MEDICATION-ASSISTED TREATMENT CENTERS OF EXCELLENCE

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THE RISK OF MISUSE AND DIVERSION OF BUPRENORPHINE FOR OPIOID USE DISORDER APPEARS TO BE LOW IN MEDICARE PART D

With an increase in opioid-related overdose deaths, it is important to ensure accessibility to buprenorphine for individuals with OUD. Although buprenorphine has been proven to decrease opioid use and opioid-related deaths, there is potential for misuse and diversion. This data brief assessed the risk of misuse and diversion of buprenorphine in Medicare in 2021, before the DATA 2000 Waiver was repealed. Findings suggest that the risk of diversion is low in Medicare Part D as 97% of enrollees received the recommended amounts of buprenorphine, **just 0.7% of enrollees received very high amounts of buprenorphine, and only a small number of enrollees received buprenorphine at the same time as they received high amounts of opioids for pain**. Lastly, only a small number of prescribers (N=35) showed concerning patterns. These findings suggest that misuse and diversion among Medicare Part D recipients is low, and **they support the repeal of the Data 2000 Waiver, increasing access to buprenorphine for individuals with OUD.**

WHAT'S INSIDE

UPCOMING EVENTS

Pharmacist's Role in NJ Naloxone 365 Program

6/2: ECHO: Smoking Cessation in those with OUD

6/5: SHE Symposium

6/15: Best Practices in Trauma Informed OD Prevention Conference

6/22: NJ Opioid Recovery & Remediation Fund Advisory Council

HEADLINES

Bupe Tx For OUD: Comparison Of Insurance Restrictions, 2017-21

Trends in Methadone Dispensing for OUD After Medicare Payment Policy Changes

Exploring Patient Perspectives on Low-Barrier Treatment for OUD

DEA, SAMHSA Extend COVID-19 Telemedicine Flexibilities for Prescribing Controlled Meds

RESOURCES

NJFamilyCare: Medicaid Unwinding Process

Evening ECHO: Caring for Pregnant & Parenting People with OUD

UPCOMING EVENTS



SUD PROJECT ECHO: SMOKING CESSATION IN THOSE WITH OUD

FRIDAY, JUNE 2ND, 2023 (12 PM-1 PM)

At every live ECHO session we explore active patient challenges from multiple perspectives. We each hold a piece of the puzzle and everyone is welcome to share experiences. You'll meet practitioners from across the state through a simple video interface and become part of a collegial community. You'll have a comfortable place to return and will build on what you're learning, month to month.

THE PATH SHE TAKES: A WOMAN'S JOURNEY THROUGH PREGNANCY & RECOVERY

MONDAY, JUNE 5TH, 2023 (11 AM-2 PM)

Join us for our first annual SHE symposium where you will hear expert speakers within the field of pregnancy and recovery explore topics about mental health, medication assisted treatment, harm reduction and state of New Jersey policy reviews.

BEST PRACTICES IN TRAUMA INFORMED OVERDOSE PREVENTION CONFERENCE

THURSDAY, JUNE 15TH, 2023 (9AM-3:30PM)

As NJ looks to strengthen and expand the overdose prevention and recovery ecosystem, it's critical to reflect on past successes and challenges and dive deeper into the data to ensure forward progress. Join to better understand which communities are being disproportionately impacted and hear from leaders and changemakers across the country that are innovating care and saving lives.

NJ OPIOID RECOVERY& REMEDIATION FUND ADVISORY COUNCIL

THURSDAY, JUNE 22ND, 2023 (11AM-1PM)

ESSEX COUNTY COLLEGE
CLARA E. DASHER STUDENT CENTER
303 UNIVERSITY AVENUE, NEWARK, NJ

In addition to the input already received through the online portal, the NJ Opioid Recovery and Remediation Fund Advisory Council is holding listening sessions to gather public input on distributing opioid settlement funds. NJ will receive at least $641 million over 18 years as part of a federal opioid settlement.

THE COMMUNITY PHARMACIST'S ROLE IN NJ'S NALOXONE 365 PROGRAM

Naloxone, an opioid antidote, is a vital harm reduction tool that has significant barriers to access due to cost and stigma. DMHAS has implemented the NJ "Naloxone 365" program to remove barriers to this lifesaving medication by making it more accessible to individuals requesting naloxone in community pharmacies. The main objective of this program is to explain the importance of "Naloxone 365," so that community pharmacies are provided with the tools and information to effectively execute this program. *This free course is presented by our Clinical Pharmacist/Academic Detailer, Dr. Clement Chen, and provided by the NJ Pharmacists Association, and the NJ DHS. Credit will be awarded only after successful completion of the timed webinar, quizzes and an evaluation.*

