

# POLICIES AND PROCEDURE MANUAL

Chapter:	Service Delivery		
Title:	SUD Services – Medications for Opioid Use Disorder (MOUD) Inclusion		
Policy: 🛛	Review Cycle: Biennial	Adopted Date: 03.06.2018	<b>Related Policies:</b>
Procedure: □ Page: 1 of 2	Author: Chief Clinical Officer	Review Date: 11.12.2024	
	SUD Medical Director Medical Director		

### Purpose

Medication for Opioid Use Disorder Treatment (MOUD) is a standard of care that is broadly recognized as foundational to any comprehensive approach to the national opioid addiction and overdose pandemic. MSHN seeks to ensure therefore that no MSHN client is denied access to or pressured to reject the full array of evidence-based and potentially life-saving treatment options, including MOUD, that are determined to be medically necessary for the individualized needs of that client. <u>Note</u>: Supported by medical and epidemiological data, the terminology of the past, i.e., Medication-Assisted Treatment (MAT) has been replaced by MOUD to reflect new standards around low-barrier access to care and Medication First Principles (see "Related materials" #1-3 on p.2).

#### **Policy**

Following the recommendations by the Substance Abuse and Mental Health Services Administration (SAMHSA), the Centers for Disease Control and Prevention (CDC), the American Society for Addiction Medicine (ASAM), the National Institute for Drug Abuse (NIDA), the Michigan Department of Health and Human Services (MDDHS)'s Office of Recovery Oriented Systems of Care (OROSC) Treatment Policies #5 and #6, and other state and national directives, MSHN-contracted SUD treatment providers are expected to adopt a MOUD-inclusive treatment philosophy in which 1) the provider demonstrates willingness to serve all eligible treatment-seeking individuals, including those who are using MOUD as part of their individual recovery plan at any stage of treatment or level of care, and without precondition or pressure to adopt an accelerated tapering schedule and/or a mandated period of abstinence, 2) the provider develops policies that prohibit disparaging, delegitimizing, and/or stigmatizing of MOUD either with individual clients or in the public domain.

<u>Abstinence-Based (AB) Providers</u> – In the interest of offering client choice, MSHN will contract with AB providers who offer written policies and procedures stating the following:

- 1. If a prospective client, at the point of access, expresses his/her preference for an abstinence-based treatment approach, the access worker will obtain a signed MSHN Informed Consent form that attests that the client was informed in an objective way about other treatment options and recovery pathways including MOUD, and the client is choosing an abstinence-based provider from an informed perspective.
- 2. When a client already on MOUD (or considering MOUD) is seeking treatment services (counseling, case management, recovery supports, and/or transitional housing) at the point of access to an AB facility, access staff will a) be accepting towards MOUD as a choice, b) will not pressure the client to make a different choice, c) will work with that client to do a "warm handoff" to another provider of the client's choice by scheduling an appointment with the chosen provider that can provide those ancillary services while the client pursues his or her chosen recovery pathway that includes MOUD, and d) will follow up with the chosen provider to ensure client admission.
- 3. Providers' written policies will include language that prohibits delegitimizing, and/or stigmatizing of MOUD (e.g. using either oral or written language that frames MOUD as "substituting one addiction for another") either with individual clients, written materials for distribution to clients, or in the public domain.

## Applies to:

☑ All Mid-State Health Network Staff
□ Selected MSHN Staff, as follows:
☑ MSHN CMHSP Participants: Policy

## **Definitions**

AB: Abstinence-BasedASAM: American Society for Addiction MedicineCDC: Centers for Disease Control and PreventionMAT: Medication-Assisted TreatmentMOUD: Medication for Opioid Use DisorderMSHN: Mid-State Health NetworkMDHHS: Michigan Department of Health and Human ServicesNIDA: National Institute for Drug AbuseOROSC: Office of Recovery Oriented Systems of CareSAMHSA: Substance Abuse and Mental Health Services AdministrationSUD: Substance Use Disorder

### **Other Related Materials**

- 1. SAMHSA Advisory: Low Barrier Models Of Care For Substance Use Disorders
- 2. <u>CDC</u> Linking People with Opioid Use Disorder to Medication Treatment
- 3. https://www.medicationfirst.org/ Medication First Principles
- 4. <u>SAMHSA</u> Treatment Improvement Protocol #43 MOUD for Opioid Addiction in Opioid Treatment Programs
- 5. U.S. Surgeon General Treatment Options
- 6. National Institute on Drug Abuse Effective Treatment for Opioid Addiction
- 7. The <u>Center for Disease Control</u> "Vital Signs" Today's Heroin Epidemic
- 8. <u>White House Commission on Combating Drug Addiction and the Opioid Crisis</u> White House Commission on Combating Drug Addiction and the Opioid Crisis Letter to the President
- 9. ASAM National Practice Guideline
- 10. MDHHS MOUD Guidelines for Opioid Use Disorders
- 11. MSHN 2022 SUD Provider Manual

#### **References/Legal Authority:**

- 1. Behavioral Health and Developmental Disabilities Administration Treatment Policy #5
- 2. Behavioral Health and Developmental Disabilities Administration Treatment Policy #6

Date of Change	Description of Change	Responsible Party	
12.2017	New Policy	Chief Clinical Officer, SUD Medical Director & Medical Director	
02.2019	Annual Review	Chief Clinical Officer	
10.2020	Annual Review	Chief Clinical Officer	
08.2022	Biennial Review	Chief Clinical Officer	
09.2024	Biennial Review	Chief Clinical Officer	

#### Change Log: