

# Modernizing Access to Methadone Treatment for OUD

Longstanding federal restrictions make methadone treatment for opioid use disorder (OUD) very difficult to access, especially in rural areas. Methadone for OUD is now underutilized even when it may be comparatively more effective for some patients. Patients with OUD treated with buprenorphine/naloxone were 60% more likely to discontinue treatment than those who received methadone in British Columbia.\*

## Why Pass Legislation Now?

**Limited medication options for opioid use disorder (OUD):** Among the 3 approved medications for OUD, methadone is the only full-agonist opioid, making it uniquely useful in treating some patients, particularly those with high-potency synthetic opioid use.

**Restrictive access to methadone:** Federal law currently restricts outpatient access to methadone for OUD to 2,100 federally certified opioid treatment programs (OTPs), while methadone prescribed for pain can be dispensed from widely accessible community pharmacies.

**Methadone OUD treatment needs outweigh today's diversion risk:** Historically, methadone for OUD has been dispensed from OTPs in part to limit diversion, yet buprenorphine and methadone from OTPs are largely not included in modern-day state prescription drug monitoring programs (PDMPs), despite today's allowances for take-home methadone. In contrast, community pharmacies participate in state PDMPs that now exist nationwide, which are critical tools in preventing substance diversion.^

## What You Can Do



**Co-sponsor the Modernizing Opioid Treatment Access Act (MOTAA) (H.R. 1359\* / S. 644).** MOTAA would allow addiction specialist physicians (and OTP clinicians\*) to prescribe methadone for OUD treatment **that can be picked up at community pharmacies**, subject to federal rules or guidance on supply of methadone for unsupervised use.

\*H.R. 1359 applies to addiction specialist physicians and OTP clinicians; S. 644, as passed by the Senate HELP Committee, is limited to addiction specialist physicians.

\*Nosyk B, Min JE, Homayra F, Kurz M, Guerra-Alejos BC, Yan R, et al, Comparative effectiveness of buprenorphine/naloxone versus methadone for treatment of opioid use disorder: emulating target trials with population-level data. Poster session presented at: The College on Problems of Drug Dependence (CPDD) 86th Annual Scientific Meeting; 2024 Jun 15-19; Montreal, CAN, as cited in NIDA. 2024, July 29. To address the fentanyl crisis, greater access to methadone is needed. Retrieved from <https://nida.nih.gov/about-nida/noras-blog/2024/07/to-address-the-fentanyl-crisis-greater-access-to-methadone-is-needed> on 2024, September 4.

^Puac-Polanco, Victor, Stanford Chihuri, David S Fink, Magdalena Cerdá, Katherine M Keyes, and Guohua Li. "Prescription Drug Monitoring Programs and Prescription Opioid-Related Outcomes in the United States." *Epidemiologic Reviews* 42, no. 1 (April 3, 2020): 134-53. <https://doi.org/10.1093/epirev/mxaa002>.

