



# Buprenorphine/Naloxone Treatment Availability in North Dakota

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## Introduction

Access to evidence-based treatment is one of the four strategic priorities in the US Dept. of Health & Human Services Overdose Prevention Strategy.<sup>1</sup> However, there remains limited access to prescribers and pharmacies for medications for opioid-use disorder (MOUD) which is even more pronounced in rural areas.<sup>2-4</sup>

## Objective

The objective of this study is to perform an environmental scan of access to care for buprenorphine/naloxone (BUP/NX) treatment of opioid use disorder (OUD) across North Dakota by assessing availability of providers, appointments, and community pharmacies.

## Methods

Two audits were performed by trained researchers in 2020 & 2021:

**Pharmacy Audit** – every community pharmacy in North Dakota was contacted to determine availability of BUP/NX and naloxone. This included current availability and willingness and timeframe to order if unavailable. A comparison of ND results were compared to 10 other states.<sup>4</sup>

**Provider Audit** – every provider within North Dakota listed on the Substance Abuse and Mental Health Services Administration (SAMHSA) Buprenorphine Practitioner Locator<sup>5</sup> was contacted to determine availability of appointment for OUD treatment along with wait time for available appointments, wait lists, and health insurance acceptance.<sup>6</sup>

**Combined Analysis**– Pharmacy and provider audits were combined to review ZIP codes with BUP/NX availability. Results were mapped to visualize availability throughout state (Figure 1)

## Results

### Pharmacy Audit<sup>4</sup>

- 149 community pharmacies in North Dakota were successfully contacted
- 59.7% had BUP/NX in stock compared to 48.3% across 11 combined states
  - No difference between rural (60%) and urban (59.4%) locations
- Of those that did not have, 75.4% were willing to order with average 2 day wait

Table 1. BUP/NX Availability comparing ND to 11 states combined

Location	Yes	If no, willing to order	Avg Days to wait	Urban	Rural	P-value
ND	59.7%	75.4%	2	59.4%	60.0%	0.9426
11 states combined	48.3%	64.0%	2	47.3%	56.1%	0.0001

### Provider Audit

- 54 of 91 providers listed on SAMHSA BUP Practitioner Location were included
  - 17 were no longer employed at location & 9 were limited practice setting
- Reasons given for those no longer accepting patients include no longer seeing MOUD patients and serving as backup to another provider at practice location

