

PUBLICATION

OIG to Audit Utilization of Medication-Assisted Treatment for Opioid Use Disorder

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The OIG has indicated concern that patients suffering from opioid use disorder may experience difficulty accessing medication-assisted treatment (MAT), resulting in under-utilization of this intervention that offers what the OIG characterized as "well-documented effectiveness." In the June 2020 update to its Work Plan, which identifies audits and evaluations that are underway and proposed by the OIG's Audit Services and Office of Evaluation and Inspection, the OIG added two items related to utilization of MAT to address the ongoing opioid crisis.

Treatment Capacity of Providers with MAT Waivers

First, the OIG will audit providers currently holding a waiver to prescribe MAT services to up to 275 patients at a time (the highest patient-limit waiver) to determine how many are complying with Substance Abuse and Mental Health Services Administration (SAMHSA) requirements to annually report the number of patients they are treating. The OIG will also use the data reported by these providers to evaluate how many patients are receiving MAT services from providers who have obtained the 275-patient waiver. A prior OIG report found that providers at the 275-patient limit, while only 8% of all providers holding a waiver to provide MAT treatment, could collectively treat 1 million patients at a given time. However, recent studies by SAMHSA indicate that providers with MAT waivers are not prescribing MAT at or near their patient limits. The OIG will examine how many providers with 275-patient waivers are providing MAT services at or near their waiver limit and how many of these providers are located in high-need counties.

Review the OIG's Work Plan item here: [Data Snapshot: Medication-Assisted Treatment from Providers Waivered at the Highest Patient Level.](#)

Provision of MAT Services to Medicare Beneficiaries

Second, the OIG will evaluate "the extent to which Medicare beneficiaries with opioid use disorder are receiving MAT drugs through Medicare," as well as their receipt of counseling or behavioral therapies. The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act, passed in 2018, requires Medicare to reimburse opioid treatment programs (OTPs) for certain services, including methadone treatment. However, recent OIG studies indicate persistent concerns related to patient access to MAT services and corresponding low utilization of those services. The OIG will assess whether Medicare beneficiaries with opioid use disorders who do not receive MAT services have certain characteristics in common. In its Work Plan update, the OIG specifically referenced the particular dangers of COVID-19 for opioid use disorder patients and states that the "pandemic makes the need to focus on the opioid crisis even more pressing."

Review the OIG's Work Plan item here: [Utilization of Medication-Assisted Treatment in Medicare.](#)

Additional OIG Work Plan Focus on MAT

Updates to the OIG Work Plan also include an evaluation of the challenges that OTPs face (and their responses to those challenges) in safely providing continuous care to their patients during the COVID-19 pandemic and analysis of opioid utilization by Medicare Part D beneficiaries (including spending on opioids, the

number of beneficiaries who receive extreme amounts of opioids or appear to be doctor-shopping, and identification high-opioid-prescribing providers).

Review the OIG's Work Plan items here: [Opioid Treatment Program Challenges During the COVID-19 Pandemic](#) and [Opioid Use in Medicare Part D in 2020](#).

For additional questions, please contact [Michaela Poizner](#) or any member of Baker Donelson's [Behavioral Health Team](#).