

## Rural Opioid Use Disorder Treatment Depends on Family Physicians

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**The nation's growing opioid use disorder epidemic disproportionately impacts rural areas, where physicians who can prescribe buprenorphine are scarcest. Among physicians approved to prescribe buprenorphine, family physicians (FPs) are the most likely to work in rural areas.**

Opioid use disorder is a major public health concern in the United States, contributing to 28,647 deaths in 2014,<sup>1</sup> and it disproportionately affects rural populations.<sup>2</sup> Buprenorphine plays a critical role in addressing the opioid use disorder epidemic in rural areas, but only physicians approved under the Drug Addiction Treatment Act (DATA) can prescribe it.

We used data from the American Medical Association's Physician Masterfile and the Drug Enforcement Administration's list of DATA waived physicians to examine the distribution of physicians approved to prescribe buprenorphine by specialty and rurality (*Figure 1*). More than one-third of approved physicians were psychiatrists, but only 5.5% of these psychiatrists practiced in rural areas (defined as a county with a Rural-Urban Continuum Code of 4 or greater). In contrast, although FPs represented fewer than one in five approved physicians, the proportion of approved FPs working in rural areas

(15.4%) was more closely aligned with the percentage of the U.S. population living in these areas (17.6%).

Although FPs contribute to the high volume of opioid prescribing,<sup>3</sup> the specialty is also an essential contributor to the solution. The rural-urban distribution of approved FPs closely resembles that of the U.S. population. More than any other specialty, increasing the number of approved FPs, particularly through expanding buprenorphine training in residency programs, would help to rectify the relative shortage of physicians approved to prescribe buprenorphine in rural areas.

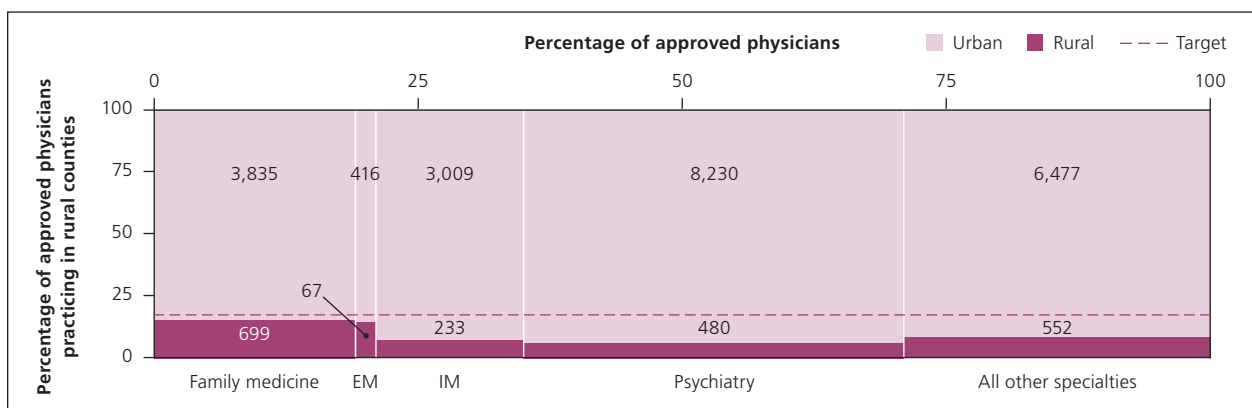
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**Figure 1.** Distribution of physicians approved to prescribe buprenorphine by specialty and rurality.

NOTE: The target is a distribution of buprenorphine-approved physicians proportional to the percentage of the U.S. population who live in rural counties (17.6%).

EM = emergency medicine; IM = internal medicine.

Data from 2013 Drug Enforcement Administration Licensure Data and 2013 American Medical Association Physician Masterfile.