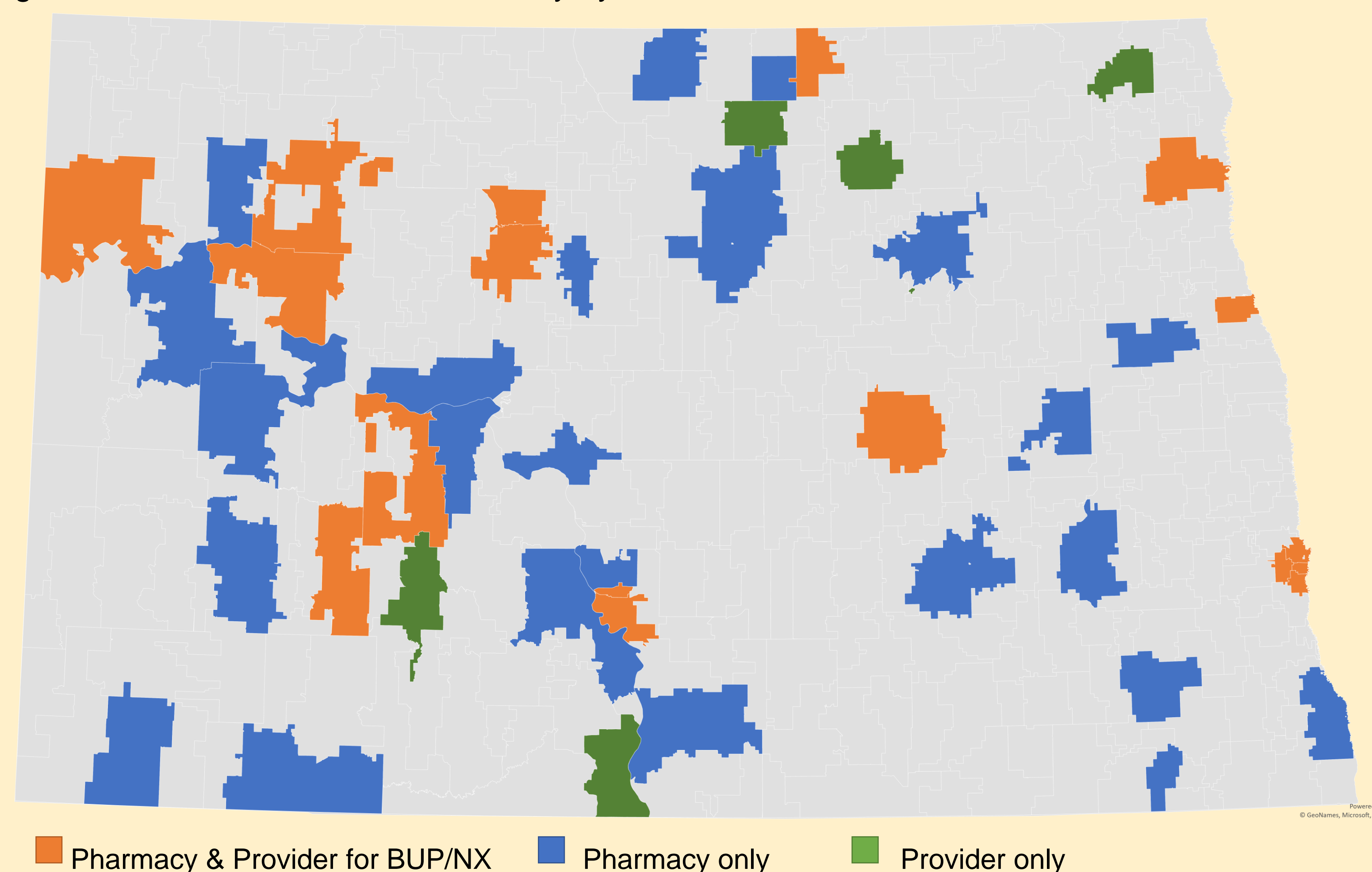
Table 2. Provider responses to audit questions

Audit Item	Overall	Urban	Rural	P-value
Accepting new patients	83.3%	83.3%	83.3%	0.6455
Days from call to appointment (SD)	8 (11)	8 (9)	7 (13)	0.8398
Insurance accepted	93.2%	90.0%	95.8%	0.9193

### Combined Analysis

- 43 ZIP codes contain a pharmacy with BUP/NX available
- 32 ZIP codes have provider accepting new BUP/NX patients
- 26 ZIP codes have both pharmacy with BUP/NX and provider accepting patients
- Pharmacies with BUP/NX are more distributed than providers accepting patients

Figure 1. BUP/NX Treatment Availability by ZIP code



## Discussion

- While there were not significant differences in characteristics of rural pharmacies and BUP/NX providers compared to urban, <15% of ND ZIP codes have MOUD available
- Most BUP/NX providers had pharmacy nearby with BUP/NX available
- Recent removal of X-waiver requirements presents opportunity to address gaps
- Uncertainty regarding continuation of telehealth provisions made during COVID-19 could present barrier

## Conclusions

While progress is being made to increase access to MOUD, gaps remain. There are opportunities to increase the number of pharmacies with BUP/NX in stock and MOUD providers.

## Future Research

Research in 2023 will include repeating this environmental scan to identify any changes in BUP/NX availability, analysis of distance individuals are traveling for BUP/NX providers and pharmacies, and additional analysis of reasons pharmacies and providers do or do not provide MOUD.

## Contributions & Thanks

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