

Benefits of MOUD in outpatient and carceral settings

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Benefits of MOUDs in outpatient and carceral settings

Learners will:

Understand recent trends in opioid use and treatment from clinical, legal and regulatory angles

Describe the financial costs and benefits of medications for opioid use disorder in both outpatient and carceral settings

Describe the nonfinancial benefits of such medications in both settings

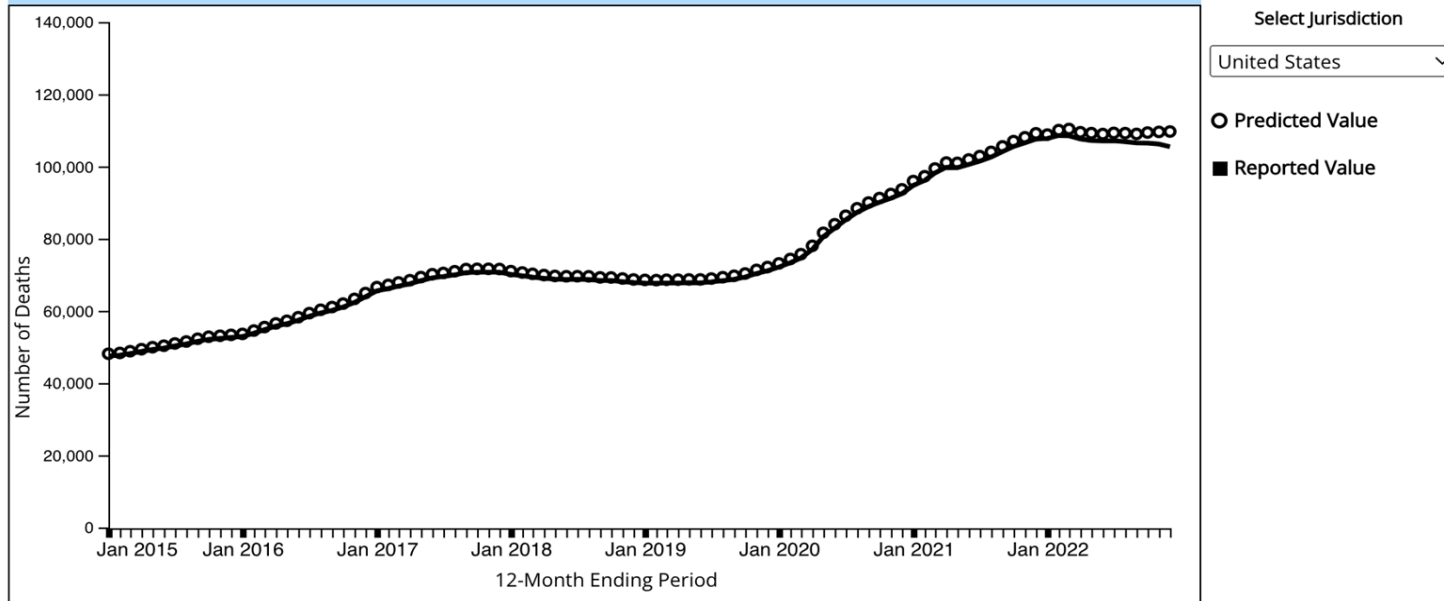
MOUD Updates: Use and Treatment

- OUD prevalence trending upward
 - 2016, 0.8% (NSDUH)
 - 2021, 2.0%
- Localized estimates are far higher in some places (Barocas et al)
 - MA, 4.6%, 2015
 - KY, 5.9%, 2019; 17.7% in some counties

MOUD Updates: Use and Treatment

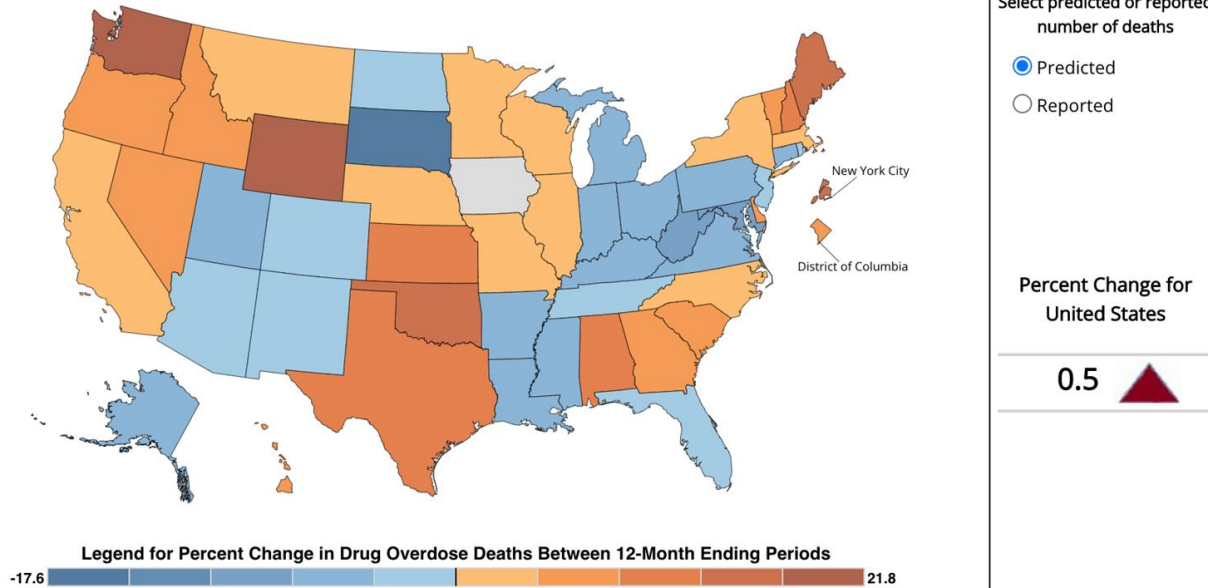
Based on data available for analysis on: May 7, 2023

