

## Opioid use disorder: Supporting recovery with a medication-assisted treatment approach



### **Opioid overprescription: Cause and effect**

The United States is currently facing an opioid-use crisis. Drug overdose deaths are now the leading cause of accidental death,<sup>1</sup> even exceeding motor vehicle accidents.<sup>2,3</sup> This trend is driven largely by increased cases of opioid use disorder.<sup>4</sup> In fact, it's been estimated that in the United States, someone dies from the complications of an opioid overdose every 18 minutes.<sup>5</sup> This uniquely American problem started with the overprescription of pain medication, especially powerful narcotics like opioids. With 259 million opioid prescriptions, there is enough medication for each adult American to have one bottle of pills every year.<sup>6</sup>

The net effect of opioid overprescription resulted in more than 33,000 deaths in 2015. To give some perspective on that statistic, it's been estimated that over a two-year period with this death rate, more Americans are dying from opioid use disorder (OUD) than died in the entire Vietnam War.<sup>7</sup>

Twenty years ago, opioid use disorder was a relatively rare condition and it appeared to impact people in lower socio-economic strata more heavily. Today this disorder doesn't discriminate. It can affect people of all ages, gender, race, social and economic status, even impacting groups where opioid use disorder historically didn't occur.

In 2016, the Surgeon General came out with a landmark report where he clearly identified OUD as a chronic brain disease and discouraged people from viewing it as a character flaw or moral failing.<sup>8</sup> Understanding that OUD is a chronic medical condition has changed the understanding of how it should be treated.

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**Opioid use disorder (OUD)** is a condition characterized by a pattern of compulsive opioid use and the harmful consequences of repeated opioid use.

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## Medication-assisted treatment: An effective treatment option

Given that OUD is a chronic medical condition, one of the most effective approaches is to manage it over an extended period of time. It can't be cured by a short-term intervention. One of the most effective treatments for OUD is medication-assisted treatment (MAT).<sup>9</sup> MAT pairs therapies such as counseling or cognitive behavior therapy with FDA-approved medications to treat substance use disorders and prevent opioid overdose.<sup>10</sup> Common medications include methadone, buprenorphine and naltrexone.

Medication-assisted treatment consists of three elements:

1. Medication used to manage the effects of withdrawal from the opiates
2. Therapy or counseling, such as cognitive behavioral therapy, that may also help provide the patient with skills to aid in recovery
3. Connection to long-term support that will encourage patients to stay engaged in treatment, preventing the risk of relapse

## Standard treatment protocols fall short

Traditionally substance use was treated with an abstinence-based process; people were encouraged to avoid using any substance. However, studies suggest that with MAT, the chances of remission within a year are significantly greater: up to 50 percent<sup>11</sup> compared to 10 percent with traditional treatment.<sup>12</sup>

A traditional abstinence-based approach provides fairly standardized care. It doesn't align with the more recent understanding of how to treat chronic illness, and it doesn't address the comorbid conditions that can occur with OUD. MAT provides individualized care that's focused on long-term recovery. Medication specifically addresses how patients can deal with their cravings, which is one of the leading causes of relapse.

Using MAT to engage patients, they are more likely to stay in recovery. Another benefit of this approach: when people withdraw from opiates, they lose their tolerance to the drug and are at risk of accidental overdose. But the medication blocks cravings, decreasing the risk of death.

## Why OUD is so challenging to treat

Although MAT is an effective treatment, fewer than 10 percent<sup>13</sup> of people actually come forward for this treatment for their OUD. Here's why:

- Stigma. With many behavioral conditions, there is significant stigma associated with getting treatment, so people don't ask their physician for help.
- Inconsistent provider expertise. The treatment community is not fully adapted to using evidence-based treatment, so there is inconsistency in provider expertise. Some still may offer an old, abstinence-based approach, which is less effective and doesn't engage people in treatment.
- Bias against MAT. Some providers have a bias against using MAT, which makes it very difficult for someone seeking treatment when they don't know what to ask for or whom to trust.
- Perceptions about short-term treatment. Many people believe that the "traditional" detox is the only effective treatment for substance use disorder. It is important for health plans and practitioners to view OUD as a chronic medical condition, and set the expectation with the patient on the front end that this is going to require months or even years of treatment to get back to a normal life.

