

Information for Pharmacists

UPDATED - Background and Frequently Asked Questions - Methadone

Effective June 1, 2025

Please include this Procedure in your Drug Programs Information Network (DPIN) Manual under Section 4: Claims Submission.

- Updates to the [Claims Submission Procedure – Methadone](#) come into effect June 1, 2025.
- As communicated in Bulletin #141, effective June 1, 2025:

The following generic methadone products will be listed as unrestricted Part 1 benefits:

Drug	DIN
PMS-methadone hydrochloride 10 mg/ml oral concentrate (dye-free, sugar-free, unflavored)	02552728
PMS-methadone hydrochloride 10 mg/ml oral concentrate (cherry flavored)	02552736

- As communicated in Bulletin #133, effective July 2, 2024:

The following generic methadone products were listed as EDS benefits:

Drug	DIN
Apo-methadone 1mg tablet	02533642
Apo-methadone 5mg tablet	02533650
Apo-methadone 10mg tablet	02533669
Apo-methadone 25mg tablet	02533677

- As communicated in Bulletin #112 effective August 5, 2021:

The following methadone products were listed as unrestricted Part 1 benefits:

Drug	DIN
JAMP methadone (sugar free) 10 mg/ml oral concentrate	02495783

ODAN methadone (cherry flavored) 10 mg/ml oral concentrate	02495872
ODAN methadone (sugar free, unflavored) 10 mg/ml oral concentrate	02495880
SANDOZ methadone (sugar free, cherry flavored) 10 mg/ml oral concentrate	02481979

Methadose and Metadol-D were listed as a Part 2 benefits:

Drug	DIN
Methadose* 10 mg/ml oral liquid	02394596
Methadose* Sugar Free 10mg/ml oral liquid	02394618
Metadol-D** 10 mg/ml oral concentrate	02244290

- As communicated in Bulletin #84, effective October 22, 2015, methadone Powder for Compound (PIN 00909190) has been delisted.

Are methadone, Methadose and/or Metadol-D interchangeable?

- NONE of the methadone, Methadose and/or Metadol-D 10 mg/ml Concentrate products are interchangeable with one another.** Health Canada issued a [safety alert](#) in July 2020 advising that that there may be a link between switching methadone-containing products used to treat opioid use disorder and the risk of lack of effect, which may present as withdrawal symptoms, which can lead to serious harms.
- Pharmacists should refer to The College of Pharmacists of Manitoba (CPhM) for further information. CPhM’s document [Opioid Agonist Therapy Guidelines for Manitoba Pharmacists](#) is available online.

Are Metadol* and generic methadone tablets interchangeable?**

- NONE of the Metadol*** and/or generic 1mg, 5mg, 10mg, 25mg methadone tablets are interchangeable with one another.** Pharmacists should refer to The College of Pharmacists of Manitoba (CPhM) for further information.

How should I interpret the Part 2 prescribing criteria: “For treatment of patients who (a) are being treated with Methadose” / “For treatment of patients who (a) are being treated with Metadol-D”?

- While the following scenarios provide guidance, the pharmacist has the responsibility to use their professional judgement and discretion. The pharmacist’s assessment, along with the reasons behind their decisions, should be documented clearly and thoroughly in a way that allows for the department and/or the College of Pharmacists of Manitoba to conduct audits if needed.
- Patients are **eligible** for Part 2 coverage under criteria (a) for Methadose (or Metadol-D, respectively) if:
 - They are actively being dispensed a prescription for Methadose / Metadol-D
 - They are restarting methadone with a new prescription after missing a short amount of time (e.g., a few days) and were previously taking Methadose (or Metadol-D)

- They switched to a methadone product covered under Part 1 for a short period of time (e.g., a few days) without stopping and were previously taking Methadose / Metadol-D
- Patients are **not eligible** for Part 2 coverage under criteria (a) for Methadose (or Metadol-D, respectively), if they are not currently being dispensed an active prescription – for example:
 - They are restarting methadone with a new prescription after missing a long period of time (e.g., one year), and were previously taking Methadose / Metadol-D

Why is the quantity in DPIN being entered in millilitres (ml) and not milligrams (mg)?

- All methadone, Methadose and Metadol-D 10 mg/ml Concentrate prescriptions are to be entered in the DPIN in millilitres. The entry in millilitres (ml) is consistent with the DPIN entry requirement for all other liquid formulations of products. The ml entry is also consistent with the entry methodology in other provincial jurisdictions, which addresses prior safety issues through a more consistent and accurate documentation of the quantity, strength and number of days' supply of methadone, Methadose or Metadol-D provided to the patient in the DPIN history. By using the Drug Identification Number (DIN) of the product, DPIN can also provide drug interaction information.

Are methadone, Methadose or Metadol-D 10 mg/ml Concentrate covered for chronic pain?

- Effective August 5, 2021, methadone was listed on the Manitoba Formulary as an unrestricted Part 1 benefit; and Methadose and Metadol-D were listed as Part 2 benefits where coverage criteria will apply.

Do we need to dilute the methadone, Methadose or Metadol-D 10 mg/ml Concentrate?

- Pharmacists should refer to The College of Pharmacists of Manitoba (CPhM) for further information. CPhM's document [Opioid Agonist Therapy Guidelines for Manitoba Pharmacists](#) is available online.

When we bill the methadone, Methadose and/or Metadol-D stock solution, do we submit the claim as a regular drug product or should we bill it as a compound?

- The practice of diluting methadone, Methadose or Metadol-D 10 mg/ml Concentrate with any diluent, including crystalline solution, is not compounding and is not eligible for reimbursement as an extemporaneous compound. All prescriptions must be billed using the appropriate DIN.

How am I paid for methadone, Methadose and/or Metadol-D 10 mg/ml Concentrate; what should my professional fee be?

- The [Claims Submission Procedure – Methadone](#) notes that pharmacists are to bill for the cost of the drug plus one professional fee. If you have a fee structure for methadone, Methadose and/or Metadol-D 10 mg/ml Concentrate, whereby the fee may vary depending on the days' supply provided, and whereby the same fee(s) would be charged to a cash paying customer, this is acceptable.
- The pharmacy will not be reimbursed for the cost of the diluent that is used to prepare the methadone, Methadose, or Metadol-D dose for the patient.

We get a lot of pain management people taking different doses - 1mg/ml, 5mg/ml, 10mg/ml and 50mg/ml. How could they continue receiving their pain medication if only the 10mg/ml is covered?

- Effective August 5, 2021, methadone was listed on the Manitoba Formulary as an unrestricted Part 1 benefit; and Methadose and Metadol-D were listed as Part 2 benefits where coverage criteria apply.
- Methadone, Methadose and Metadol-D Concentrate are manufactured in a 10 mg/ml strength to allow for easy conversion.

Our pharmacy system software is not designed with a decimal place for the quantity dispensed. How can I input the correct quantity of 7.5ml for a 75mg dose?

- Please contact your pharmacy software vendor to activate the decimal point on your software if necessary. Software vendors have confirmed that decimal points can be accommodated on software systems.

If your questions are not answered by reviewing the Claims Submission Procedures and FAQs posted at:
<https://www.gov.mb.ca/health/pharmacare/healthprofessionals.html>

Please send an e-mail to PDPInfoAudit@gov.mb.ca.