

Webinar Series: Session 8

# Office-Based Opioid Treatment

**Dan Bizjak**

State Opioid Treatment Authority

Bureau of Prevention Treatment and Recovery

Division of Care and Treatment Services

June 17, 2022



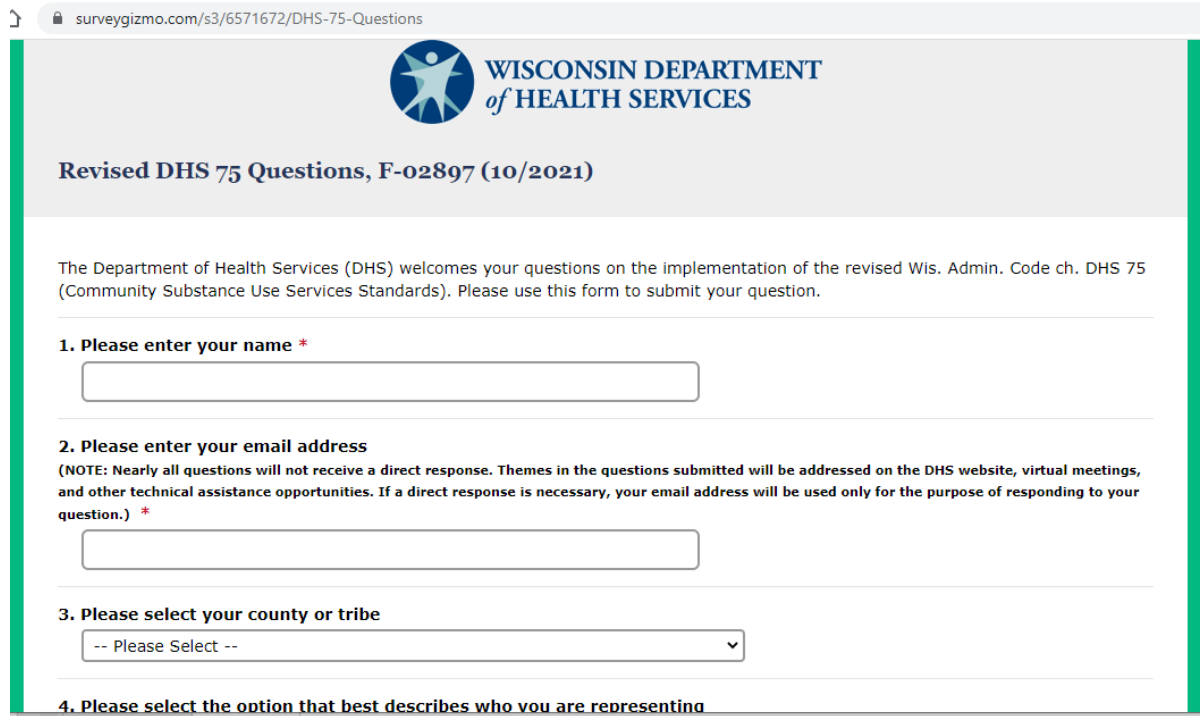
WISCONSIN DEPARTMENT  
*of* HEALTH SERVICES

# Disclaimer

Nothing stated during this webinar series is intended to interpret administrative rule language. The information provided in today's presentation and subsequent presentations is intended to assist providers with understanding the revised rule and should not be construed as legal interpretation.

Any formal guidance issued regarding the rule will be identified as such and will follow the approved process.

# Questions? Use online form.



The screenshot shows a web browser window with the URL [surveygizmo.com/s3/6571672/DHS-75-Questions](https://surveygizmo.com/s3/6571672/DHS-75-Questions). The page header features the Wisconsin Department of Health Services logo and the text "WISCONSIN DEPARTMENT of HEALTH SERVICES". Below the header, the title "Revised DHS 75 Questions, F-02897 (10/2021)" is displayed. The main content area contains a welcome message: "The Department of Health Services (DHS) welcomes your questions on the implementation of the revised Wis. Admin. Code ch. DHS 75 (Community Substance Use Services Standards). Please use this form to submit your question." The form consists of four numbered sections: 1. "Please enter your name \*" with a text input field; 2. "Please enter your email address" with a note: "(NOTE: Nearly all questions will not receive a direct response. Themes in the questions submitted will be addressed on the DHS website, virtual meetings, and other technical assistance opportunities. If a direct response is necessary, your email address will be used only for the purpose of responding to your question.) \*" and a text input field; 3. "Please select your county or tribe" with a dropdown menu showing "-- Please Select --"; 4. "Please select the option that best describes who you are representing" with a dropdown menu.

