

SOUTHERN HIGHLANDS COMMUNITY MENTAL HEALTH CENTER

POLICY AND PROCEDURE MANUAL

Date of Issue: 4/19/17

Section Number 607

Date Revised:

Policy 607 – Admission to OBMAT Program

I. ADMISSION CRITERIA, ADMISSION PROCESS, INITIAL ASSESSMENT

The SHCMHC OBMAT program shall develop, implement and maintain policies and procedures designed to ensure that patients are admitted to maintenance treatment only after assessment by qualified personnel who have determined that the person meets the qualifications for admission.

Any patient seeking admittance to the SHCMHC OBMAT program shall undergo an initial assessment to determine whether the person meets the criteria for admission. The initial assessment will be conducted by the medical director, an approved program physician, or a supervised physician extender. The initial assessment shall focus on the patient's eligibility and need for treatment and shall provide indicators for initial dosage level, if required, and if admission is determined appropriate. The determination of admission eligibility shall be made using accepted medical criteria such as those listed in the latest approved version of the Diagnostic and Statistical Manual for Mental Disorders. The medical director, physician, or extender may enlist the help of the therapist or other qualified program personnel to obtain the most accurate information in order to complete a thorough initial physical assessment.

The initial physical assessment / intake shall include documentation of:

- A brief assessment
- The patient's immediate relevant history, including, but not limited to, determination of chronic or acute medical conditions such as diabetes, renal disease, hepatitis, sickle cell anemia, tuberculosis, human immunodeficiency virus (HIV) exposure, sexually transmitted disease, chronic cardiopulmonary disease and pregnancy.
- A determination of currently prescribed medication or over-the-counter substances.
- An evaluation of the patient's use of other substances of abuse and alcohol.
- Determination of current substance use disorder.
- Determination of length of substance use disorder.
- An initial drug test and full drug screen to identify whether the patient is using other drugs.
- An inquiry to and report from the Controlled Substances Monitoring Program database.
- An inquiry whether the patient is enrolled in any other OMBAT program.

- Identification of comorbid medical and psychiatric conditions or disorders and to determine how, when and where they will be addressed.
- Screen for communicable diseases and address them as needed and evaluate patient's level of physical, psychological and social functioning or impairment.
- Assessment of the patient's access to social supports, family, friends, employment, housing, finances and whether any legal problems exist.

II. DETERMINATION OF PATIENT'S READINESS TO PARTICIPATE IN TREATMENT

The patient desiring admission for treatment through the use of a medication-assisted treatment medication at the SHCMHC OBMAT program must be at least 18 years of age. Any exceptions will be requested by application with parental consent through the treating physician to the state opioid treatment authority.

All admissions to the SHCMHC OBMAT program will include documentation regarding medical necessity and program eligibility for medication-assisted treatment that includes:

- Objective evidence, such as a positive drug test, of current physical dependence or tolerance to opioids or methadone.
- Objective symptoms of withdrawal, with documentation of the signs and symptoms of withdrawal.
- Evidence from the patient of the following:
 - An onset of opioid physical dependence prior to admission with continuous use the greater part of the year.
 - Evidence of multiple and daily self-administration of an opioid.

The following behavioral signs which support the diagnosis of substance use disorder shall be discussed and documented, although none are considered required for admission for the SHCMHC OBMAT program:

- Unsuccessful efforts to control use.
- Time spent obtaining drugs or recovering from the effects of abuse.
- Continual use despite harmful consequences.
- Obtaining opiates illegally.
- Inappropriate use of prescribed opiates.
- Giving up or reducing important social, occupational or recreational activities.
- Continuing use of the opiate despite known adverse consequences to self, family or society.
- One or more unsuccessful attempts at gradual removal of physical dependence on opioids or detoxification using methadone, buprenorphine or other appropriate medications.

The absence of physiological dependence will not be an exclusion criterion, as admission may be clinically justified. The initial assessment may recognize that patients in some populations may be susceptible to relapse to substance use disorder, leading to high-risk behaviors with potentially life threatening consequences.

After thorough review of the information acquired through the initial assessment, a patient may be admitted to the SHCMHC OBMAT program if, using accepted medical criteria, a determination is made that one or more of the following factors is met:

- The patient is currently addicted to an opioid drug, as evidenced by a positive drug test for either opioids or methadone.
- There are objective symptoms of withdrawal.
- There is objective evidence that the patient qualifies under the provisions of this rule.

