

	State of Indiana Indiana Department of Correction Division of Youth Services	Effective Date	Page 1 of	Number
		4/1/2022	5	2.16Y
HEALTH CARE SERVICES DIRECTIVE-YOUTH SERVICES Manual of Policies and Procedures				

Title
MEDICATION ASSISTED TREATMENT (MAT)

Legal References (includes but is not limited to)	Related Policies/Procedures (includes but is not limited to)	Other References (includes but is not limited to)
IC 11-8-2-5	01-02-101	National Correctional Healthcare Standards

I. PURPOSE:

The purpose of this Health Care Services Directive (HCS D) is to provide written guidelines to implement medication assisted treatment (MAT) during a patient's incarceration and prior to their release to lessen the chance of relapse or overdose .

II. GUIDELINES:

Several medications have been approved by the United States Food and Drug Administration (FDA) to treat and prevent relapses and can be used in conjunction with behavioral health interventions to treat individuals with problematic substance use. Appropriate referrals shall include a screening by Addiction Recovery Staff to ensure clinically significant problems with a substance to which there is an FDA approved medication, a motivation for treatment and a commitment to remaining free of the substance during participation in MAT.

The patient is not required to be enrolled in Addiction Recovery Services (ARS) at their facility but is encouraged do so. Patients housed in a unit which precludes their participation in traditional addiction recovery group treatment (for example, a separation unit) may be enrolled in the Foundations Independent Study of the Recovery While Incarcerated Treatment Program. The expectation is that, once a patient transfers from that unit, they will have the opportunity to begin active participation in ARS group treatment but is not a requirement.

The decision for a patient to begin treatment with the chosen medication rests solely with the facility provider, who may collaborate with the Health Services vendor's Regional Medical Director to determine appropriateness for MAT. The Warden and Chief Medical Officer (CMO) are to be notified when a youth is started on MAT.

HEALTH CARE SERVICES DIRECTIVE-YOUTH Indiana Department of Correction Manual of Policies and Procedures			
Number 2.16Y	Effective Date 4/1/2022	Page 2	Total Pages 5
Title MEDICATION ASSISTED THERAPY DURING INCARCERATION (MDI) PROGRAM			

III. PROCEDURE:

A. Referral and Assessment Process

1. Patients shall be provided verbal and written educational material by the assigned ARS staff regarding the MAT requirements and information about the medication approved for their substance of dependence, including the potential benefits, side effects, and risks of treatment.
 - a. Patients who express interest and meet the above guidelines shall be processed further via completion of the MAT Referral Form.
 - b. Patients shall review the MAT Information Sheet and sign the form, indicating their agreement to participate in MAT .
 - c. The MAT Referral Form and signed MAT Information Sheet shall be submitted to the Health Services vendor's Assistant Director of ARS .
 - d. The Health Services vendor's Assistant Director of ARS shall review the signed MAT information and referral forms and forward the forms to the facility Health Services Administrator (HSA) and Director of Nursing (DON).
2. An appointment shall be scheduled with the facility provider within seven (7) business days of receipt of referral, at which time the patient is assessed for medical appropriateness to begin MAT. The required physical examination shall be completed, appropriate work up ordered and course of treatment discussed with the patient. A tolerance test maybe considered at the discretion of the provider.
3. As with all health care provided within the Department, treatment for MAT shall be in accordance with established standards of care.

B. Follow Up and Compliance Monitoring Procedures

1. Patients beginning a regimen of MAT are required to be seen by the facility provider every six (6) months following the initial assessment, or more frequently at the discretion of the facility provider.

