ASSEMBLY, No. 5500

STATE OF NEW JERSEY

220th LEGISLATURE

INTRODUCED MAY 25, 2023

Sponsored by:

Assemblyman WILLIAM F. MOEN, JR.
District 5 (Camden and Gloucester)
Assemblyman BENJIE E. WIMBERLY
District 35 (Bergen and Passaic)
Assemblywoman ANGELA V. MCKNIGHT
District 31 (Hudson)

SYNOPSIS

Establishes "Remote Methadone Dosing Pilot Program;" appropriates \$225,000.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/30/2023)

1 AN ACT concerning opioid treatment programs, supplementing Title 2 26 of the Revised Statutes and making an appropriation.

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BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

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- 1. As used in this act:
- "Commissioner" means the Commissioner of Human Services.
- "Department" means the Department of Human Services.
- "Division" means the Division of Mental Health and Addiction Services in the Department of Human Services.

"Opioid treatment program" means a program certified as an opioid treatment program by the federal Substance Abuse and Mental Health Services Administration and licensed to operate as an opioid treatment program in this State by the Department of Human Services.

"Pilot program" means the Remote Methadone Dosing Pilot Program established by this act.

"Remote methadone dosing" means the use of telehealth and telemedicine to remotely monitor a patient's methadone-based treatment, which treatment is administered in the form of take-home doses of methadone.

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- 2. a. The Department of Human Services shall establish a threeyear Remote Methadone Dosing Pilot Program. The goal of the program will be: to increase the compliance of, and reduce the costs providing, medication assisted treatment provided participating opioid treatment programs through the use of remote methadone dosing; to evaluate the effect remote methadone dosing has on patient outcomes and cost-savings in the treatment of opioid use disorder; and to develop any recommendations for legislative or regulatory action concerning whether remote methadone dosing should be implemented in opioid treatment programs in this State.
- b. The division shall select one opioid treatment program each in the cities of Atlantic City, Camden, and Paterson to participate in the pilot program.
- c. In accordance with applicable federal and State laws and when clinically appropriate, each opioid treatment program participating in the pilot program shall be authorized to utilize remote methadone dosing to treat a patient who is receiving methadone-based treatment and is eligible to receive take-home doses of methadone. In treating patients using remote methadone dosing, participating opioid treatment programs shall utilize a provider of an online-enabled technology application, service, website, or system that facilitates remote methadone dosing approved by the department.
- d. Under no circumstances shall the State or an opioid treatment program require that a patient participate in the pilot program.

A5500 MOEN, WIMBERLY

- 1 Each opioid treatment program participating in the pilot 2 program shall annually report to the department, in a manner 3 prescribed by the commissioner, information on patient outcomes and cost-savings as a result of the pilot program, including 4 5 information on:
 - the number of patients treated using remote methadone (a) dosing;
 - (b) treatment compliance;
 - (c) the average time each patient spends being treated using remote methadone dosing;
 - (d) patient retention;
 - (e) any realized reduction in medical transportation costs; and
 - (f) any other information the department deems relevant in evaluating the effectiveness of the pilot program.

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- 3. The Department of Human Services shall, no later than four years after the date the program is established, prepare and submit to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1) to the Legislature, a report that shall include:
- a. an analysis on the impact of the pilot program on patient outcomes and cost-savings using the information collected pursuant to subsection e. of section 2 of this act;
- any recommendations for legislative or regulatory action concerning the potential expansion of remote methadone dosing in opioid treatment programs in this State; and
- any other information the department deems relevant in evaluating the effectiveness of the pilot program.

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There is appropriated from the General Fund to the Department of Human Services the sum of \$225,000 to implement the provisions of this act. The department shall issue a grant in the amount of \$75,000 to each opioid treatment program selected to participate in the Remote Methadone Dosing Pilot Program to effectuate the provisions of this act.

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5. The Commissioner of Human Services and the Commissioner of Health may each adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), as are necessary to implement the provisions of this act.

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6. This act shall take effect 90 days after the date of enactment.

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STATEMENT

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This bill establishes the Remote Methadone Dosing Pilot Program in the Department of Human Services (DHS). The goal of the program will be: to increase the compliance of, and reduce the costs of providing, medication assisted treatment provided by

participating opioid treatment programs (OTP) through the use of remote methadone dosing; to evaluate the effect remote methadone dosing has on patient outcomes and cost-savings in the treatment of opioid use disorder; and to develop any recommendations for legislative or regulatory action concerning whether remote methadone dosing should be implemented in opioid treatment programs in this State.

The bill defines "remote methadone dosing" to mean the use of telehealth and telemedicine to remotely monitor a patient's methadone-based treatment, which treatment is administered in the form of take-home doses of methadone.

Under this bill, the Division of Mental Health and Addiction Services in the DHS will select one OTP each from the cities of Atlantic City, Camden, and Paterson to participate in the program. In accordance with applicable federal and State laws and when clinically appropriate, each OTP participating in the pilot program will be authorized to utilize remote methadone dosing to treat a patient who is receiving methadone-based treatment and is eligible to receive take-home doses of methadone. In treating patients using remote methadone dosing, participating OTPs will utilize a provider of an online-enabled technology application, service, website, or system that facilitates remote methadone dosing approved by the department. Under no circumstances will the State or an opioid treatment program require that a patient participate in the pilot program.

Each participating OTP will be required to annually report to the department information on patient outcomes and cost-savings as a result of the pilot program, including information on: the number of patients treated using remote methadone dosing; treatment compliance; the average time each patient spends being treated using remote methadone dosing; patient retention; any realized reduction in medical transportation costs; and any other information the department deems relevant in evaluating the effectiveness of the pilot program.

The bill requires DHS, no later than four years after the date the program is established, to prepare and submit to the Governor and Legislature a report that includes: an analysis on the impact of the pilot program on patient outcomes and cost-savings using the information received from participating OTPs; any recommendations for legislative or regulatory action concerning the potential expansion of remote methadone dosing in OTPs in this State; and any other information the department deems relevant in evaluating the effectiveness of the pilot program

The bill is appropriates \$225,000 from the General Fund to the DHS. The department will then issue a grant in the amount of \$75,000 to each participating OTP to effectuate the provisions of the bill.