

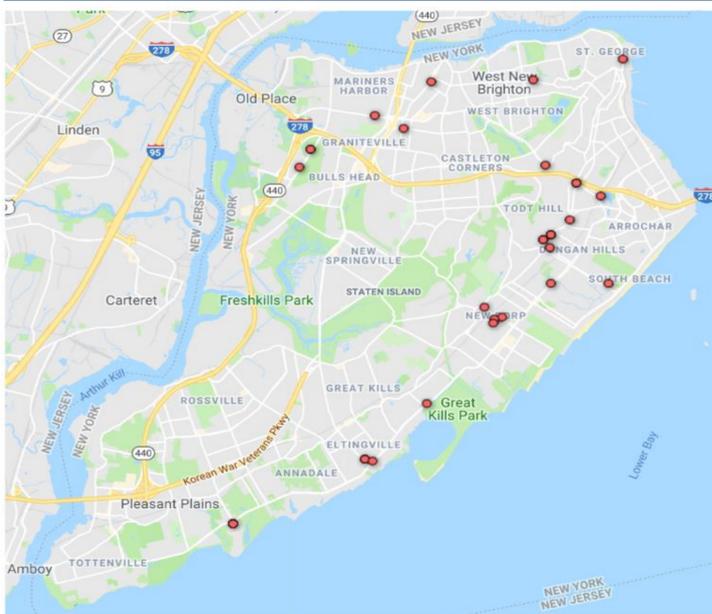
## Background

Opioid use disorder (addiction) and overdose from opioid analgesics and heroin constitute a significant public health problem in New York City and nationally. Overdose deaths from opioids are increasing even though they are preventable.

In 2015, there were 937 unintentional drug overdose deaths in New York City, nearly all (97%) overdose deaths involved more than one substance use. Eight in ten (80%) overdose deaths involved an opioid. Opioid analgesics, excluding fentanyl were involved in 214 (23%) of overdose deaths. The rates of overdose deaths involving opioid analgesics were highest among residents of Staten Island.

Many New Yorkers with this chronic health condition do not receive effective treatment. **Medication Assisted Treatment (MAT)** with medications such as **buprenorphine is an office based treatment that can be integrated into primary care** along with management of patients' other health needs. Despite buprenorphine's many benefits, **it remains underutilized.**

## Buprenorphine Waivered Physicians on Staten Island



## Objectives

Under the New York State Delivery System Reform Incentive Program (DSRIP), the Staten Island Performing Provider System (SI PPS), Staten Island Partnership for Community Wellness (SIPCW) and its partners have implemented multiple efforts to tackle the opioid epidemic.

The objectives of the Buprenorphine Expansion initiative were:

1. Assess the number of providers utilizing their buprenorphine waiver to provide MAT in their practice
2. Address any issues that may be hindering a provider from utilizing their waiver to provide MAT by offering resources and technical assistance
3. Increase the number of waived clinicians on Staten Island

## Methods

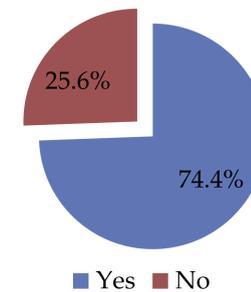
- ☐ Providers waived to prescribe MAT in the form of buprenorphine received one-on-one detailing visits by a Pharm D. staff member
- ☐ A one on one conversation took place to determine if the provider was using their waiver, their capacity as well as their views on MAT
- ☐ The conversation utilizing a questionnaire was conducted to help assess for any gaps and barriers if any that may be hindering the prescribing process
- ☐ A toolkit of local resources and best evidence based practices on incorporating MAT in a primary care practice were given to the providers at the time of visit
- ☐ SI PPS and SIPCW collaborated with the local city department of health agency to bring a free waiver training to help increase the number of healthcare practitioners that can provide MAT on Staten Island
  - ☐ Physicians (MDs and DOs), Nurse Practitioners (NPs), and Physician Assistants (PAs) were targeted for the training

## Results

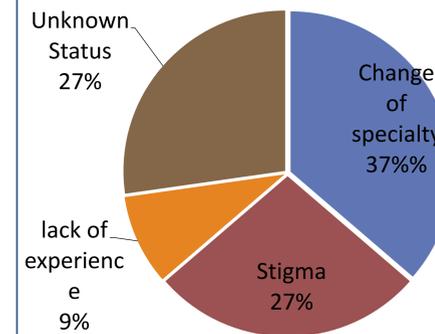
### Detailing Visits and Waiver Use

Of the 65 buprenorphine waived clinicians, **66.2%** of them were reached during visits