HEALTH CARE SERVICES DIRECTIVE-YOUTH			
Indiana Department of Correction			
Manual of Policies and Procedures			
Number	Effective Date	Page	Total Pages
2.16Y	4/1/2022	3	5
Title			
MEDICATION ASSISTED THERAPY DURING INCARCERATION (MDI) PROGRAM			

2. The facility Director of ARS shall meet with the patient upon initiation of MAT to update their behavioral health code and add to MAT Roster. ARS staff shall meet with patient every six (6) months if they are not involved in the Recovery While Incarcerated treatment program.
3. Nursing staff shall monitor medication compliance through review of the MAR, notifying the facility provider if a patient misses three (3) consecutive doses of their medication , or six (6) doses within the previous thirty (30) day period.
 - a. When non-compliance is recorded and the facility provider is notified, an appointment shall be scheduled within five (5) business days to allow for non-compliance counseling and determination of appropriateness to continue or restart treatment.
 - b. A non-compliant patient may be subject to a breathalyzer test and/or urine drug screen at the discretion of the staff. A positive breathalyzer test for alcohol or urine drug screen of other substances may result in the medication being discontinued.
4. When clinically indicated or at the discretion of the facility provider or ARS Director, a multidisciplinary treatment team meeting shall be convened, to assess and review a patient's participation in MAT.
 - a. The multidisciplinary treatment team shall include facility representatives from Health Services and Addiction Recovery Services and may include representatives from other clinical and non-clinical facility divisions (for example, Mental Health, Unit Team, Custody/Operations).
 - b. A multidisciplinary treatment team meeting should be strongly considered whenever a decision is pending regarding discontinuing a patient's participation in MAT, especially when medication non-compliance or abuse is present.

C. Criteria for Possible Discontinuation of Treatment Medication

1. A determination of successful completion of MAT shall rest with the facility provider.
2. Medication non-compliance in conjunction with clinical judgment.

HEALTH CARE SERVICES DIRECTIVE-YOUTH Indiana Department of Correction Manual of Policies and Procedures			
Number 2.16Y	Effective Date 4/1/2022	Page 4	Total Pages 5
Title MEDICATION ASSISTED THERAPY DURING INCARCERATION (MDI) PROGRAM			

3. Active substance use as evidenced by direct observation, direct report, or positive urine drug screen or breathalyzer test, in conjunction with clinical judgment.
4. The patient has been identified as a candidate to receive a long-acting MAT prior to release from the Department and continues services under MAT Pre-Release procedures below.
5. The provider shall place a medication order for the long acting MAT medication in the EMR. Nursing staff shall transcribe and administer as directed.

D. Pre-Release Treatment

1. Patients on MAT will be classified as an “F” Behavioral Health Code and identified as a special needs release as outlined in HCSD 5.01, “Transitional Health Care.”
2. Patient’s seeking long-acting injectable MAT for pre-release shall have a referral completed no less than forty-five (45) days prior to their Earliest Probable Release Date (EPRD) and submitted to the Health Services vendor’s Associate Regional Director of Addiction Recovery and Associate Regional Director of Transitional Health.
 - a. The Health Services vendor’s Associate Regional Director of Transitional Health (or designee) shall identify a community provider/resource that will allow for continued care for patients who qualify and are interested in long-acting injectable MAT at the time of their release. Upon identification, the community resource is communicated to the Associate Regional Director of Addictions Recovery, the facility Transitional Healthcare Facilitator, provider, and the patient.
 - b. At two (2) weeks prior to EPRD, the Health Services vendor’s Transitional Health Facilitator confirms that an appointment has been made with a community provider to allow for continued services following the patient’s release and confirms with Case Management staff that insurance has been secured and a referral to Recovery Works has been offered to the patient.
 - c. The provider shall order a urine drug screen to occur five (5) to seven (7) days prior to release, and upon the screen being negative, order one (1) injection to be administered the same day of the urine screen. Upon the

HEALTH CARE SERVICES DIRECTIVE-YOUTH Indiana Department of Correction Manual of Policies and Procedures			
Number 2.16Y	Effective Date 4/1/2022	Page 5	Total Pages 5
Title MEDICATION ASSISTED THERAPY DURING INCARCERATION (MDI) PROGRAM			

injection being administered, the order for oral MAT can be discontinued if not already ended.

III. APPLICABILITY:

This Health Care Services Directive is applicable to all facilities housing incarcerated adults.

signature on file

Kristen Dauss, MD
Chief Medical Officer

Date