Provider Bulletin 20-33
December 22, 2020

Requirement for All Hospital-based Psychiatry Providers to Have Capability to Provide Medications for Opioid Use Disorder (MOUD) to Individuals with Opioid Use Disorder (OUD) Who Require Hospital-based Care

As the mortality rate of Opioid Use Disorder (OUD) remains significantly elevated, it is imperative that all high-acuity treatment settings offer screening and immediate access to evidence-based treatments for OUD, including Medication for Opioid Use Disorder (MOUD). Data overwhelmingly displays the efficacy and life-saving nature of MOUD, which is the standard of care and must be made readily available to meet member needs. Acute inpatient hospitalizations are an ideal time to engage and stabilize these members.

All hospital-based psychiatry providers must develop a process to ensure that members are screened for OUD and that any members identified as having OUD are provided onsite access to evidence-based treatments, specifically MOUD. All inpatient psychiatry units and general hospital psychiatry consultation services are required to develop the infrastructure and policies so that MOUD services are available onsite such that members can be inducted and maintained on MOUD during an acute inpatient or medical hospitalization.

CBH recommends the following elements be considered in the development of the infrastructure and policies:

- A process to ensure appropriate screening for OUD
- Required OUD training for facility clinicians, including waiver
- A process for educating members with OUD about:
  - Treatment options, including buprenorphine, methadone, and naltrexone-XR to allow for appropriate informed consent and that informed consent is appropriately documented in the member’s medical record.
  - The significantly increased mortality risk associated with abstinence-based treatment.
  - Naloxone, its use, availability, and how to obtain a dose.
- Ensuring continuity of care after discharge

Monitoring:
Refusal to accept a member due to the need for MOUD induction or maintenance will be tracked and reviewed by the CBH Quality Department.
Rates for use of MOUD and counseling in members with an OUD diagnosis will be tracked and reviewed by the CBH Quality Department.

**Resources available:**
- CBH Clinical Guidelines for Opioid Use Disorder
- The Pennsylvania Department of Health’s page on Naloxone

**Technical Assistance Available:**
The [MAT Implementation Resource page](#) on the CBH website contains links to Medication Assisted Treatment (MAT) trainings and grant-supported technical assistance.