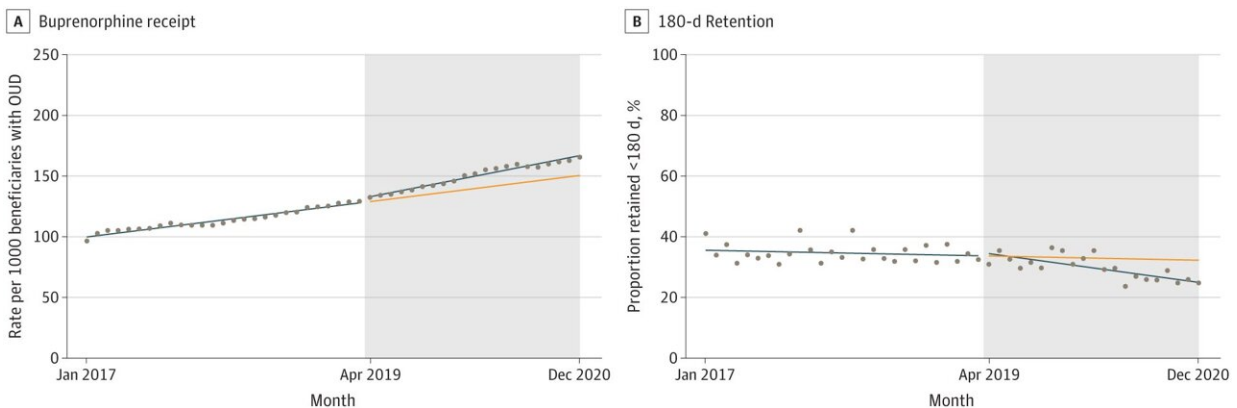


NJ Medicaid reforms tied to increased use of opioid addiction treatment

May 19 2023, by Andrew Smith



Trends in Buprenorphine Receipt and Retention Before and After Implementation of New Jersey Medicaid Initiatives. Gray shaded areas represent postimplementation period. Blue line represents observed trends. Orange line represents the counterfactual (ie, projected postinitiative trends without implementation). Dots represent monthly observations. Credit: *JAMA Network Open* (2023). DOI: 10.1001/jamanetworkopen.2023.12030

Reforms to New Jersey's Medicaid program successfully spurred ongoing increases in buprenorphine prescriptions for the treatment of opioid addiction, according to a Rutgers analysis.

Although medications such as [buprenorphine](#) effectively combat [opioid addiction](#), less than 30 percent of potential users receive them nationwide. New Jersey sought to increase prescription numbers with

three Medicaid reforms that took effect in 2019. The reforms:

- Removed prior authorization requirements for buprenorphine prescriptions
- Increased reimbursement rates for in-office opioid addiction treatment
- Established regional centers of excellence for addiction treatment

Medicaid records showed steady increases in buprenorphine prescriptions before 2019, but the rate of growth increased by 36 percent after the reforms took effect, and this increased rate of growth persisted until the end of the study period in December 2020.

A similar trend affected caregiver behavior. The percentage of caregivers prescribing buprenorphine had been rising before the reforms took effect, but it increased faster after their implementation.

New Jersey also experienced faster growth in buprenorphine prescriptions to Medicaid patients than did other states, the analysis reported, a strong indication that the boosts stemmed from the state's reforms rather than some unrelated nationwide trend.

The only disappointment came from the study's measurement of long-term usage. The percentage of buprenorphine prescriptions that remained active for more than 180 days didn't rise during the study period.

"Usage remains far below the ideal where virtually everyone battling opioid addiction receives an effective medical treatment like buprenorphine," said Peter Treitler, research project manager for the Rutgers Institute for Health, Health Care Policy and Aging Research and lead author of the analysis published in *JAMA Network Open*. "However, our analysis suggests these reforms may get us to that point years before

we would have reached it under the previous policies."

Buprenorphine—a once-daily prescription pill sold in the United States as Suboxone, Zubsolv and Sublocade—works in two ways. First, it binds to the same [brain cells](#) as drugs such as opium, heroin, morphine, oxycodone and fentanyl. Once it's in place, those other drugs struggle to dislodge it, bind to the [target cells](#) and produce addictive highs. Second, it stimulates a milder effect that reduces cravings for those other drugs and prevents withdrawal symptoms.

Regulators once placed extra restrictions on buprenorphine prescriptions because they worried its mood-altering effects would create more addicts than it cured. These restrictions, which forced caregivers to justify each new buprenorphine prescription at length and investigated providers who prescribed the drug "too often," led many to avoid prescribing the drug at all, said Treitler, who added Medicaid's low reimbursement rates for office-based addiction treatment further reduced buprenorphine availability to poor patients.

Regulators have relaxed many restrictions on buprenorphine because opioid [addiction](#) has increased. Recent research has shown buprenorphine to be both safer and more effective than previously thought. The reforms to New Jersey's Medicaid program further reduced barriers to medication usage among its patients.

"They looked at what obstacles were blocking the usage of a valuable [drug](#) in this particularly underserved patient population," Treitler said. "They removed several of the biggest obstacles. And the results so far suggest they're getting the desired results."

Indeed, the positive numbers seen in initiatives such as the one undertaken by New Jersey's Medicaid program may finally be affecting the most important number of all: overdose deaths. After several decades

of speedy increases, overdoses nationwide rose by just 500 in 2022.

The trend was even better in New Jersey. Total overdose deaths fell by 232 from 2021 to 2022, and they were 93 lower in the first three months of 2023 than in the first three months of 2022.

More information: Peter Treitler et al, Buprenorphine Utilization and Prescribing Among New Jersey Medicaid Beneficiaries After Adoption of Initiatives Designed to Improve Treatment Access, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.12030](https://doi.org/10.1001/jamanetworkopen.2023.12030)

Provided by Rutgers University

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