

February 28, 2022

## BUPRENORPHINE PRESCRIBING FOR OPIOID USE DISORDER

### 1. PURPOSE

By direction of the Office of the Under Secretary for Health, the purpose of this Veterans Health Administration (VHA) notice is to maintain action within every Veterans Integrated Service Network (VISN) and Department of Veteran Affairs (VA) medical facility to increase access to and remove barriers to prescribing medications for treatment of opioid use disorder (OUD). The national opioid epidemic represents one of the leading preventable causes of morbidity and premature death in the United States. The Center for Disease Control (CDC) notes significant rises in opioid-related overdose fatalities over the last several years (<https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>). Medication for OUD, reduces the risk of overdose and all-cause mortality and is strongly recommended as first-line treatment by VA-Department of Defense (DoD) Clinical Practice Guidelines, but it is not universally offered within VHA points of care outside of Substance Use Disorder (SUD) treatment programs.

### 2. ACTIONS REQUIRED BY VA MEDICAL FACILITY DIRECTORS AND PROVIDERS

To increase access to OUD treatment, Drug Enforcement Administration (DEA) X-waivered prescribers must be allowed to provide buprenorphine products for OUD across clinical settings. **NOTE:** *A DEA X-waiver is issued to qualified providers authorizing them to conduct maintenance and detoxification treatment using buprenorphine. In some instances, these qualified providers may be referred to as Drug Addiction Treatment Act 2000 (DATA) waived providers. Dependent on authorization from the Center for Substance Abuse Treatment, the waiver specifies the number of patients a qualified provider may treat at any one time.*

To accomplish this, VA medical facility Directors must complete the following actions:

- a. Remove VA medical facility prohibitions of OUD treatment outside of SUD specialty care settings. Prescribing of buprenorphine products by X-waivered prescribers in their clinical settings must be allowed, including but not limited to Primary Care, Mental Health, Community-based Outpatient Clinics and Specialty Care environments (e.g., Pain Clinics and Emergency Departments).
- b. Ensure privilege forms are updated to remove prescribing of buprenorphine as a delineated privilege, as applicable. A delineated privilege for prescribing buprenorphine will no longer be required.
- c. In collaboration with their clinical leadership, ensure that VA medical facility providers prescribing buprenorphine for OUD have the appropriate DEA X-waiver license which is current, unrestricted and has been primary source-verified in the electronic credentialing record (i.e., VetPro). In accordance with VHA policy and medical

staff bylaws, if a provider is notified of any pending, proposed, or actual change in their DEA licensure status, they must notify their supervisor as soon as able, but no longer than 15 days after notification of the provider by the DEA. Failure to notify the supervisor may lead to an adverse action. Additionally, it is the provider's responsibility to prescribe only as legally permitted by their DEA license; any practice beyond what is permitted also will result in an adverse action. **NOTE:** *If a provider currently has a delineated privilege for buprenorphine prescribing, a modification of privileges is not required at this time. The provider would only be asked to complete the updated privilege form at the time of re-privileging which would no longer list prescribing of this medication as a delineated privilege.*

d. Review local operating procedures and remove any modifiable barriers for Veterans to access SUD treatment programs as OUD treatment may require access to a broader continuum of SUD services. Presence of medical illness must not be a barrier to medications for OUD treatment if the medical illness is not identified as a contraindication for treatment. Further, the presence of SUD must not be a barrier to other medical care when clinically indicated. If a provider does not possess the necessary skills to manage all of a patient's clinical needs, the expectation is for timely, collaborative co-management with providers who have the required expertise.

e. Review local operating procedures to ensure that every Veteran who would benefit from medication for OUD treatment is evaluated by a prescriber and offered medication as part of their treatment.

### 3. RECOMMENDED STRATEGIES FOR TREATMENT

Multiple strategies are needed to promote high quality, timely OUD treatment. Recommended strategies include but are not limited to:

a. Reducing caseload expectations for those who provide Medical Management for OUD.

b. VA medical facility Directors fully staffing Primary Care Mental Health Integration Care Management to support implementation of the Collaborative Care model for OUD.

c. Reviewing staffing levels and the SUD continuum of care to ensure programming is meeting the current population need.

### 4. AVAILABLE RESOURCES FOR OPIOID USE DISORDER TREATMENT

a. VA medical facilities are encouraged to monitor prescribing practices of this medication and others through use of Academic Detailing Service (ADS) Buprenorphine Provider or Patient reports, routine Ongoing Professional Practice Evaluation (OPPE) or other strategies.

b. The ADS has developed multiple tools to assist VA medical facilities with identifying X-waivered providers and managing patients receiving buprenorphine from VA. The General Data Tools Page is located at:

[https://dvagov.sharepoint.com/sites/vhaacademicdetailing/SitePages/Data-Resources.aspx#opioid-use-disorder-\(oud\)](https://dvagov.sharepoint.com/sites/vhaacademicdetailing/SitePages/Data-Resources.aspx#opioid-use-disorder-(oud)). **NOTE:** This is an internal VA website that is not available to the public.

The ADS Buprenorphine Prescriber/X Waiver Provider Report can be used to identify buprenorphine prescribers and providers with an X-waiver and view VA buprenorphine patient caseloads at a given VA medical facility. The ADS Buprenorphine Patient Report is designed to assist providers in managing their buprenorphine patient panels by displaying a summary of relevant clinical information (e.g., recent Urine Drug Screens, labs, buprenorphine fill history, patient risk level and upcoming appointment dates) for patients who have recently received buprenorphine. The report for identifying buprenorphine X-waivered providers is located at: [OUD XWaiver BupPrescriberReport - Report Viewer \(va.gov\)](#). **NOTE:** This is an internal VA website restricted to those with access to the electronic health record (EHR), that is not available to the public.

5. All inquiries concerning this notice should be addressed to the Office of Mental Health and Suicide Prevention, SUD section at [VHACOSUDprogram@va.gov](mailto:VHACOSUDprogram@va.gov).
6. This VHA notice is a re-issuance of VHA Notice 2020-30, Buprenorphine Prescribing for Opioid Use Disorder, dated September 22, 2020, which expired on September 30, 2021.
7. This VHA notice will expire and be archived as of February 28, 2023.

**BY DIRECTION OF THE OFFICE OF  
THE UNDER SECRETARY FOR HEALTH:**

/s/ Erica Scavella, M.D., FACP, FACHE  
Assistant Under Secretary for Health  
for Clinical Services/CMO

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