

Effective, Implementable, and Equitable State-Level Policies for Treating Opioid Use Disorder: Consensus from an Expert Panel



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THE ISSUE

States have considered, proposed, and implemented various policies to improve quality of treatment for opioid use disorder (OUD). However, there is scant empirical evidence about which policies are feasible to implement and which improve patient and population level outcomes.



STUDY FOCUS

This study examined expert consensus on which OUD treatment policies were effective and feasible to implement. An online modified Delphi process convened 66 stakeholders—clinicians, social service practitioners, addiction researchers, health policy decisionmakers, policy advocates, and persons with lived experience. Stakeholders were divided into two panels. One panel rated policy effectiveness on treatment engagement, treatment retention, OUD remission, and opioid overdose mortality. The second panel rated acceptability, feasibility, affordability, and equitability of each policy.



KEY FINDINGS

The experts viewed 2 policies—facilitated access to medications for OUD and automatic Medicaid enrollment for citizens returning from correctional settings—as highly implementable and highly effective in improving patient treatment outcomes and reducing population-level opioid overdose mortality.

Experts identified 4 policies as ineffective, difficult to implement, and inequitable: coercive drug treatment, involuntary civil commitment, requirements for drug toxicology testing when receiving medications for OUD, and counseling requirements for office-based buprenorphine treatment.



IMPLICATIONS FOR POLICY

This study presents the consensus of experts about which policies states could consider adopting or de-implementing in their efforts to improve treatment for OUD and help address the overdose crisis. Study findings also underscore the need for decisionmakers to ground OUD treatment policy design on health equity, bring attention to policies that may absorb resources while generating undesirable effects, and dismantle structures that are barriers to policy implementation.

Smart, R., Grant, S., Gordon, A. J., Pacula, R. L., & Stein, B. D. (2022). Expert Panel Consensus on State-Level Policies to Improve Engagement and Retention in Treatment for Opioid Use Disorder. *JAMA Health Forum*;3(9):e223285. doi:10.1001/jamahealthforum.2022.3285