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**Every 18 minutes** there is a death from an opioid overdose<sup>5</sup>

**259 million opioid prescriptions** Enough to give every American adult their own bottle of pills<sup>6</sup>

### 33,000 deaths in 2015

Over a two-year period, more Americans died of opiate addiction than died in the entire Vietnam War.<sup>7</sup>

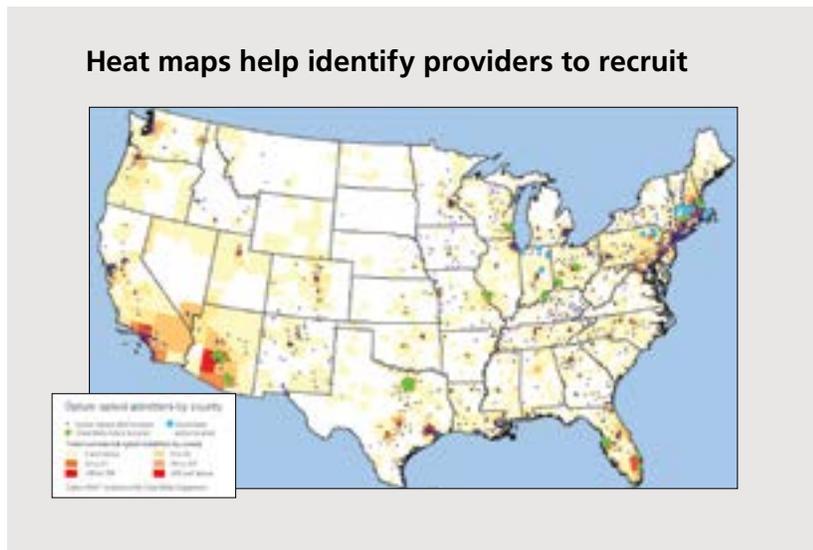
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## How Optum is addressing the OUD challenge

Optum is working to expand access to this life-saving treatment. Over the past several years, more than 2,000 MAT providers at more than 4,000 locations nationally have been added to the network. The focus is to assure a 95 percent or better geographic access in rural, suburban and urban areas.

Using Optum data, heat maps help identify areas that require network expansion. Heat maps plot where members who have a history of OUD live against available providers in the area. For example, Phoenix is a red zone where more providers are being added to expand access for members.

**Sara's story:** Learn how MAT can make a difference



[Watch the video](#)

## Supporting MAT through payment incentives

Payment incentives help engage members in their treatment. Because an OUD is a chronic condition, initial treatment involves multiple office visits. So if members have fewer out-of-pocket expenses, they can focus on actively engaging in treatment.

Health plans may consider moving to a bundled payment model. MAT providers are paid for a group of services associated with an episode of care rather than for individual services. Reimbursements for the medication management services, counseling services and lab services are all bundled into a single monthly payment. This system is a win for everyone because:

- Health plans see lower costs for services through bundle discounts
- Members have fewer out-of-pocket expenses
- Providers have a more streamlined billing process

### Partnerships can increase MAT accessibility

Key partnerships can help boost the availability and accessibility of professional MAT services. Health plans may want to consider partnering with national MAT provider networks, as well as medical service providers (e.g., urgent-care centers with a national footprint) that can implement co-located MAT services, thus increasing member access to this effective treatment.

Along with more locations, there's also a need for more expert providers. New legislation allows for other provider types to participate in MAT services, expanding patient access. In July 2016, nurses with prescriptive authority and physician assistants were also allowed to provide MAT services.

Finally, it is important to coordinate with network primary care physicians (PCPs), a key referral source and trusted advisor for many members. By providing PCPs with guidance and resources to help identify OUDs in their practice and nearby expert MAT providers, more patients can be referred into these services.

### 24/7 helpline can offer immediate OUD assistance to members

A 24/7 helpline can direct more referrals to MAT services. Using a toll-free number for members, family members and significant others offers a way to identify the best treatment options for people with substance use disorder or OUD. This helpline should increase engagement with in-network treatment options.

One of the challenges with substance use disorders is that people often receive direct marketing that may lead them to out-of-state programs with providers that may not offer the best evidence-based practices. Introducing a helpline allows callers to be directed to effective treatment, expanding referrals. When members contact the helpline, they would be connected with a treating provider who will evaluate their needs, ideally within 24 hours of request. Ultimately, people would be able to get the care they need even faster.

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### Learn more about medication-assisted treatment (MAT)



Download the white paper

## Why Optum?

Because substance use disorders are chronic medical conditions, you need to find effective approaches to help patients manage them long term. Optum is committed to providing the information, resources and programs to help health plans address opioid use disorder.

## About Optum

Optum is a leading health services and innovation company dedicated to helping make the health system work better for everyone. With more than 132,000 people collaborating worldwide, Optum combines technology, data and expertise to improve the delivery, quality and efficiency of health care.

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Learn how Optum can help you support patients with MAT services. Contact an Optum representative.

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