

Hope for the future:

Medication-assisted treatment (MAT) for substance use disorders

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Substance use disorders have reached epidemic proportions in the U.S. Although their prevalence might make us feel powerless, we do have solutions to help people recover from these complex diseases. Medication-assisted treatment (MAT) is one of the most promising, evidence-based treatments — yet it is vastly underused.

The U.S. Surgeon General has reported that nearly 21 million Americans meet the diagnostic criteria for a substance use disorder. Clinically, this is defined as problematic substance use that causes significant distress or impairment. Many millions more misuse substances each year, putting them at risk for developing addiction.¹

Annually, drug overdoses kill an estimated 72,000 people in the U.S., with two-thirds of those deaths involving an opioid.² While opioids make headlines, alcohol and other substances also have equally damaging effects on peoples' lives. Associated with 88,000 deaths each year, alcohol is the nation's third leading preventable cause of death.³

Substance use disorders are chronic, treatable medical conditions — not a moral failing or character flaw. Effective treatment and support can empower those who are struggling to live fulfilling lives in recovery.

MAT: Compassionate and effective treatment

Health providers and communities do have one particularly promising option to help turn the tide. MAT is an evidence-based treatment that combines FDA-approved medications with counseling, behavioral therapy and recovery support. It can diminish the risk of overdose, relieve cravings and promote healing.⁴

With MAT, individuals should receive a personalized treatment plan that includes counseling and community-based support. They are also prescribed medication in carefully controlled doses to help overcome dependence on the substance. These medications reduce cravings and withdrawal symptoms, block the effects of the substance in the event of recurrence, and adjust chemical imbalances in the brain that develop during addiction. Medications include:

- **For opioid use disorder:** Methadone, buprenorphine or naltrexone
- **For alcohol use disorder:** Naltrexone (oral and long-acting injectable formulations), disulfiram or acamprostate⁵



“Medication-assisted treatment should be the recognized standard of care for opioid use disorders. ... Studies have shown that individuals with opioid use disorders have better outcomes with maintenance MAT.”

— Office of National Drug Control Policy

At the proper dose, MAT medications do not impair a person's mental capability, physical functioning or employability. In fact, individuals can safely stay on a maintenance dosage for extended periods of time. The medications allow people to engage more fully in proven behavioral interventions like counseling, so that they can begin to reclaim their lives. MAT also enables providers to address co-occurring disorders, such as anxiety and depression, that often accompany a substance use disorder.⁶

Compelling results from evidence-based treatment

The results are persuasive. Individuals who receive MAT are 50 percent more likely to remain free of opioid misuse, compared to those who receive either detoxification or psychosocial treatment alone.⁷ For people with alcohol use disorder, MAT may help them drink less often.⁸ Naltrexone specifically has been shown to help reduce binge drinking episodes.⁹

Furthermore, people can receive MAT in the communities where they live and work. Getting evidence-based treatment like MAT from local providers makes it more likely that patients will have the support system and regular touch points that are vital to sustaining recovery.

Barriers to MAT

Although research has demonstrated MAT's effectiveness, many people are struggling to access this treatment. Studies show that fewer than half of people with an opioid use disorder, and less than one in 10 with alcohol use disorder, receive MAT.^{11,12}

Despite compelling evidence about MAT's efficacy, many in the treatment community have not fully embraced it. Providers may be hesitant to prescribe medications to treat substance use disorders, and some individuals are uncomfortable taking a medication or receiving an injection.

In some regions, especially rural areas, there are not enough providers certified in MAT, and those who are certified may not have the capacity to treat everyone who needs care. Building capacity is not straightforward. Some providers are reluctant to take the additional training required to administer MAT. (Doctors take eight hours of training. Nurse practitioners and physician assistants can apply for a waiver to prescribe MAT after 16 additional hours of training.) Furthermore, some providers are concerned about treating people with substance use disorders in their practice due to the associated stigma.

Finally, the treatment community continues to hold conflicting viewpoints about an abstinence-based philosophy vs. medication treatment. Because of these varying perspectives, individuals need to educate themselves about treatment options to seek out an appropriate provider.

Increasing access to MAT

To help people overcome substance use disorders, Optum® is working to expand access to this evidence-based treatment. Advanced analytics enable us to monitor the demand for treatment, while geo-mapping helps identify regions where growing demand threatens to outstrip capacity. We then work with facilities in these regions to develop comprehensive MAT programs. In fact, over 90 percent of members are within 20 miles of a MAT provider.¹³



Substance use disorders have been regarded as a moral failing for centuries, a mindset that has helped establish a harmful and persistent stigma that affects how the medical community confronts addiction. We now know more about the nature of addiction and its effects on brain function, which has led to broader acceptance of the concept that substance use disorder is a disease, like diabetes, that can be treated.

— American College of Physicians¹⁰

We are also educating and encouraging providers to pursue training to administer MAT. In September 2018, Congress underscored the importance of these efforts when it passed the SUPPORT for Patients and Communities Act. The law increases flexibility for providers and makes MAT more available via telemedicine.¹⁴

For those who are in a moment of crisis and don't know where to turn, Optum offers the Substance Use Disorder Helpline via a toll free phone number. The helpline connects people to a specialized substance use recovery advocate who can arrange for a face-to-face evaluation with a provider, usually within 24 hours where available.

Hope for the future: Treating substance use disorders as chronic medical conditions

Substance use disorders are urgent public health issues that affect the whole country, including the people Optum serves. Too many people face the challenges of substance use disorder on their own. It is time for these issues to be addressed, for the health of individuals, and for the stability of families, communities and businesses.

The Surgeon General's report reminds us that substance use disorders are chronic medical conditions, much like diabetes or hypertension. Those who are struggling should receive medical care that is free of shame, judgment or fear for their privacy. People also need a safe, supportive environment, which is most often available through local, coordinated care.

By combining innovative services with powerful insights that light the way, Optum improves access to specialized providers, guides individuals into effective, local care and provides support so they can maintain their recovery. Our goal is to sustain and expand the essential work of stopping the stigma that surrounds substance use disorders and treatment. Our success offers the possibility of saving lives and restoring families and communities for generations to come.

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