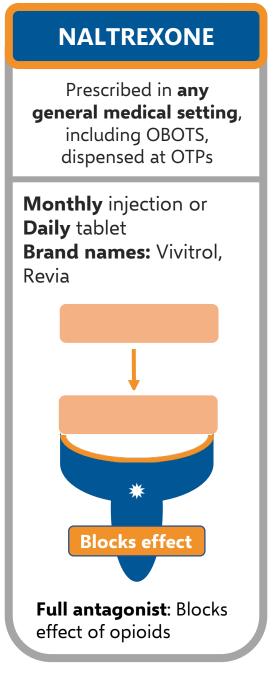


- Also called Medication-assisted Treatment (MAT), includes FDA-approved medications
- Gold standard treatment approach for Opioid Use Disorder (OUD)
- ▶ In response to COVID-19, providers can prescribe buprenorphine via telehealth
- Delivered in Office-based Opioid Treatment (OBOT) or Opioid Treatment Program (OTP) setting
- Substance Abuse and Mental Health Services Administration (SAMHSA) certifies OTPs
- Decreases risk of infectious disease, reduces risk of opioid overdose, and increases an individual's overall well-being

HOW MOUD WORKS IN THE BRAIN Activation Zone MOUD reduces opioid use and craving by attaching to the opioid receptors and blocking opioid activity in the brain







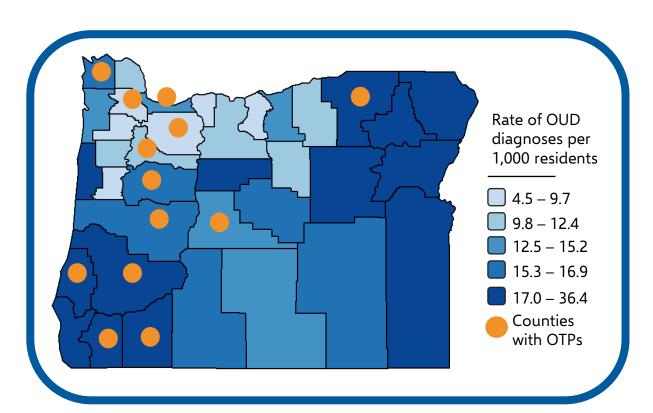
BUPRENORPHINE CERTIFICATION UPDATE

Previously, providers were required to fulfill training requirements and apply for a Drug Enforcement Agency (DEA)-approved X-waiver certification from SAMHSA to prescribe buprenorphine. With the passing of the omnibus bill, the U.S. Department of Health and Human Services (HHS) has eliminated the need for training and repealed X-waiver requirements. The legislation will expand universal access to MOUD treatment. **Effective now**, any clinician with a current DEA registration may now prescribe buprenorphine.

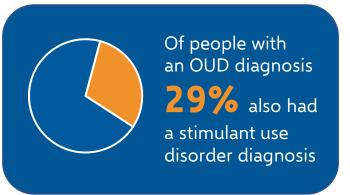
METHADONE AND OTP UPDATE

In response to COVID-19, the DEA and SAMHSA adopted policies to allow OTPs to increase methadone take-home dosing up to 28 days for stable patients and 14 days for less stable patients. With evidence that flexible take-homes has enhanced and encouraged the use of OTP services, <u>SAMHSA has extended the exemption</u> for one year following the end of COVID-19 emergency.

OPIOID USE DISORDER COUNTS & OPIOID TREATMENT PROGRAMS



Among Oregonians who used medical services from January – December 2021, **57,366** had an OUD diagnosis.



Most OTPs are concentrated along the Interstate-5 (I-5) corridor serving Oregon's 4 largest metro areas – Portland, Salem, Eugene, and Medford. Coastal, rural, and frontier communities in Oregon are severely lacking in access to MOUDs and other OUD treatment.

MEDICATIONS FOR OPIOID USE DISORDER DATA

METHADONE

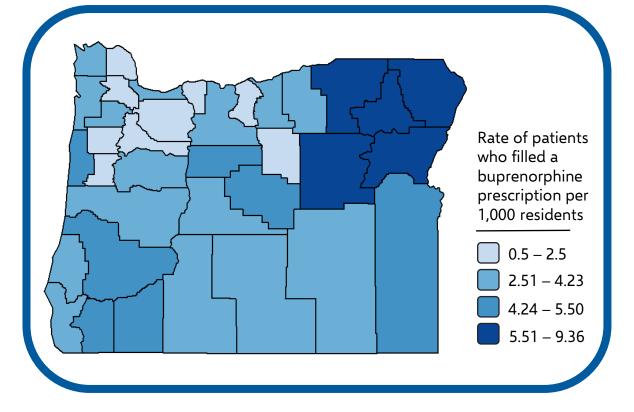
As of spring 2022, there are more than 10,000 active methadone patients at Oregon OTPs

BUPRENORPHINE

- While the X-waiver requirement was still active from Jan. − Dec. 2021, only half (54.5%) of Xwaivered providers in Oregon dispensed a buprenorphine prescription. Of those prescribing, only 39.3% wrote more than one prescription
- ► Among the 57,366 people diagnosed with OUD from January December 2021, 13,450 (23.4%) patients were dispensed buprenorphine, a 1.7% increase from the previous year

NALTREXONE

- Prescribed for opioid use disorder and alcohol use disorder
- Among the 57,366 people diagnosed with OUD from January December 2021, 1,454 (2.5%) patients were dispensed oral naltrexone, a 0.1.% increase from the previous year



TAKE AWAYS

- Rates of OUD and co-occurring OUD and stimulant use disorder are high in Oregon
- MOUD is proven effective and national policies are being implemented to improve access
- ▶ MOUD is underutilized in Oregon. More patients with OUD could benefit from expanded access to MOUD, including methadone, buprenorphine, and naltrexone

Questions? Contact Courtney Fultineer at OHA at Courtney.Fultineer@oha.oregon.gov

Data sources: Comagine Health All Payer All Claims Database; Oregon Health Authority, SAMSHA, Population Research Center – Portland State University