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The RAND Corporation is a nonprofit, nonpartisan research institution committed to the public interest. RAND is eager to join with members of the Action Collaborative to address the deadliest drug crisis in American history. Multiple streams of RAND research can support the Collaborative’s efforts. Key studies are listed here.

Understanding drug markets: RAND is examining the consequences of changing drug markets. For example, fentanyl manufactured in China has become readily available in the U.S. market. Fentanyl is cheaper and more potent than heroin. Added to opioids then sold at street price, fentanyl is enriching dealers and increasing overdose deaths among drug users. Current work considers why current policy responses alone will not stem this tide.

Helping states evaluate policies. RAND is committed to helping states understand the effect of a specific policy. For example, many states have passed laws to increase access to the life-saving drug naloxone, without knowing which ones were effective. RAND’s analysis suggests that when multiple naloxone policies were examined, naloxone access laws giving direct prescription authority to pharmacists were associated with significant decreases in opioid-related deaths.

Increasing access to treatment. Few individuals who need treatment for opioid and alcohol use disorders receive treatment. RAND has been examining how the Medicaid expansion affected treatment rates in specific states and regions, highlighting concerns that the poor and people of color, especially in rural areas, are not benefiting as much as their white urban-dwelling counterparts. Researchers have also assessed the effect of integrating treatment for opioid and alcohol use disorders into primary care, using a collaborative care intervention. The intervention increased the proportion of primary care patients receiving evidence-based treatment and the number achieving abstinence from opioids or alcohol use at 6 months.

Identifying unintended consequences. Well-intentioned policies do not always have the intended effect. For example, a series of studies assessed the extent to which increasing the number of authorized buprenorphine providers increased access to treatment. Increasing the number of providers did increase potential access, especially in rural areas. However, few providers were practicing near their proscribed patient limits, so just increasing the number of authorized providers may not be the most effective way to increase treatment access.

OPTIC. A focal point for RAND’s ongoing opioid research is a new national center supported by a $7.2 million grant from the National Institute on Drug Abuse. The RAND Opioid Policy Tools and Information Center (OPTIC) is intended to be a national resource, fostering innovative research in opioid policy science, and developing and disseminating methods, tools, and information to the research community, policymakers, and other stakeholders. We are monitoring the crisis, cataloging and assessing policies designed to address it, making methodological advances in approaches used to assess policies, and suggesting approaches that have yet be tried together as comprehensive strategies for improving public health and public safety.

OPTIC strives to create public goods that will be useful at federal, state, and local levels. Examples include interactive tools and an interactive database allowing users to locate opioid policy studies based on policy type, outcome, or methods.