New Jersey Psychiatric Association
Position Statement on the Opioid Epidemic
Approved by the Board of Trustees March 1, 2017

In New Jersey, along with our nation as a whole, we are facing a true epidemic of opioid overuse and addiction, which may lead to death by overdose, either deliberate or accidental. Overdose deaths involving prescription or illicit opioids have increased by 200% since the year 2000, which is correlated with a similar increase in prescribed opioids, and a rising number of people with opioid use disorders.

Along with prevention of opioid addiction, ready access to effective treatment is needed to stem the epidemic. Medication-assisted treatment (MAT), which may include the specialized use of buprenorphine, methadone, or naltrexone, is far more effective than psychosocial approaches alone in treating opioid use disorders. MAT has been shown to offer much better treatment outcomes and prevent death.

The New Jersey Psychiatric Association believes that it is crucial that MAT becomes accessible for all individuals in New Jersey who are addicted to opioids.

At this time, a lack of wide accessibility to MAT in either inpatient or outpatient treatment centers in New Jersey is a major barrier to appropriate, effective care. Specific barriers include:

1. For methadone clinics: long waiting lists for entry, lack of clinic access in certain geographic areas, limited insurance coverage, and the required daily attendance by patients for dosing,

2. For office-based buprenorphine treatment: onerous DEA oversight and utilization management practices by both public and private insurance companies (including prior authorization requirements, “fail first” policies, and requirements for psychosocial services that may be unavailable or uncovered), and a lack of providers for socioeconomically disadvantaged patients,

3. For naltrexone: lack of insurance coverage and a deficit of providers,

4. For all MAT: ineligibility of acknowledged addicted individuals to participate in many inpatient and outpatient treatment facilities, employment and housing programs.

Conclusion: To turn the tide on this epidemic, the NJPA recommends the following:

1. Increased funding to be provided for both prevention and treatment, including inpatient and outpatient care for individuals addicted to opioids,

2. Medication-assisted treatment (MAT) to be offered routinely by providers to all people in recovery from opioid addiction, given their superior effectiveness to psychosocial treatments alone,

3. Removal of barriers, so as to enable prompt, adequate MAT for individuals addicted to opioids; barriers include lack of insurance coverage, an adequate number of treatment facilities offering MAT, onerous oversight and utilization management practices, and policies that make persons on MAT ineligible for many treatment, employment and housing programs.

Resource:
Zerbo, Erin, *The Scientific Basis for Opioid Addiction and Treatment*, NJPA …..March 2017