RECENT NEWS

BUPRENORPHINE TREATMENT FOR OPIOID USE DISORDER: COMPARISON OF INSURANCE RESTRICTIONS, 2017–21

Buprenorphine treatment has been proven to lower mortality risks by 50% among people with OUD but remains underused in the US due to barriers like insurance restrictions. This study examined and compared changes in insurance-inflicted utilization restrictions for buprenorphine across Medicaid, Medicare Advantage, and commercial insurers, as well as between immediate-release and extended-release buprenorphine from 2017 to 2021. They found that authorization requirements decreased in recent years but were more common for extended-release than immediate-release buprenorphine across all insurers. A higher percentage of Medicaid formularies covered extended-release buprenorphine. **Policy makers should focus on expanding extended-release buprenorphine and removing prior authorization requirements across all insurers. The removal of these requirements is associated with lower rates of emergency department and hospital admissions among people with OUD, as well as lower likelihood of returning to drug use.**

TRENDS IN METHADONE DISPENSING FOR OPIOID USE DISORDER AFTER MEDICARE PAYMENT POLICY CHANGES

Medications for opioid use disorders have been proven to be effective in treating OUD, with methadone being one of the most effective treatments. However, methadone was not covered as an option for OUD treatment by the Centers for Medicare & Medicaid Services until January 2020. This cross-sectional study examined whether the rates of dispensing methadone for OUD increased after the policy change, and if those rates varied by beneficiary age and dual eligibility for Medicaid. Findings showed that the **policy change did in fact increase access to medication treatment for Medicare beneficiaries with OUD**. These findings suggest a greater uptake by beneficiaries under age 65 years, which was largely driven by dual eligibility beneficiaries.



RECENT NEWS

"COME TRY IT OUT. GET YOUR FOOT IN THE DOOR:" EXPLORING PATIENT PERSPECTIVES ON LOW-BARRIER TREATMENT FOR OPIOID USE DISORDER (OUD)

Calls for implementation of low barrier care are increasing as overdose rates rise, and many have come to realize that traditional treatment models are not adequately meeting the needs of patients with OUD. Low barrier care models are designed to be patient-centered but there is a limited number of studies evaluating patient perspectives of low-barrier treatment. This study aimed to understand the barriers and facilitators of engagement in a low-barrier, mobile buprenorphine treatment program through patient point of view. The analysis found three main facilitators of treatment:

1. Program structure including flexibility, rapid medication access;
2. Harm reduction approach including the program's acceptance of substance use and setting realistic goals; and
3. Strong relationships with team members.

These findings highlight the **importance of prioritizing patient experiences and perspectives in substance use treatment.**

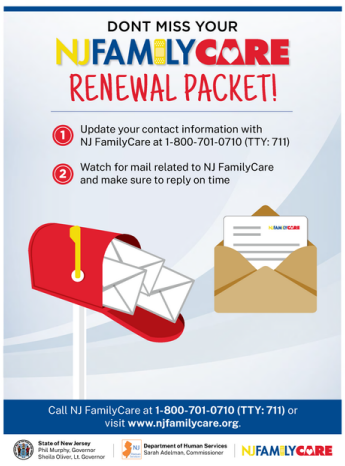


DEA, SAMHSA EXTEND COVID-19 TELEMEDICINE FLEXIBILITIES FOR PRESCRIBING CONTROLLED MEDICATIONS FOR SIX MONTHS WHILE CONSIDERING COMMENTS FROM THE PUBLIC

The DEA and SAMHSA issued temporary rules, extending telemedicine flexibilities for prescribing MOUD for 6 months, beginning May 11th and ending on November 11th, 2023.

RESOURCES

MEDICAID "UNWINDING" PROCESS: POST-COVID PHE



Since March 2020, NJ FamilyCare/Medicaid has followed special rules related to the federal COVID-19 Public Health Emergency. These rules have allowed most NJ FamilyCare/Medicaid members to keep their health coverage without recertifying. This continual enrollment ended on March 31, 2023 and NJ FamilyCare will begin "unwinding." During the unwinding, NJ FamilyCare/Medicaid will send renewal packets that members must complete and return to determine if they are still eligible. Members who don't respond with this packet will lose their coverage. Please see the following resources for further information:

1) NJFamilyCare Medicaid "Unwinding" FAQs
2) NJFamilyCare Medicaid "Unwinding" English Flyer
3) NJFamilyCare Medicaid "Unwinding" Spanish Flyer

EVENING ECHO SERIES: CARING FOR PREGNANT & PARENTING PEOPLE WITH AN OUD



SELECT TUESDAYS FROM 6:30PM-7:30PM

Join the MCH OUD ECHO at a special evening time for practitioners to learn and discuss the latest updates on helping pregnant patients with substance use disorders and their unborn babies. You will understand how to build a more trusting, empowering relationship for pregnant people with an OUD. You will learn best practices for treatment and identify helpful community resources with a panel of Maternal Child Health and Addiction Medicine specialists and your peers. Help ensure that NJ mothers can give birth safely with the treatment and support they receive within their community.

MEDICATION-ASSISTED TREATMENT
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24/7 MAT Provider Hotline: 844-HELP OUD (844-435-7683)

Northern NJ MAT COE Website & Email
Southern NJ MAT COE Website & Email