## Expanding Methadone Access in New Mexico

## **OTP Regulations**

According to the New Mexico Legislative Finance Committee, nearly 24 percent of New Mexicans have a substance use disorder, over half of which are due to opioid or alcohol use disorders that can be treated with medication. Methadone is one of three Food and Drug Administration-approved drugs for the treatment of opioid use disorder (OUD) and can only be dispensed by specialty opioid treatment programs (OTPs). States may layer additional requirements on OTPs in addition to the strict regulations posed at the federal level. Thus, appropriate state regulation is critical to ensure that OTPs are accessible and offer evidence-based treatment to individuals with OUD.

In December 2024, the New Mexico Health Care Authority issued a <u>letter of direction</u> to managed care organizations to more closely align with federal regulations (<u>42 CFR Part 8</u>) until permanent state regulations are promulgated. The letter of direction made several necessary changes that will improve access to evidence-based methadone treatment and enhance the patient experience. Despite these changes, the state can continue to make improvements in several areas, including:

- 1. Explicitly permit guest dosing
- 2. Remove the requirement for a needs assessment to open a new OTP
- 3. Remove the need for pharmacy licensure
- 4. Remove the requirement for OTPs to employ a pharmacist or dispensing physician
- 5. Explicitly prohibit administrative discharge due to continued substance use and/or missed doses

## Increasing Availability of Methadone

In addition to regulatory barriers, New Mexicans also face significant geographic barriers to accessing methadone. As shown in **Figure 1**, a vast majority of the state is not within a 30-minute drive to an OTP. These travel burdens are most stark in the northeast and southwest regions of the state. Greater access to methadone is needed to ensure patient-centered care, which requires access to all three forms of medications for opioid use disorder (MOUD).

Two ways the state can increase the availability and accessibility of methadone include 1) building on existing infrastructure by expanding MOUD services offered through its public health offices and 2) utilizing mobile methadone vans and medication units.

Currently, the New Mexico Department of Health (DOH) operates 55 <u>public health offices</u> across the state. While 38 of these offices offer medications containing buprenorphine, none offer methadone which, in some cases, may be more clinically appropriate for individuals with OUD. **Figure 2** illustrates how adding the provision of methadone services to existing public health offices would increase the accessibility of methadone across the state. To do this, DOH would need certification through the Substance Abuse and Mental Health Services Administration, licensing from the Drug Enforcement Administration, and licensing from the New Mexico Board of Pharmacy.

Additionally, the state can leverage the use of mobile methadone vans and/or medication units to expand methadone access. Mobile methadone units can offer the same services as OTPs and can travel between fixed-site OTPs to other sites in the community. This is especially beneficial for rural and historically underserved areas where there may be a dearth of treatment services. Mobile methadone units can also be used to make treatment accessible to incarcerated people and Tribal populations. Medication units can serve as satellite locations of existing OTPs, offering methadone dosing and related services in settings such as community health centers, hospitals, or correctional facilities. These units extend the reach of OTPs into areas where establishing a full program may not be feasible. Both mobile methadone units and medication units can reduce travel times, lower barriers to care, and support continuity of treatment.

Figure 1

New Mexico Population Density Outside 30 Minutes Driving of Opioid Treatment Program Locations

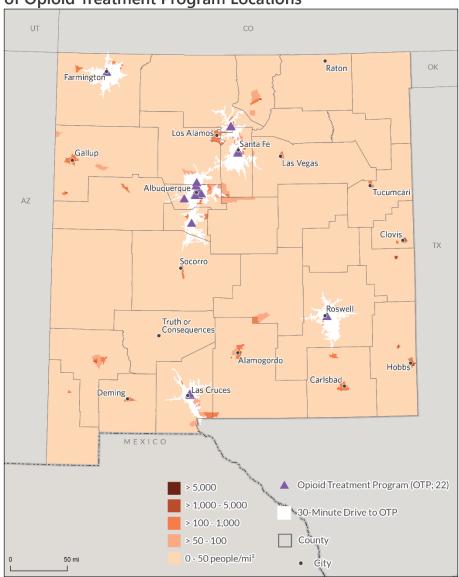


Figure 2

## New Mexico Population Density Outside 30 Minutes Driving of Opioid Treatment Program Locations & Public Health Offices