<https://www.dhs.wisconsin.gov/rules/dhs75-implementation.htm>

# DHS 75.60 office-based opioid treatment overview

Code	Topic	Code	Topic
75.60 (1)	Applicability	75.60 (2)	Service description
75.60 (3)	Relationship to treatment service general requirements	75.60 (4)	Definitions
75.60 (5)	State opioid treatment authority	75.60 (6)	General requirements
75.60 (7)	Assessment	75.60 (8)	Intake
75.60 (9)	Treatment plan	75.60 (10)	Prescribing requirements

# DHS 75.60(1) applicability

This section shall not apply to office-based opioid treatment occurring in any of the following settings:

- a) A treatment service in which all patients receiving medication for addiction are enrolled in a service otherwise certified under this chapter.
- b) A state or local correctional facility.
- c) A hospital and their affiliates.
- d) A primary care service
- e) A service providing medication for addiction to less than 30 patients.

# DHS 75.60(2) service description

In this section, "office-based opioid treatment," or "OBOT" service means pharmacotherapy for opioid use disorder, delivered in a stand-alone office-based opioid treatment clinic, a private office, or public sector clinic setting, excluding certified settings exempted in DHS 75.60 (1) or otherwise certified under this chapter, by practitioners authorized to prescribe outpatient supplies of medications approved by the FDA for the treatment of opioid addiction or dependence, prevention of relapse of opioid addiction or dependence, or both.

# DHS 75.60(2) service description

An OBOT is subject to the oversight of the state opioid treatment authority. OBOT includes treatment with all medications approved by the FDA for such treatment.

# DHS 75.60(3) relationship to treatment

A service that provides OBOT under this section shall be exempt from the treatment service general requirements in subchapter IV, unless otherwise indicated in this section.



# DHS 75.60(6) general requirements

- a) Governing authority or entity owner
- b) Caregiver background check
- c) Personal records
- d) Confidentiality

# DHS 75.60(7) assessment

(a) An OBOT service shall perform and document an assessment of each patient. The assessment shall include all of the following...

# DHS 75.60(7) assessment

1. A comprehensive medical and psychiatric history.
2. A brief mental status exam.
3. Substance abuse history.
4. Family history and psychosocial supports.
5. Clinically appropriate physical examination at the time of admission and annually thereafter.
6. Urine drug screen or oral fluid drug testing.

# DHS 75.60(7) assessment

7. Pregnancy test for patients of childbearing age and ability.
8. Review of the patient's prescription information in the PDMP.
9. Testing for human immunodeficiency virus.
10. Testing for hepatitis B.
11. Testing for hepatitis C.
12. Consideration of screening for tuberculosis and sexually-transmitted diseases in patients with known risk factors.

# DHS 75.60(8) intake

An OBOT service shall comply with all of the following requirements:

(a) Before initiating a medication for opioid use disorder, an approved DATA 2000-waived prescriber shall give the patient or the patient's representative information about all drugs approved by the FDA for use in medication-assisted treatment. The information must be provided both orally and in writing.

# DHS 75.60(8) intake

An OBOT service shall comply with all of the following requirements:

(b) Comply with all federal and state laws and regulations governing the prescribing of the medication.

# DHS 75.60(9) treatment plan

(a) An OBOT service shall establish and document a treatment plan that includes all of the following:

1. The prescriber's rationale for selection of the specific drug to be used in the medication-assisted treatment.
2. Patient education regarding the medication and the services to be provided.
3. The patient's written, informed consent to treatment and for the medication they will be receiving.

