

Supplemental materials for:

Lin L, Knudsen HK. Comparing buprenorphine-prescribing physicians across nonmetropolitan and metropolitan areas in the United States. *Ann Fam Med*. 2019;17(3):212-220.

Supplemental Tables

Supplemental Table 1. Characteristics of the full sample and number of complete cases by variable

	% (N) or Mean (SD)	Complete cases ^a
Location of practice		1,174
Large metropolitan area	56.2% (660)	
Small metropolitan area	32.5% (382)	
Nonmetropolitan area	11.2% (132)	
Medical specialty		1,149
Primary care	39.6% (455)	
Addiction/Psychiatry	48.7% (560)	
All others	11.7% (134)	
Practice		1,155
Individual medical practice	50.8% (587)	
All other practice settings	47.2% (568)	
Years prescribing buprenorphine	6.7 (3.9)	1,124
Waiver type		1,174
30 patient limit	42.2% (496)	
100 patient limit	57.8 (678)	
Payment type for office visits		1,141
Only cash	19.5% (223)	
Private Insurance but not Medicaid	23.8% (272)	
Medicaid (with or without private insurance)	51.9% (592)	
All others	4.7% (54)	
Age	55.5 (11.4)	1,160
Gender		
Female	22.9% (267)	1,165
Male	77.1% (898)	
Race		1,148
White	76.5% (878)	
Asian	12.5% (144)	
All others	11.0% (126)	
Region		1,174
New England	10.7% (126)	
Middle Atlantic	16.6% (195)	
East North Central	12.9% (151)	
West North Central	3.4% (40)	
South Atlantic	19.6% (230)	
East South Central	6.1% (72)	
West South Central	6.7% (79)	
Mountain	7.3% (86)	
Pacific	16.6% (195)	
% new patients inducted onto buprenorphine in office	44.9 (41.9)	1,141

% new patients who were inducted at home	35.5 (41.2)	1,137
% new patients who were already using street buprenorphine	21.3 (24.0)	1,136
% of patients in the past year with heroin use disorder	23.5 (22.4)	1,135
% of patients in the past year with prescription opioid use disorder	54.5 (27.3)	1,134
% of patients in the past year with both heroin and prescription opioid use disorder	22.8 (19.9)	1,133
Typical frequency of office visits in initial treatment (i.e., first 60 days)		1,131
Every week or more frequently	26.6% (301)	
Every two weeks	35.5% (401)	
Once a month or less	37.9% (429)	
Typical frequency of office visits in maintenance treatment (i.e., after 60 days) for stable patients		1,127
Every two weeks or more frequently	15.6% (176)	
Once a month	73.1% (824)	
Every two months or less frequently	11.3% (127)	
Typical visit frequency in maintenance treatment for unstable patients (e.g., continued opioid use, misusing benzodiazepines)		1,130
Every week	38.9% (440)	
Every two weeks	38.5% (435)	
Once a month or less frequently	16.8% (190)	
Patient would no longer be seen	5.8% (65)	
Typical buprenorphine dose for stable patients in maintenance treatment		1,115
≤8 mg	29.0% (323)	
9-12 mg	26.5% (296)	
14-16 mg	39.6% (441)	
>16 mg	4.9% (55)	
Maximum buprenorphine dose for stable patients in maintenance treatment		1,102
<16 mg	12.0% (132)	
16 mg	33.6% (370)	
17-24 mg	41.9% (462)	
>24 mg	12.5% (138)	
% past-year patients who received counseling from the respondent	53.5 (43.9)	1,119
% past-year patients who received counseling from providers in the respondent's practice	38.0 (41.2)	1,108
% past-year patients who received counseling from external providers	38.9 (32.7)	1,096

% past-year patients who did not receive any psychosocial counseling	12.4 (20.1)	1,079
% past-year patients referred to more intensive level of care	16.8 (19.5)	1,136
Setting has resources to provide medical services to patients with complex medical problems ^b	3.4 (1.4)	1,148
Setting has resources to provide psychiatric services to patients with complex psychiatric problems (e.g., serious/persistent mental illness) ^b	3.2 (1.5)	1,148
Setting has resources to provide social services to patients with complex social problems (e.g., unstable housing, criminal justice involvement, unemployment) ^b	2.7 (1.3)	1,142

^a Models would have had sample sizes ranging from 968 (82.5% of cases) to 1,020 (86.9% of cases) if listwise deletion was used.

^b Physicians were asked to describe the resources available within their practice using a five-point Likert scale ranging from 1=strongly disagree to 5=strongly agree.

Supplemental Table 2. Characteristics of physicians who responded compared to all who were surveyed^a.

	All Who Were Mailed the Survey n=3,553 % (N) or Mean (SD)	Respondents n=1,174 % (N) or Mean (SD)
Waiver type		
100 patient waiver	52.3% (1,858)	57.8% (678)
30 patient waiver	47.7% (1,695)	42.3% (496)
Gender per online resources (e.g., HealthGrades)		
Male	77.1% (2,721)	77.1% (896)
Female	22.9% (808)	22.9% (266)
Number of practice locations per online resources (e.g., HealthGrades)	1.40 (0.80)	1.35 (0.71)
Rural-Urban		
Large metropolitan	60.4% (2,146)	56.2% (660)
Small metropolitan	30.1% (1,070)	32.5% (382)
Nonmetropolitan	9.5% (337)	11.2% (132)
US Census Division		
New England	9.9% (351)	10.7% (126)
Middle Atlantic	16.0% (569)	16.6% (195)
East North Central	10.0% (355)	12.9% (151)
West North Central	3.1% (109)	3.4% (40)
South Atlantic	22.5% (800)	19.6% (230)
East South Central	6.0% (212)	6.1% (72)
West South Central	10.1% (358)	6.7% (79)
Mountain	7.8% (276)	7.3% (86)
Pacific	14.7% (523)	16.6% (195)

^a Data on gender were not available online for 67 of 3,553 physicians who were mailed the survey, and for 12 physicians who responded to the survey. Data on number of practice locations were not available online for 67 of 3,553 physicians who were mailed the survey, and for 29 physicians who responded to the survey. Percentages may not sum to 100 due to rounding.