

Drug Enforcement Administration (DEA) Releases Final Rule: Registration Requirements for Narcotic Treatment Programs (NTPs) with Mobile Components

Recently, the DEA lifted the moratorium that had been in effect since 2007 on registration of new mobile vans for delivery of NTP services (also known as Opioid Treatment Programs or OTPs). Prior to that time, methadone induction and maintenance and other services could be delivered by mobile vans operated by registered OTPs. Thirteen vans in operation at the time the moratorium was imposed were allowed to continue operating.

The DEA final rule for registering mobile units was published in the Federal Registry and went in to effect on July 28, 2021. The new requirements allow for more flexibility than ever before. Any registered OTP in good standing can now operate a mobile unit without going through a separate registration process, provided the mobile unit returns to the OTP every evening and operates within the same state. In some communities, mobile units are already serving local jails and probation/parole offices.

What does this mean for RSAT programs? According to the American Association for the Treatment of Opioid Dependency (AATOD): *“In our judgment, the use of such vans will work well in correctional settings, where the vans would provide increased access to the three federally approved medications to treat opioid use disorder. In this case, inmates would be inducted through these vans and maintained on such medications until they are released to an OTP.”*

Jail and re-entry programs stand to benefit significantly from the availability of mobile OTP services in any one of the three ways listed below.

- Individuals admitted to jails who are receiving methadone for opioid use disorder may be able to continue medication while in custody through mobile van services.
- RSAT programs wishing to offer all three approved medications may be able to contract with OPTs operating mobile units to administer one or more medications.
- Pre-release planning for continuity of care upon release can include referral to available mobile OTP services in communities of release without accessible MAT providers.

SAMHSA has provided a guidance letter that states: *“It is expected that these units will facilitate access to treatment for people in rural areas and for people who are incarcerated.”* Additional guidance is likely to be forthcoming. For now, RSAT program managers wishing to find out more about mobile services can talk with any OTPs they currently work with or contact the State Opioid Treatment Authority (SOTA) at the state agency responsible for SUD prevention and treatment services.

[SAMHSA-SIGNED-MedUnitGuidance-080321.pdf \(aatod.org\)](#)

[State Opioid Treatment Authorities | SAMHSA](#)