Admission to the SHCMHC OBMAT program may be allowed to the following groups with a high risk of relapse without the necessity of a positive drug test or the presence of objective symptoms:

- The patient is a pregnant woman with a history of substance use disorder.
- The patient is a prisoner or has been released from a correctional facility within six (6) months.
- The patient is a former program patient who successfully completed treatment but believes that he or she is at risk of imminent relapse.
- The patient is an HIV patient with a history of intravenous drug use; or
- The patient has been deemed as high risk by the medical director or treating physician.

A patient enrolled in the SHCMHC OBMAT program shall not be permitted to obtain treatment in any other OBMAT program except in the following circumstances:

- If the medical director or program physician of the SHCMHC OBMAT program determines that an exceptional circumstance exists, the patient may be granted permission to seek treatment at another OBMAT program.
- The justification for finding exceptional circumstances shall be noted in the patient's treatment plan and medical chart and at the OBMAT program that provides the additional treatment.
- When practicable, the SHCMHC OBMAT program shall obtain a written consent for release of information from the patient in order to check the records of every opioid treatment program so as to ensure that the patient is not currently enrolled in those programs as well. the request for information may be made by telephone, fax or e-mail. The release of information

will state that only prior admissions may be the subject of inquiry, not contacts without admission. The SHCMHC OBMAT program shall protect patient confidentiality at all times and with all procedures used in acquiring medical or health information.

- Results of the multiple-program check shall be contained in the patient chart and the individualized treatment plan.
- A multiple program enrollment check shall be repeated if the patient is discharged and readmitted at any time.

The program physician or physician extender shall review the accumulated data directly with the patient and confirm a diagnosis of substance use disorder of sufficient severity to warrant admission to the OBMAT program. The program practitioner shall document that treatment is medically necessary. The admission and initial dosing decisions ultimately rest with the SHCMCH medical director or SHCMHC designated OBMAT program practitioner.

The SHCMHC OBMAT program practitioner shall ensure that each patient voluntarily chooses maintenance treatment and that all relevant facts concerning the use of medication-assisted treatment medications are clearly and adequately explained to the patient. The program practitioner will also ensure that each newly admitted patient provides informed written consent to treatment.

Admission of patients with no opioid tolerance shall require careful monitoring and documentation during the induction phase of treatment.

The SHCMHC OBMAT physician, physician extender, or designee and patient shall each sign and date the verification that the initial assessment occurred and reviewed, and will ensure that the patient receives all applicable information, policies and procedures related to treatment.

Exceptions to admission policy shall be reviewed and tracked by the SHCMHC OBMAT program and made available to regulatory bodies.

If a patient was previously discharged from treatment at another program, the SHCMHC OBMAT program, with patient consent, will contact the previous OBMAT program or programs to obtain treatment history.

III. NON-ADMISSION

The SHCMHC OBMAT program shall maintain written logs that identify persons who were considered for admission or initially screened for admission but were not admitted. This log shall identify the reasons why the patients were not admitted and what referrals were made for them by the program.

IV. PATIENT TRANSFERS

The SHCMHC OBMAT program may accept patients transferring from another OBMAT program within the state of West Virginia if:

- The patient voluntarily transferring from another OBMAT program shall provide documentation that the patient's medical record and reasons for the transfer was sought from the patient's previous OBMAT program.
- The patient is in compliance with readmission policies for patients who have been administratively detoxified.

In order for the patient to transfer to another OBMAT program, the following requirements shall be met:

- The SHCMHC OBMAT program shall forward all relevant patient records to the OBMAT program where the patient is transferring.
- The SHCMHC OBMAT program shall provide documentation that the patient's medical record and reason for transfer.

Patients who are West Virginia residents and wish to transfer to another West Virginia based program shall be reviewed against the SHCMHC admission criteria on an individual basis to determine their placement on the waitlist, if applicable. The review shall determine the patient's need, program placement availability, and the circumstances for the transfer request.

Patients who are not West Virginia residents shall transfer to a West Virginia program as a new admission in accordance with this rule and must meet SHCMHC requirements for out of state resident payment.