

DHMH Requested Approach Calls for Assistance with Substance Use Disorder Referrals

Steps to obtain brief screening information and referral location-

- 1) **Obtain demographic information and review list of substances used** for all callers requesting SRD referral.
- 2) **Determine Potential Medical Urgency**

For any callers indicating any substance use, and after review of substances used, identify potential need for urgent medical attention. If caller identifies any of the following situations, recommend caller go/be taken to the closest hospital. Factors that could indicate a potential urgent medical situation include if caller indicates:

- being in acute alcohol withdrawal or imminent danger of withdrawal (Delirium Tremors, high blood pressure, history of seizures)
- ingesting a combination of opioids, benzodiazepines or alcohol
- having experienced a prior OD on any of above drugs/alcohol
- being female and pregnant, with any regular use of alcohol or drugs

Note: Do not use the above as sole source of assessment of need for medical services, use established processes to determine need for medical services, and proceed as usual. If caller identifies a medical emergency or if caller believes someone has overdosed, call 911 as per established agency protocol.

3) Obtain Insurance status:

- Questions-Do you (or person calling about) have insurance? If so, is it private? Or Is it Medical Assistance?

If private insurance,

- Ask caller if you can assist them in calling insurance provider for direction on where and how to access a covered provider in their area. If caller needs help finding the number for provider or doesn't know who is provider then advise them to look on the back of their medical card and ask if you can assist them in calling member services.
- If caller does not want to call insurance company first you can use the SAMHSA Treatment Locator database, but the database does not indicate which insurance a provider may take and individual practitioners are not listed.

If Medical Assistance, refer to the Local Health Department.

- Refer to local health department* for an in-depth assessment for appropriate level of treatment (this cannot be done in a brief screening on phone).
- The LHD is likely to be able to provide an assessment/intake appointment for outpatient or residential treatment within a reasonable amount of time, using a walk in intake process.
- Attempt to contact the LHD program with the person on the line to facilitate intake appointment.

*Note: Medical Assistance covers one substance use disorder assessment per year at location of individual's choice. Most local health department assessment centers are able to bill for this service and make appropriate placements. Verify as part of warm hand-off before completing referral.

If no insurance,

- Let them know that the local health department program may be able to help them apply for Health choice and will use a sliding fee scale in the interim. Verify as part of warm hand-off before completing referral.
 - Connect with LHD for assessment/intake appointment.
- 4) If caller (without private insurance) insists on a referral to a specific type of program (detox, residential, outpatient), recommend obtaining an assessment at the LHD prior to calling a program they might not be eligible for, then:
- **Do search based on their request**, demographics, insurance status, and geographic location. Provide several programs of the type requested closest to the caller's (or person requesting services for) location.
- 5) If it is a family member calling always ask would they benefit from family/friend support? This could be an option especially for those whose friend/family is not willing to go for an assessment or treatment right now. **Note-** if the person using substances is not willing to go, they cannot be forced to go but there is value in the family member receiving support. See local jurisdiction information on family support services, if none in their jurisdiction use icarol to find closest resource for this.
- 6) If any of substances mentioned during call are opioids regardless of insurance status refer for naloxone education and certification. This applies to both a person who is using and/or a family member/friend. Explain what naloxone education and certification is, and locates closest jurisdictions which have education programs currently (from assessment information list or webpage).
<http://bha.dhmdh.maryland.gov/NALOXONE/SitePages/Approved%20Entities.aspx>

Resources:

Treatment Locator: <https://findtreatment.samhsa.gov/>

As of January 1, 2015 Maryland Value Options will be managing all behavioral health services for persons with Maryland Medical Assistance. See <http://maryland.valueoptions.com>

Substance Use Disorders in Maryland page on Facebook. Visit <https://www.facebook.com/pages/Substance-Use-Disorders-in-Maryland/691761057548436> or <http://bha.dhmdh.maryland.gov/SitePages/Home.aspx> for more information/resources on SUD.

Decision Tree

If Substance Use is mentioned, obtain demographic and SU information as usual. Based on presenting information, determine if urgent or emergency situation (including suicidality or any other emergency medical situation as per normal protocol).

1) Medical Urgency or Emergency?

No

Yes



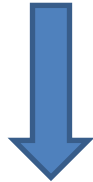
Call 911 or direct to closest hospital

2) Have Insurance?

MA

None

Private



3) Assist in locating referral to LHD

3) Assist in call to insurance provider



Provide warm-handoff

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