Patients need access to care now.

90% of patients in need of addiction treatment services do not have access to treatment.⁵

40% of patients with private health insurance are forced to go through burdensome prior authorization before being able to receive medication-assisted treatment (MAT).⁶

ONLY 23% of publicly funded treatment programs report offering any FDA-approved medications to treat substance use disorders, and less than half of private-sector treatment programs reported that their physicians prescribed FDA-approved medication.⁷
Health care experts agree that MAT is proven to help maintain recovery and prevent death.

The Value Of Medication-Assisted Treatment Is “Unequivocally Established.”
According to The National Institutes of Health:
• “The safety and efficacy of medically assisted treatment has been unequivocally established.”
• Medications, including buprenorphine (Suboxone®, Subutex®), methadone, and extended release naltrexone (Vivitrol®), are effective for the treatment of opioid use disorders.8

Medication-Assisted Treatment Is An Essential Component Of Long-term Treatment.
According to Dr. Nora Volkow, Director of the National Institute on Drug Abuse:
• “Medications have also become an essential component of an ongoing treatment plan, enabling opioid-addicted patients to regain control of their health and their lives.”9

Health Insurers Must Understand The Necessity Of Medication-Assisted Treatment.
According to the U.S. Surgeon General:
• “Studies have repeatedly demonstrated the efficacy of MAT at reducing illicit drug use and overdose deaths, improving retention in treatment, and reducing HIV transmission.”
• Prisoners who receive MAT and counseling in prison, and have treatment continued upon release, have lower rates of relapse and are less likely to use opioids.10

Physicians Must Be Trained and Certified To Treat With Medication-Assisted Treatment.
According to Dr. Michael Mungner, MD, President of the American Academy of Family Physicians:
• “We urge family physicians to become certified in providing medication-assisted treatment. Family physicians are uniquely qualified to meet the medication management and whole-person care that MAT requires. But in order to expand access to MAT, we must have universal policies that end barriers such as prior authorizations that delay or can essentially deny care for those who need it most.”

We all have to work together. The AMA and AAFP recommend:

1. Physicians should become trained to treat patients with a substance use disorder.
2. All public and private payers should ensure that their formularies include all forms of MAT, and they should remove all administrative barriers to treatment, including prior authorization.
3. Policymakers and regulators should increase oversight and enforcement of mental health and substance use disorder parity laws to ensure patients receive the care that they need.
4. We can all help put an end to stigma. Patients with a substance use disorder deserve the same care and compassion as any other patient with a chronic, relapsing medical disease.

Take action today. Join us to help end the nation’s opioid overdose and death epidemic. To learn more visit end-opioid-epidemic.org or aafp.org/opioid-abuse

---