Figure 1a. 12 Month-ending Provisional Counts of Drug Overdose Deaths: United States



MOUD Updates: Use and Treatment

Figure 1b. Percent Change in Predicted 12 Month-ending Count of Drug Overdose Deaths, by Jurisdiction: December 2021 to December 2022



MOUD Updates: Use and Treatment

- Moderate changes in MOUD options 2020-2023
 - OTPs more flexible in dosing, staffing
 - Increases in # OTPs
- New injectable options for buprenorphine
- Naloxone now OTC, two new options for meds

MOUD Updates: Use and Treatment

- Treatment trending upward? Conflicting findings.
 - In 2019, 1.7M people used buprenorphine as prescribed
 - AATOD stated 513,000 in OTP settings alone in 2021
 - 47.3% of people who received treatment for illicit SUD were through telehealth
 - 0.4% of the general population received MOUD in 2021
 - 22.1% of the people with OUD

MOUD Updates: Use and Treatment



- Still major gaps in general SUD treatment!
 - 91.6% of people who needed treatment did not get specialty treatment
 - Vast majority of those people (95.7%) did not see a need for treatment
 - 29% of people with illicit SUD received treatment in 2021
 - Outpatient
 - Self-Help
 - Hispanic people (0.6%) only half as likely to receive specialty SUD treatment

MOUD Updates: Legal/Regulatory

- Major changes in prescribing/dispensing landscape
 - X-waiver gone
 - OTPs
 - Greater dosing flexibility
 - More discretion for takeaways
 - Telehealth: Can still prescribe first time through telehealth

MOUD Updates: Legal/Regulatory

- [DOJ guidance](#) explicitly warned against institutional bans on particular medication (buprenorphine in this case)
 - Long-term residential recovery
 - Employee health programs
 - Drug courts
 - Jails
- [Colorado recently mandated](#) OUD screening, treatment plan, naloxone, care coordination for people in jail

MOUD Updates: Legal/Regulatory

- There have now been several (dozens?) of lawsuits regarding MOUD in jail
 - Death or injury
 - Injunctions in MA, ME, NM, NY
 - County, state, federal



MOUD Financial Benefits

Program name	Total benefits	Costs	Benefit to cost ratio
<u>Methadone maintenance for OUD</u>	\$9,124	-\$3,962	\$2.30
<u>Buprenorphine maintenance treatment for OUD</u>	\$8,645	-\$4,859	\$1.78
<u>Injectable naltrexone for opiates</u>	-\$1,040	-\$17,406	-\$0.06
<u>Injectable naltrexone for alcohol</u>	-\$7,814	-\$17,406	-\$0.45

MOUD Financial Benefits: Community

- In primary care, “compared with the status quo, buprenorphine and harm reduction kits reduced drug use–related mortality by 33% and was cost-effective.” ([Jawa 2023](#))
- A simulation model suggested that hospital-based buprenorphine and harm reduction would reduce overdoses at \$7600 to \$14300 per QALY ([Barocas \(2022\)](#))

MOUD Financial Benefits: Community



- Canadian study suggested that methadone dominates buprenorphine ([Enns 2023](#))
- A large national study showed that initial outpatient management was associated with far lower costs ([LaRoche 2020](#))

MOUD Financial Benefits: Corrections

- Recent [Massachusetts study](#) (Chatterjee 2023) suggested that comprehensive 3-drug correctional MOUD program vs. naltrexone-only
 - Increase quality-adjusted years of life
 - Cost less
- Horn (2020) showed that methadone maintenance therapy cost about \$23 per day of incarceration avoided
- A large Australian study demonstrated that all-in costs are lower for people released with buprenorphine

MOUD Financial Benefits: Community



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MOUD Nonfinancial Benefits: Community

- [Wakeman et al \(2019\)](#) showed that, in community settings, ONLY methadone and buprenorphine reduced
 - Serious opioid-related acute care
 - Overdose at three months
- [Fairley \(2021\)](#) showed that MOUD reduce overdoses, and work better when combined with OEND and psychotherapy.
 - Naltrexone was a dominated strategy
- [Samples \(2020\)](#) suggests that longer-term treatment associated with massive declines in ED, inpt utilization, OD

MOUD Nonfinancial Benefits: Corrections

- In jail/prison, [Green et al \(2018\)](#) showed a 60.5% reduction in fatal overdoses for people leaving incarceration after implementation a statewide program
- An far larger [Australian study](#) showed a similar (0.3% vs. 0.7%) decrease in fatal overdoses for treatment (buprenorphine on release) vs. control
- Also in Massachusetts, individuals who received buprenorphine had 20% lower recidivism and rearraignment rates than a comparable group that didn't ([Evans 2022](#))

Thank you for being attentive!



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