# DHS 75.60(9) treatment plan

- (a) An OBOT service shall establish and document a treatment plan that includes all of the following:
4. Random urine-drug screens or oral swabs.
  5. A signed treatment agreement that outlines the responsibilities of the patient and the prescriber.
  6. A plan for psychosocial treatment, pursuant to par. (c).



# DHS 75.60(9) treatment plan

(b) The prescriber shall only provide medication for opioid use disorder in accordance with an acceptable treatment protocol for assessment, induction, stabilization, maintenance, and tapering. Acceptable protocols include any of the following....

# DHS 75.60(9) treatment plan

1. SAMHSA treatment improvement protocol publications for medication-assisted treatment.
2. ASAM national practice guidelines for the use of medications in the treatment of addiction involving opioid use.

# DHS 75.60(9) treatment plan

(c) Unless the prescriber providing OBOT services is a board-certified addictionologist, board-certified addiction psychiatrist, or psychiatrist, the prescriber shall refer and work jointly with a qualified behavioral health care provider, community mental health services provider, or community addiction services provider to determine the optimal type and intensity of psychosocial treatment for the patient...

# DHS 75.60(9) treatment plan

...and document the treatment plan in the patient record. The treatment provided shall, at minimum, include...

# DHS 75.60(9) treatment plan

1. A psychosocial needs assessment, substance abuse counseling, links to existing family supports, and referral to community services.
2. Substance use treatment services addressing the patient's needs identified during the assessment.

# DHS 75.60(9) treatment plan

3. Procedures for revising the treatment plan if the patient does not adhere to the original plan.
4. When clinically appropriate, and if the patient refuses treatment from a qualified behavioral healthcare provider, community mental health services provider, or community addiction services provider, the prescriber shall document the reason for the refusal in the patient's medical record.

# DHS 75.60(9) treatment plan

5. Additional requirements related to the provision of behavioral health services, including:
  - a) If the prescriber who prescribes the medication for opioid use disorder is also a board-certified addictionologist, psychiatrist, or board-certified psychiatrist, the prescriber may personally provide behavioral health services for addiction.

# DHS 75.60(9) treatment plan

5. Additional requirements related to the provision of behavioral health services, including:

- b) If the prescriber refers the patient to a qualified behavioral healthcare provider, community addiction services provider, or community mental health services provider, the prescriber shall document the referral and the maintenance of meaningful interactions with the provider in the patient record



# DHS 75.60(10) prescribing requirements

- a) The OBOT service shall ensure that all of the patient receive the following:
  1. A prescription for naloxone.
  2. Instructions for naloxone including recognizing the signs and symptoms of overdose and calling 911 in an overdose situation.
  3. An offer for a new prescription for naloxone upon expiration or use of the old kit.

# DHS 75.60(10) prescribing requirements

4. If the patient refuses the prescription for naloxone the prescriber shall provide the patient with information on where to obtain naloxone without a prescription.

# DHS 75.60(10) prescribing requirements

- b) The OBOT service shall ensure that all prescriptions for buprenorphine products shall comply with all of the following requirements...

# DHS 75.60(10) prescribing requirements

1. The provision shall be in compliance with the FDA-approved risk evaluation and mitigation strategy" for buprenorphine products.
2. With the exception of those conditions listed in sub. 3 (a-e), a prescriber who treats opioid use disorder with a buprenorphine product shall only prescribe buprenorphine and naloxone combination products for use in the OBOT service.

# DHS 75.60(10) prescribing requirements

3. The prescriber shall prescribe buprenorphine without naloxone (buprenorphine mono-product) at the OBOT service only in the following situations, and shall fully document the evidence for the decision to use buprenorphine mono-product in the patient's record when any of the following apply...

# DHS 75.60(10) prescribing requirements

- a) A patient is pregnant or breast-feeding.
- b) Converting a patient from buprenorphine mono-product to buprenorphine and naloxone combination product.
- c) Formulations other than tablet or film form approved by the FDA are administered.

