

# Physician waivers to prescribe buprenorphine increases potential access to treatment

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American physicians with waivers allowing them to provide office-based medication-assisted buprenorphine treatment to patients addicted to opioids were able to increase potential access to effective medication-assisted treatment by 74 percent from 2002 to 2011, according to a new RAND Corporation study.

Published in the June issue of the journal *Health Affairs*, the study shows that the increased number and geographic distribution of physicians obtaining waivers to prescribe buprenorphine has widened potential access to effective treatment for those with addiction to heroin or [prescription painkillers](#).

Traditional opioid [treatment programs](#) require patients to take methadone on-site at a clinic under direct supervision of a healthcare provider. Such programs typically are located in urban areas, which leave most people in rural areas with little access to treatment. Buprenorphine, approved by the FDA in 2002, can be prescribed by office-based physicians who have completed an approved course.

"In the past, many people living in rural counties have had no practical way to get treatment. They have seen the greatest benefit from the introduction of buprenorphine and the growth in the number of physicians approved to prescribe the drug," said Dr. Bradley Stein, the study's senior author, associate professor of psychiatry at University of

Pittsburgh School of Medicine and a senior natural scientist at RAND, a nonprofit research organization. "Those rural residents with addiction to heroin or prescription painkillers now have an opportunity to receive treatment with effective medications, which is an essential piece of successfully addressing the nation's recent epidemic of opioid overdoses."

Using data from the Substance Abuse and Mental Health Services Administration, the research team identified counties with shortages of waived physicians or shortages of opioid treatment programs. By 2011, the percentage of counties with a shortage of waived physicians fell dramatically from 98.9 percent to 46.8 percent. The change meant the percentage of the U.S. population living in a county with a treatment shortage declined from 49 percent to 10 percent.

The decline in counties with shortages in waived physicians resulted in an estimated 74 percent increase in the fraction of the U.S. population with potential access to treatment.

With an estimated 2 million people across the country affected by opioid abuse, the research team believes the potential access to treatment through waived physicians is critical to increasing [effective treatment](#) for these individuals, particularly outside of metropolitan areas. However, the researchers note that significant barriers to treatment still exist, including stigma, adequate insurance coverage and onerous [treatment](#) requirements.

Provided by RAND Corporation

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