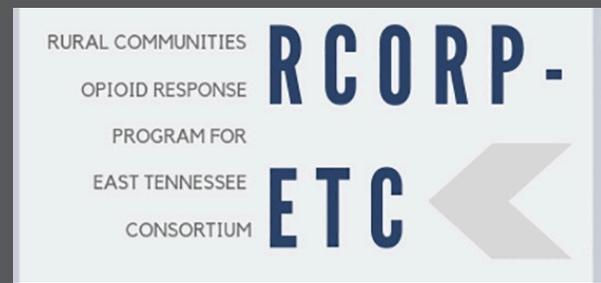


COST OF TREATMENT FOR OPIOID USE DISORDER

FACT SHEET - APRIL 2019



SEVERITY

Size of the Problem

Opioid-related deaths in East Tennessee continue to increase, burdening vast families, communities, and professional workforces.¹ While opioid-overdose rates are high, several gaps in services related to prevention, treatment, and recovery from opioid use disorder (OUD) remain within the rural area. Appalachia's long history of poor economic opportunities and unemployment have increased the challenges of OUD by limiting access to treatment. As such, the RCORP-ETC region is at much greater risk of health challenges than Tennessee overall.

Seriousness

Although the price for opioid treatment may vary based on a number of factors, recent preliminary cost estimates from the U.S. Department of Defense for treatment in a certified opioid treatment program (OTP) provide a reasonable basis for comparison regarding medically assisted treatment (MAT).²

- methadone treatment, including medication and integrated psychosocial and medical support services (assumes daily visits): \$126.00 per week or \$6,552.00 per year
- buprenorphine for a stable patient provided in a certified OTP, including medication and twice-weekly visits: \$115.00 per week or \$5,980.00 per year
- naltrexone provided in an OTP, including drug, drug administration, and related services: \$1,176.50 per month or \$14,112.00 per year

It is also important to remember the costs associated with untreated opioid use disorders, including costs associated with criminal justice, treating babies born dependent on opioids, greater transmission of infectious diseases, treating overdoses, injuries associated with intoxication (e.g., drugged driving), and lost productivity.

Residents in the RCORP-ETC region have challenges that make affording treatment extremely difficult.

- 21.7% of residents in the RCORP-ETC region live in poverty, limiting access to treatment for OUD.³
- Unemployment levels in the RCORP-ETC region (median= 6.1%) are higher than the US (median= 5%) and Tennessee (median= 4.8%). Being unemployed reduces access to treatment for OUD due to the cost of treatment.

	RCORP-ETC region	TN	U.S.
% Living in Poverty	21.7	17.6	12.3
% Unemployed	6.1	4.8	5

Source: Robert Wood Johnson Foundation, 2018 ³

FEASIBILITY

Given the lack of treatment providers in the RCORP-ETC area, increasing the number of MAT providers would increase access to treatment.

Because insurance coverage can be a barrier to treatment access due to cost, a possible strategy could be to provide Medicaid enrollment assistance.

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RURAL COMMUNITIES

OPIOID RESPONSE

PROGRAM FOR

EAST TENNESSEE

CONSORTIUM

RCORP-

ETC



RIPPLE EFFECT

If the cost of treatment was reduced, this would positively impact:

- Access to OUD treatment
- Incidence of OUD
- OUD-related overdoses and deaths

COMMUNITY VIEW

The consortium coordinated a community survey that focused on the 10-county community members' perspectives on what is important to the community, quality of life, and community assets.

Of the 710 people in the RCORP-ETC region who answered the survey, 24.9% viewed the cost of treatment for OUD as a challenge related to OUD. Specifically, this was the 2nd largest issue identified in the RCORP-ETC Region. Lowering cost of treatment for OUD can reduce barriers for prevention, treatment, and relapse of OUD in the RCORP-ETC region.

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3. Robert Wood Johnson Foundation. "County Health Rankings and Roadmaps." Accessed July 22, 2018.

