

131st MAINE LEGISLATURE

FIRST REGULAR SESSION-2023

Legislative Document

No. 1146

S.P. 473

In Senate, March 13, 2023

An Act to Authorize Certain Health Care Professionals to Prescribe Methadone

Reference to the Committee on Health Coverage, Insurance and Financial Services suggested and ordered printed.

DAREK M. GRANT Secretary of the Senate

Presented by Senator BRAKEY of Androscoggin. Cosponsored by Representative: BOYER of Poland.

1	Be it enacted by the People of the State of Maine as follows:
2	Sec. 1. 5 MRSA §20056 is enacted to read:
3	§20056. Prescribing of methadone for substance use disorder treatment
4 5	1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.
6 7 8	A. "Controlled substance" means a controlled substance included in schedule II, III or IV of 21 United States Code, Section 812 or in 21 Code of Federal Regulations, Section 1308.
9 10	B. "Prescriber" means a health care professional licensed under Title 32, chapter 36 or 48 with authority to prescribe controlled substances in this State.
11 12	2. Authority to prescribe. A prescriber may prescribe methadone to a person with substance use disorder for unsupervised use as long as the following requirements are met:
13 14 15	A. The prescriber determines that the person with substance use disorder is sufficiently responsible in handling methadone for unsupervised use, as established in subsection 3;
16 17 18	B. The number of days of methadone prescribed to the person with substance use disorder for unsupervised use does not exceed the guidelines established in subsection 4; and
19 20 21 22	C. The person with substance use disorder is participating in clinically appropriate counseling activities provided by a licensed behavioral health organization or community service provider that is the equivalent to the counseling required for those receiving substance use disorder treatment at a certified opioid treatment program.
23 24 25	3. Sufficiently responsible for unsupervised use. A prescriber shall determine if a person with substance use disorder is sufficiently responsible for unsupervised use before prescribing methadone. The prescriber must consider the following:
26	A. Regularity of counseling attendance;
27	B. Absence of serious behavioral problems at the prescriber's practice;
28	C. Absence of known recent criminal activity;
29	D. Stability of the home environment and social relationships;
30	E. Length of time in substance use disorder treatment;
31 32	F. Assurance that methadone medication can be safely stored within the home of the person with substance use disorder; and
33 34 35	G. Whether the benefit of the person with substance use disorder derived from decreasing the frequency of methadone clinic attendance or presence at the prescriber's practice outweighs the potential risks of diversion.
36 37 38	4. Number of days of methadone authorized for prescription. If a person with substance use disorder is determined by a prescriber to be sufficiently responsible for unsupervised use, the following limits apply to the supply of methadone.

- A. During the first 45 days of treatment, the supply is limited to a single dose each week and the person with substance use disorder shall ingest all other doses under supervision of the prescriber or at a licensed methadone clinic.
 - B. In the 2nd 45 days of treatment, the supply is 2 doses per week and the person with substance use disorder shall ingest all other doses under supervision of the prescriber or at a licensed methadone clinic.
 - C. In the 3rd 45 days of treatment, the supply is 3 doses per week and the person with substance use disorder shall ingest all other doses under supervision of the prescriber or at a licensed methadone clinic.
 - D. In the remaining days of the first 6 months of treatment, a person with substance use disorder may be given a maximum 6-day supply of medication and shall ingest the dose for the 7th day under supervision of the prescriber or at a licensed methadone clinic.
 - E. After 6 months of continuous treatment, a person with substance use disorder may be given a maximum of a 2-week supply of medication.
 - F. After one year of continuous treatment, a person with substance use disorder may be given a maximum one-month supply of medication, but must make monthly visits to the prescriber.
 - Nothing in this subsection limits a prescriber to a specific dosage level of methadone.
 - 5. Proper packaging and storage. The prescriber must ensure that methadone is appropriately stored and packaged as required by 42 Code of Federal Regulations, Section 8.12(i)(5).
 - **6. Rules.** The department is authorized to adopt or amend rules to implement this section. Licensing boards of prescribers are authorized to adopt or amend rules to implement this section. Rules adopted pursuant to this subsection are routine technical rules as defined in chapter 375, subchapter 2-A.

SUMMARY

This bill allows a health care professional licensed under the Board of Osteopathic Licensure or the Board of Licensure in Medicine with authority to prescribe controlled substances to prescribe methadone to a person with substance use disorder. It requires the person receiving treatment to participate in appropriate counseling activities that are equivalent to those required of individuals receiving methadone treatment at a methadone clinic. It requires prescribers to establish that the person with substance use disorder receiving methadone prescriptions are considered sufficiently responsible for unsupervised use and the days the prescription is for. These requirements are based on 42 Code of Federal Regulations, Section 8.12 and the changes proposed to those requirements in S. 3629 introduced to the United States Congress in 2022.