

From X to Rx

Confronting Real World Obstacles to
Buprenorphine Prescribing

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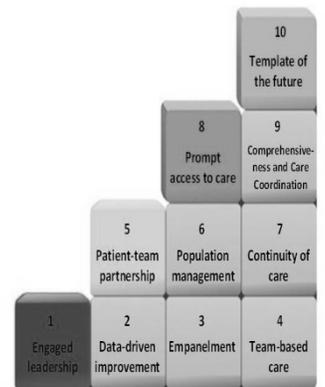
October 21, 2015

CSAM State of the Art Conference
San Francisco, CA

Drug Addiction is a Chronic Disease

- Primary care is the perfect place for treatment

- Frequent contact
- Collaborative care
- Longitudinal relationships
- Family and social context



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State and National Treatment Gaps

- Opioid use disorders - 891.8 per 100,000 aged 12 or more (2012, US).
- Buprenorphine treatment capacity 420.3 per 100,000.
- Methadone patients 119.9 per 100,000.
540.2
 - 96% of states and DC had OUDs rates > buprenorphine txd capacity
 - 37% had a gap of at least 5 persons per 1,000
 - 38 states reported 75% OTPs were at 80% or more capacity

2015;105:e55-63

Jones, et.al., AJPH,

% U.S. primary care MDs
prescribing buprenorphine

3%

Rosenblatt, RA. Ann Fam Med 2015;13:23-26

Obstacles to overcome - 1

Rural family medicine physicians in Vt and NH surveyed

80% saw pts regularly who were addicted to opioids.

70% felt they had a responsibility to treat pts with opioid addiction.

- Inadequately trained staff (88%)
- Insufficient time (80%)
- Inadequate office space (49%)
- Cumbersome regulations (37%)
- Other factors identified: lack of knowledge, mistrust of pts., lack of access to addiction specialists

DeFlavio, JR, et.al. Analysis of barriers to adoption of buprenorphine maintenance therapy by family physicians. *Rural and Remote Health* 2015; 15: 3019

Obstacles to overcome - 2

- Family physicians with DEA waivers in Washington state:

With positive attitudes to prescribing buprenorphine

Barriers include:

- Not having a practice partner who prescribes
- Lack of institutional support
- Lack of mental health and psychosocial support

Hutchinson, E., et.al. Barriers to family physicians prescribing buprenorphine. *Ann Fam Med* 2014; 12:128-133

The Curse of PARs (but not TARs)



- The Good News –
TAR's (Medi-Cal's Treatment Authorization Requests):
As of June 1, 2015, TARs are no longer required for most buprenorphine products:
 - Rx with a diagnosis of OUD
 - When written by a waived MD

- The Bad News – PARs (Prior Authorization Requests) are still needed for all our Part D Medicare companies, not to mention the process (X*#!!z@!!)



Several ways to get DEA Waivers

(Also called your "X" number for buprenorphine)

- www.aoaam.org - "Half and Half course" (free)
- www.aaap.org
- www.apa.org
- www.asam.org
- www.buppractice.com



Increasing Provider Capacity – TREAT Act

- S 2645
 The Recovery Enhancement for Addiction Treatment Act

- HR 2536

If passed:

- Increases initial number of treated patients from 30 – 100
- After 1 year, for “qualifying*” physicians, may request no upper limit of treated patients. (*includes ABAM certification, 24 hrs additional training, fully participates in PDMP, qualified practice setting)
- Allows NP’s and PA’s to prescribe with specified training under waived MD supervision.