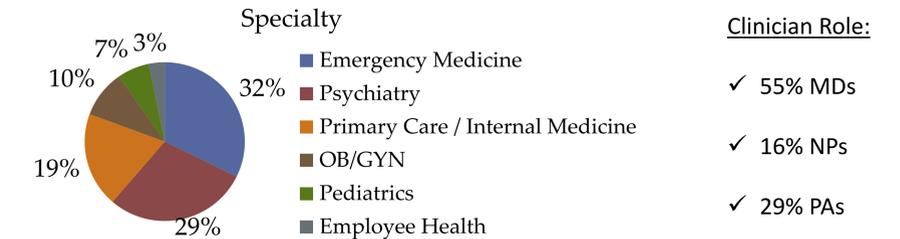
### Percentage of Clinicians using Waiver (N=43)



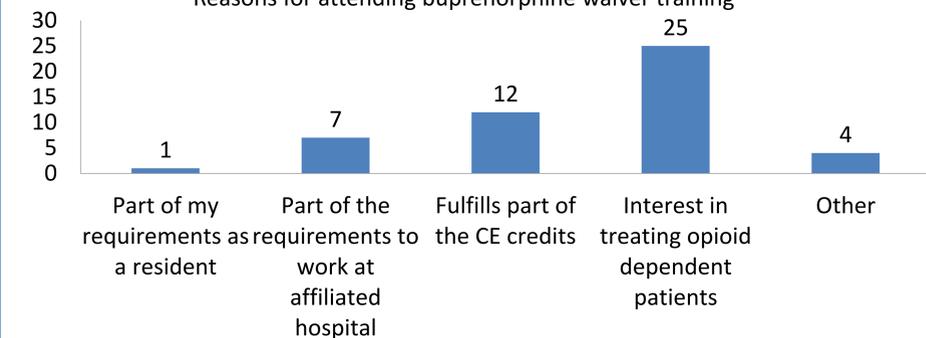
### Reasons for not using Waiver (N=11)



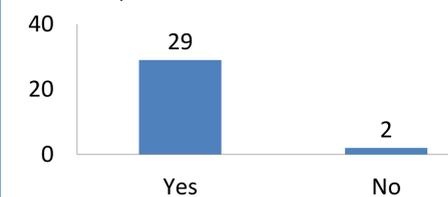
### Buprenorphine Waiver Training



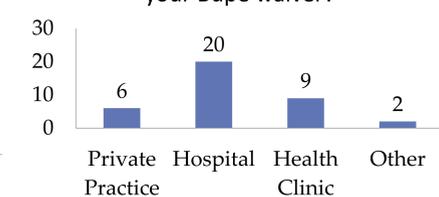
### Reasons for attending buprenorphine waiver training



### Do you plan on utilizing your waiver to provide MAT on Staten Island?



### Where do you plan on utilizing your Bupe waiver?



## Lessons learned

- ❖ Out of 65 waived clinicians, 43 of them (74.4%) were utilizing their waiver to prescribe MAT in the form of buprenorphine
- ❖ Clinicians are willing to prescribe MAT when deemed necessary for the overall well being of the patient
- ❖ Some clinicians had as few as 10 patients on buprenorphine while others had 100 and plus patients. The volume of patients that a physician chose to treat was based on how much their practice can handle while still providing the best care with the resources they have
- ❖ The exploratory campaign helped to gauge available resources on Staten Island and how to further expand on it by offering a free training to help increase the number of clinicians that can provide MAT

## Contact

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## References

1. Paone D, Tuazon E, Bradley O'Brien D, Nolan M. Unintentional drug poisoning (overdose) deaths involving opioids in New York City, 2000-2015. Epi Data Brief. 2016;[50]:1-4. <https://www1.nyc.gov/assets/doh/downloads/pdf/epi/databrief74.pdf>. Accessed March 5th, 2018.
2. Alford DP, LaBelle CT, Kretsch N, et al. Collaborative care of opioid-addicted patients in primary care using buprenorphine: five-year experience. Arch Intern Med. 2011;171(5):425-431.