

Independent Regulatory Review Commission Regulation #16A-4962: Opioid Treatment Programs Comments in Support of Final-Omitted Regulation Nov. 6, 2024

The Rehabilitation and Community Providers Association (RCPA) is a statewide association representing a wide range of human services providers, including substance use disorder (SUD) treatment providers. Within our SUD treatment provider membership, the majority of Pennsylvania's opioid treatment programs (OTPs) are represented. In addition, the Pennsylvania Association for the Treatment of Opioid Dependence (PATOD) is also an RCPA member. As such, RCPA is the leading voice of OTPs in Pennsylvania.

RCPA supports the final-omitted regulation (Regulation #16A-4962: Opioid Treatment Programs), submitted by the Department of State, Bureau of Professional and Occupational Affairs, State Board of Medicine, that amends the Board's regulations at 49 PA Code § 16.92 by allowing the initial physical examination required for prescribing, administering and dispensing controlled substances to be conducted by means of telehealth for patients being admitted into an OTP for treatment of opioid use disorder (OUD) with either buprenorphine or methadone.

The federal government, through the Substance Abuse and Mental Health Services Administration, has demonstrated its support of and commitment to ensuring greater accessibility to and flexibility with OUD treatment through OTPs through its <u>Final Rule on 42 CFR Part 8</u>. Per our understanding, the Board of Medicine worked closely with the Pennsylvania Department of Drug and Alcohol Programs (DDAP) in submitting this final-omitted regulation. This effort is in keeping with the Commonwealth of Pennsylvania's support of and commitment to that same accessibility and flexibility at the state level. RCPA fully supports this state-level alignment with federal regulation.

Enabling OTPs to conduct the initial examination required as part of induction into methadone or buprenorphine treatment through telehealth significantly improves and expedites patient access to the gold standard treatment for OUD without sacrificing quality or safety. In a treatment environment where finding qualified physicians, physician assistants and certified registered nurse practitioners is challenging, telehealth bridges a significant gap. Physicians would no longer need to be physically on site at the OTP where treatment is to take place to examine a patient as part of the induction process. Rather, from anywhere in the commonwealth, a physician can examine more patients, who can then begin treatment with medication faster at a facility near their home. In fact, with this final-omitted regulation, OTPs will have the ability to accommodate same-day or walk-in admissions instead of scheduling intake appointments days later. Following commencement of treatment/admission to the OTP, then, the full in-person physical examination will take place within 14 days.

Research has demonstrated the effectiveness of COVID-era flexibilities, including telehealth, that safely ensured greater access to medication to treat OUD at reducing overdose deaths. This final-omitted regulation expands upon those flexibilities to include and make permanent tele-induction of methadone, recognizing telehealth as an effective strategy to improve patient access, engagement, retention and satisfaction while addressing workforce challenges. It further advances OTPs to be more accessible, flexible and patient-centered. RCPA thanks the Independent Regulatory Review Commission for its review and consideration.