

Examining Access to Buprenorphine-Waivered Prescribers in U.S. Counties



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THE ISSUE

Essential to combating the opioid crisis is expanding access to medications such as buprenorphine and methadone, the most effective treatments for opioid use disorder. Over the last decade, substantial efforts have been made to increase the number of clinicians trained to prescribe buprenorphine — and the number of clinicians completing this brief training and subsequently waived to prescribe buprenorphine has increased substantially. However, it was not clear how the growth varied across U.S. counties.



STUDY FOCUS

Researchers used data from the Substance Abuse and Mental Health Services Administration, the Drug Enforcement Administration, and the U.S. Census to examine growth in the number of buprenorphine-waivered providers per 100,000 persons. They also explored whether growth varied by county characteristics, including number of opioid-related overdose deaths; rurality; and socioeconomic factors such as income, education, and race/ethnicity.



KEY FINDINGS

From 2007 to 2017, the number of waived prescribers increased fourfold from about 4 to about 17 per 100,000 persons. Growth was faster in counties with higher rates of opioid-related overdose deaths in the preceding year, but slower in nonmetropolitan counties and in communities with lower levels of education.



IMPLICATIONS FOR POLICY

Growth in treatment access for opioid use disorder has been most rapid in counties hardest hit by the crisis, but equity issues remain. Renewed efforts are needed to expand access in rural communities and in counties whose residents have lower levels of education.

McBain RK, Dick A, Sorbero M, et al. Growth and Distribution of Buprenorphine-Waivered Providers in the United States, 2007–2017. *Ann Intern Med.* 2020. doi: <https://doi.org/10.7326/M19-2403>

