

Standards for designating 24/7 access points for treatment of Opioid Use Disorders Statewide

- Must have obtained AHCCCS approval for each plan identified within ARS 36-2907.14
- Provides a 24/7 access point for individuals with Opioid Use Disorder (OUD) to receive immediate connection to Medication Assisted Treatment services inclusive of morning, afternoon, evening and late evening dosing hours
- Provides all three FDA approved medications for Medication Assisted Treatment (MAT) (methadone, Buprenorphine, Naltrexone) or be able to demonstrate dedicated partnerships with other providers in the community for warm handoffs that will occur the same day
- Provides individuals seeking OUD treatment access to psychosocial and recovery support services as a part of the (MAT) model. This shall be demonstrated with on-site 24/7 access point staff who are licensed general counselors and certified Peer Support Specialists.
- Must demonstrate ability to provide and review information regarding Opioid Treatment Program Providers and Facilities with potential and current members and identified family interested in treatment
- Must demonstrate ability to provide and review information regarding office-based opioid agonists treatment providers
- Directly provides, or can demonstrate a direct relationship with identified partners, for whole person care through an integrated model, to address behavioral health and physical health needs
- Provider must conduct ongoing clinical assessments of patients through a multidisciplinary treatment planning process that indicates services and care levels through a person centered approach.
- Provider must utilize ongoing review strategies to identify and prepare patients for graduation from 24/7 access points to other outpatient services. Provider must share with patient the goal of graduation to include:
 - a. Transition to OTP and other MAT providers in the community
 - b. Transition to other outpatient primary care providers in the community through coordination with health plan and warm hand off to new provider.
 - c. Transition to other outpatient counseling services in the community through coordination with health plan and warm hand off to new provider.
- Provider must demonstrate the ability to provide reporting on:
 - a. Treatment capacity
 - b. Quality of care metrics
 - c. Patient outcomes
 - d. Member satisfaction
- Provide must participate in statewide learning collaborative focused on:
 - a. Sharing of best practices
 - b. Peer-to-peer support between 24/7 locations

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