Watering the Desert: Strategies to Address Opioid Use Disorder Treatment Gaps in Illinois

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Background

The United States opioid epidemic is a public health emergency that claimed over 94,000 lives in the 12-month period prior to January 2021[1,2]. Buprenorphine, a partial opioid agonist, is a critical tool in combating this crisis. Numerous areas of Illinois qualify as Medication Assisted Recovery (MAR) deserts, characterized by limited accessibility to a provider with a DATA-2000 waiver to prescribe buprenorphine[3].

Purpose

The purpose of this project was to expand patient access to MAR throughout Illinois by specifically targeting and incentivizing providers located in Illinois MAR deserts to obtain their DATA-2000 waiver.

Methodology

The Illinois Society of Addiction Medicine (ISAM) Education Committee recruited providers in MAR deserts to participate in the Provider Clinical Support System (PCSS) virtual DATA-2000 training. Recruitment efforts were focused on family medicine residents and providers, however providers from any specialty were able to participate. Potential participants were identified via family medicine residency websites, advertising through the Illinois Academy of Family Physicians, and marketing within ISAM members' professional networks. A monetary incentive was provided for participants who completed the training *and* obtained their waiver with funding from the Illinois Department of Illinois Department of Human Services, Division of Substance Use and Recovery. Event planning, marketing, and course moderation was led by medical student members of ISAM, and course content was taught by members of ISAM.

Tables & Figures

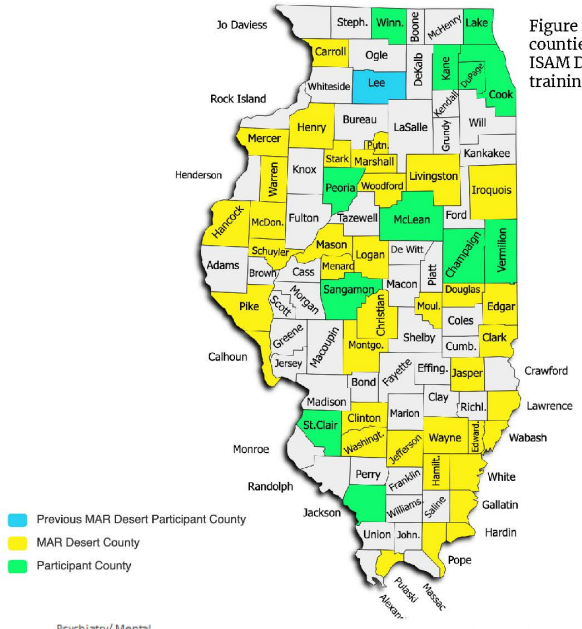


Figure 2. Illinois M
counties, counties
ISAM DATA-2000
trainings, and the

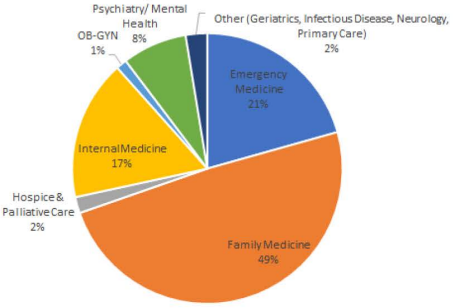


Figure 1. Distribution of participants by specialty.

County	No. Participants	Perc
Champaign	15	
Cook	136	
DuPage	9	
Jackson	2	
Kane	3	
Lake	5	
Lee	1	
McLean	5	
Peoria	1	
Sangamon	3	
St. Clair	1	
Vermilion	1	
Winnebago	1	

Table 1. Distribution of pa
county.