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March 31, 2016

Letters to the Editor
Times Union
Albany, New York 12212

To the Editor:

It would be nice if simply eliminating health insurance prior authorization policies for buprenorphine would ensure more New Yorkers with opioid addiction received treatment (“Help drug addicts by getting bureaucracy out of the way,” March 29, 2016). However, that simply is not the case.

Some insurers use prior authorization for numerous reasons. With pharmaceuticals, it is most often used to ensure a drug is the right medication for the right situation. Buprenorphine is not always the right drug for every patient. And, because buprenorphine is itself a partial opiate, it has a “street value” when a patient walks away from a doctor’s office with prescription for a 30-day supply. So, even when it’s determined it is the right drug, it should be dispensed along with counseling and testing. It is, perhaps, these requirements that act as a greater impediment to more doctors becoming registered to prescribe buprenorphine.

As Dr. Cunningham rightly points out, we have a tool in buprenorphine that can help many New Yorkers battling opioid addiction. But it is imperative that the tool be used appropriately and correctly.

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Sincerely,

A handwritten signature in black ink that reads "Paul F. Macielak".

Paul F. Macielak

President & CEO

New York Health Plan Association