

Rule Summary and Fiscal Analysis

Part A - General Questions

Rule Number: 5122-40-06
Rule Type: Amendment
Rule Title/Tagline: Methadone administration.
Agency Name: Department of Mental Health and Addiction Services
Division:
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I. Rule Summary

1. **Is this a five year rule review?** No
 - A. **What is the rule's five year review date?** 6/1/2022
2. **Is this rule the result of recent legislation?** Yes
 - A. **If so, what is the bill number, General Assembly and Sponsor?** HB 111 - 132
- Rep. Carfagna, Rep. Ryan
3. **What statute is this rule being promulgated under?** 119.03
4. **What statute(s) grant rule writing authority?** 5119.391
5. **What statute(s) does the rule implement or amplify?** 5119.391
6. **What are the reasons for proposing the rule?**

The current methadone licensure rules in OAC Chapter 5122-40 were updated in June of 2017, concurrent with a change in statutory authority. The statutory authority in ORC 5119.391 expanded the scope of the methadone licensure program and the rules were updated to reflect that change. HB 111 again changes the statutory authority for the program, expanding it from a methadone only licensure to an opioid treatment program license. The changes in the rules are based both to accommodate stakeholder feedback since June 2017 and incorporate changes in the statutory authority.

- 7. Summarize the rule's content, and if this is an amended rule, also summarize the rule's changes.**

This rule sets forth requirements for administration of medication by licensed programs. Nurse practitioners are added to the list of personnel who can dispense. Clarifications around take-home doses and closing days are added, in line with federal regulations.

- 8. Does the rule incorporate material by reference? No**
- 9. If the rule incorporates material by reference and the agency claims the material is exempt pursuant to R.C. 121.71 to 121.76, please explain the basis for the exemption and how an individual can find the referenced material.**

Not Applicable

- 10. If revising or re-filing the rule, please indicate the changes made in the revised or re-filed version of the rule.**

Phrasing in paragraphs (P)(3), (5), and (7) was changed at stakeholder request. Updated (T) to be easier to read and implement.

II. Fiscal Analysis

- 11. As a result of this proposed rule, please estimate the increase / decrease in revenues or expenditures affecting this agency, or the state generally, in the current biennium or future years. If the proposed rule is likely to have a different fiscal effect in future years, please describe the expected difference and operation.**

This will have no impact on revenues or expenditures.

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Not applicable.

- 12. What are the estimated costs of compliance for all persons and/or organizations directly affected by the rule?**

There should be no new cost of compliance with regards to the nurse practitioners, take home doses, or closing days as these are additions to allow for more flexibility in operations. The addition regarding patient transfers should also not incur additional cost as the patient's method of payment will still be in effect.

- 13. Does the rule increase local government costs? (If yes, you must complete an RSFA Part B). No
- 14. Does the rule regulate environmental protection? (If yes, you must complete an RSFA Part C). No

III. Common Sense Initiative (CSI) Questions

- 15. Was this rule filed with the Common Sense Initiative Office? Yes
- 16. Does this rule have an adverse impact on business? Yes
 - A. Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? Yes

This chapter and its statutory authority require Opioid Treatment Programs to be licensed and follow the standards set forth in these rules in order to operate.
 - B. Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms? No
 - C. Does this rule require specific expenditures or the report of information as a condition of compliance? No