









Opioid Treatment Program (OTP)	&	Office Based Opioid Treatment (OBOT)
UNDERSTANDING THE CARE SETTINGS FOR OPIOID TREATMENT		
An OTP is an outpatient program which provides comprehensive treatment services including pharmacological treatment for opioid use disorder.		OBOT refers to the practice of prescribing medications for opioid use disorder by a practitioner in a setting other than an OTP.
Practice Setting:		Practice Setting:
OTP programs can be non-profit or for-profit, private, or public entities. OTPs can be standalone, hospital-based, or may be a part of a larger program that provides multiple levels of addiction treatment services. OTPs can also operate brick-and-mortar or mobile satellite programs. Satellite medication units can be integrated into incarcerated settings, FQHCs, or may be stand-alone.		OBOT can occur in a private medical practice or any number of practice settings where the prescribing of medication occurs. This includes in all-virtual settings through tele-health platforms.
Medications Used:		Medications Used:
Methadone Buprenorphine Naltrexone		Buprenorphine Naltrexone
Who Provides Services:		Who Programs Services:
Multidisciplinary team. OTPs are required by federal law to have a Medical Director that is a licensed physician and who assumes responsibility for administering all medical services performed by the program. OTPs must have a designated program sponsor responsible for the operation of the program and who assumes responsibility for all employees. OTPs also employ at a minimum nurses and counselors. Additional team members may include physician extenders (APRN, PA), pharmacists, case managers, peer support specialists.		Licensed physician or advanced practitioner. For buprenorphine, the practitioner must have prescriptive authority to prescribe controlled substances (schedule III).
Drug-testing:		Drug-testing:
Required.		Not Required. Utilized by some OBOT providers.

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How Medication is Delivered:		How Medication is Delivered:
<p>Medication is ordered by a practitioner. Medication is administered directly to patients on-site by a member of the medical staff, generally a nurse or pharmacist. Medication may be given to patients for at-home use (called take-home doses) when the patient is demonstrating stability. When determining stability for take-home doses, federal regulation instructs practitioners to consider whether the rehabilitative benefits of reduced program attendance outweigh the potential risks of diversion.</p>	<p>The practitioner writes a prescription for a patient to fill at an outpatient retail pharmacy.</p>	
Services Offered:		Services Offered:
<p>Required services include a comprehensive physical exam, counseling, and supportive services based on an individualized plan of care. At a minimum this includes addiction counseling, case management services, and health education. Some programs may also offer enhanced services such as: treatment for co-occurring mental health, HIV/Hepatitis testing and services, general medical care, peer support services, overdose education and naloxone dispensing/access, harm reduction services.</p>	<p>Physician/Provider Visits Other services not required. Service offerings are contingent upon the service setting in which OBOT occurs. It is important to note that OBOT is a practice not a program setting. OBOT that occurs within the context of an addiction treatment program will include addiction treatment supports. OBOT that occurs in other settings may or may not include access to or referrals for addiction and recovery services.</p>	
Oversight:		Oversight:
<p>Required by 42 CFR 8 to maintain certification and accreditation. Must be registered as an NTP with the Drug Enforcement Administration. Must be licensed within the state in which they operate. Most states impose regulations on OTPs.</p>	<p>No federal regulatory oversight. Only the practice of the individual practitioner would be accountable to their licensing board.</p>	
Diversion Control:		Diversion Control:
<p>OTPs must maintain a comprehensive plan to prevent and reduce diversion.</p>	<p>No diversion control requirements.</p>	