# DHS 75.60(10) prescribing requirements

- d) A buprenorphine and naloxone combination product is contraindicated for withdrawal management and the contraindication documented in the patient record.
- e) The patient, after an explanation by the service of the difference between an allergic reaction and symptoms of opioid withdrawal precipitated by buprenorphine or naloxone, has an allergy to or intolerance of a buprenorphine and naloxone combination product. This information shall be included in the patient's record.

# DHS 75.60(10) prescribing requirements

4. Due to a higher risk of fatal overdose when buprenorphine is prescribed with other opioids, benzodiazepines, sedative hypnotics, carisoprodol, or tramadol, the prescriber shall only co-prescribe these substances when it is medically necessary and the following requirements are met...



# DHS 75.60(10) prescribing requirements

- a) The prescriber shall verify the diagnosis for which the patient is receiving the other drug and coordinate care with the prescriber for the other drug, including whether it is possible to taper the drug to discontinuation. If the prescriber prescribing buprenorphine is the prescriber of the other drug, the prescriber shall taper the other drug to discontinuation, if it is safe to do so. The prescriber shall educate the patient about the serious risks of the combined use.

# DHS 75.60(10) prescribing requirements

- b) The prescriber shall document progress with achieving the tapering plan.

# DHS 75.60(10) prescribing requirements

7. During the first 90 days of treatment, no more than a 2-week supply of the buprenorphine and naloxone combination product may be prescribed.
8. Starting with the 91st day of treatment and until the completion of 12 months of treatment, no more than a 30-day supply of the buprenorphine and naloxone combination product may be prescribed.

# DHS 75.60(10) prescribing requirements

(c) The OBOT service that utilizes naltrexone to treat opioid use disorder shall comply with all of the following requirements:

# DHS 75.60(10) prescribing requirements

2. The prescriber shall take measures to ensure that the patient is adequately detoxified from opioids prior to treatment with naltrexone.
  
- 3.(c) The OBOT service shall require urine drug screens, serum medication levels, or oral fluid drug testing at least every 3 months for the first year of treatment and at least every 6 months thereafter.

# Questions? Use online form.

The screenshot shows the Wisconsin Department of Health Services website. At the top left is the logo and name. To the right is a search bar. Below is a navigation menu with categories like 'About DHS', 'Data & Statistics', 'Diseases & Conditions', 'Health Care & Coverage', 'Long-Term Care & Support', 'Prevention & Healthy Living', 'Partners & Providers', and 'Certification, Licenses & Permits'. Below the menu is a 'Topics A-Z' index. The main content area features a breadcrumb trail 'Home > Revised DHS 75 Implementation' and a heading 'Revised DHS 75 Implementation'. Underneath is a sub-heading 'Improving substance use services' followed by a paragraph of text. To the right is a sidebar with a 'Keep in touch' section containing an email list sign-up and a link to an online form, which is circled in red. Below that is an 'Attention DQA' section.

WISCONSIN DEPARTMENT of HEALTH SERVICES

Search our website  
I'm looking for...

About DHS | Data & Statistics | Diseases & Conditions | Health Care & Coverage | Long-Term Care & Support | Prevention & Healthy Living | Partners & Providers | Certification, Licenses & Permits

Topics A-Z: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Find a COVID-19 vaccine  
Stop the spread of COVID-19

Revised DHS 75 Implementation

## Revised DHS 75 Implementation

### Improving substance use services

The new Wis. Admin. Code ch. DHS 75 was published October 25, 2021. This administrative rule sets the minimum standards for substance use prevention, intervention, and treatment services delivered across a variety of settings and levels of care. With a goal of supporting access to services throughout the state, the new rule eases requirements for providers in many areas while maintaining safety and quality of care standards.

[View the text of the new Wis. Admin Code ch. DHS 75](#) (PDF)

#### Key revisions

Keep in touch

Join our [email list](#) to receive information about implementation of the revised Wis. Admin Code ch. DHS 75

If you have questions, [complete this online form](#).

Attention DQA

<https://www.dhs.wisconsin.gov/rules/dhs75-implementation.htm>