Medication for Opioid Use Disorder

What is medication for opioid use disorder?
Medication for opioid use disorder (MOUD) is also known as medication-assisted treatment (MAT). MOUD is:

- Use of an FDA–approved medication, with counseling and behavioral therapies.
- A “whole-person” approach to treat substance use disorders (SUD).

What is an opioid treatment program?
An opioid treatment program (OTP) is a program for people diagnosed with opioid use disorder (OUD) that utilizes MOUD. OTPs provide services that aim to reduce, stop or prevent:

- Use of illicit drugs
- Potential crime, and
- Spread of infectious disease.

All OTPs must be:

- Accredited by a Substance Abuse and Mental Health Services Administration (SAMHSA)-approved accrediting body, and
- Certified by SAMHSA.

<table>
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<tr>
<th>Medication for opioid use disorder and who can prescribe</th>
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<tbody>
<tr>
<td>Methadone</td>
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<tr>
<td>Full agonist medication*</td>
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<td>Prescribed through a regulated opioid treatment program (OTP)</td>
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* An agonist is a drug that activates certain receptors in the brain. Full agonist opioids activate the opioid receptors in the brain. This results in a full opioid effect. A partial agonist activates the opioid receptors in the brain. However, this is to a much lesser degree than a full agonist. Partial agonists, like buprenorphine, also act as an antagonist. This means it blocks other opioids, while it allows for some opioid effect of its own to suppress withdrawal symptoms and cravings.

† A physician, nurse practitioner or physician assistant who registers with the Drug Enforcement Administration (DEA) applies and is qualified under the Drug Addiction Treatment Act (DATA) is issued a waiver. This provider is called a DATA waived practitioner (DWP). They are authorized to conduct maintenance and detoxification treatment. They use specifically approved schedule III, IV, or V narcotic medications. DWPs are only granted to qualified practitioners. For more information see: https://www.federalregister.gov/d/2018-01173.
What is the scope of the problem? (1)

Oregon ranks in the bottom third of states for access to buprenorphine, despite the high prevalence of OUD statewide. To prescribe buprenorphine, a provider must:

- Complete an eight-hour training (for physicians), and
- Complete at least 24 hours of training (for qualifying nurse practitioners and physician assistants), and
- Obtain a Drug Enforcement Agency (DEA)-approved practitioner waiver.

As of Jun. 31, 2018, there were 825 providers who met the criteria above. These providers are authorized to prescribe office-based MOUD to persons with OUD in Oregon. However, from Jan. 1, 2018 to Jun. 31, 2018, only 57.1 percent of providers had prescribed buprenorphine at least once. Of these same providers, less than half of them (49.2 percent) prescribed buprenorphine to 1-10 patients. This data points to a need for DATA waivered providers to actively prescribe buprenorphine to persons with OUD and the capacity to improve.

Where are providers with a buprenorphine waiver?

The map here shows the number of providers with waivers by county. It also shows the prevalence of OUD in Oregon Health Plan (OHP) patients 12 and older. However, map does not represent non-OHP persons. Therefore, it does not fully account for the treatment need in the general population.

The Interstate 5 (I-5) corridor serves Oregon’s four largest metro areas; Portland, Salem, Eugene and Medford. The highest concentration of office-based buprenorphine waiver providers are along I-5. Also, 16 of the 19 OTPs in Oregon are along I-5. This leaves coastal, rural, and frontier communities severely under-served for OUD treatment.