



MAT Program Client Informational Handout

Informed Consent

Please read this information carefully. Suboxone (buprenorphine and naloxone) is an FDA approved medication for treatment of people with opiate (narcotic) dependence. Suboxone is a weak opiate and reverses actions of other opiates. It can cause a withdrawal reaction from standard narcotics or Methadone while at the same time having a mild narcotic pain relieving effect from Suboxone.

The use of Suboxone can result in physical dependence of the buprenorphine, but withdrawal is much milder and slower than with heroin or Methadone. If use of Suboxone is suddenly stopped, clients will have only mild symptoms such as muscle aches, stomach cramps, or diarrhea lasting several days. To minimize the possibility of opiate withdrawal, Suboxone may be discontinued gradually, usually over several weeks or more.

Because of its narcotic-reversing effect, if you are dependent on opiates, you should have not used an opiate in the last 48 hours when you get your first dose of Suboxone. If you are not experiencing withdrawal symptoms when you come to your Induction appointment, you will not receive Suboxone, because it can cause severe opiate withdrawal while you are still experiencing the effect of other narcotics. You will be given the first dose in our agency, and you must return to the agency after two hours.

Some clients find that it takes several days to get used to the transition to Suboxone from the opiate they have been using. After stabilized on Suboxone, other opiates will have virtually no effect. Attempts to override the Suboxone by taking more opiates could result in opiate overdose. Never take any other medications without talking to your doctor/doctors first. It is dangerous to mix Suboxone with alcohol and other medications. There have been reported deaths because people have combined Suboxone with other medications such as Ativan, Xanax, Librium and Valium.

The form of Suboxone used in this program is a combination of buprenorphine with a short acting opiate blocker, naloxone. If the Suboxone Film is dissolved and injected by someone taking heroin or another strong opiate it would cause severe opiate withdrawal.

The proper way to use the Suboxone Film is to place it under your tongue until it has dissolved completely. If you swallow the Suboxone Film it will not work properly and you will not get the desired effect.

Description:

Buprenorphine is a partial agonist and an opiate, but it is not as strong an opiate as heroin or morphine. The form of buprenorphine (Suboxone) you will be taking is a combination of buprenorphine with a short-acting opiate blocker (Naloxone). Buprenorphine treatment can result in physical dependence. A patient can have a physical dependence on buprenorphine to treat the symptoms of withdrawal and still be in full recovery.

Your participation in this treatment program is voluntary and you may withdraw and/or stop buprenorphine treatment at any time, however if this medication is suddenly discontinued you can experience moderate to severe symptoms of withdrawal such as muscle aches, stomach cramps, or diarrhea lasting several days. To minimize the possibility of opiate withdrawal, buprenorphine should be discontinued gradually, usually over several weeks or more. Buprenorphine withdrawal is generally less intense than heroin or methadone withdrawal.

- **This agency does not prescribe any other medications for maintenance or detox from narcotics.** Suboxone must be purchased at private pharmacies. There will be no Suboxone kept at the agency.

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Eligibility Guidelines:

For an adult to be considered an appropriate candidate for Suboxone they will meet the following criteria

- a) Meets DSM-V diagnostic criteria for opioid use disorder.
- b) Currently experiencing opioid withdrawal symptoms. OR (d)
- c) Has the ability to engage in treatment and evidence a commitment to all Cornerstone standards, rules and expectations.
- d) Patient/family has ability to pay for Buprenorphine medication.
- e) Psychiatrically stable, or under care of psychiatric provider such that adherence to replacement therapy can be reasonably expected.
- f) No co-morbid dependency on high doses of benzodiazepines, or other central nervous system depressants, including alcohol, without a clear plan of taper for those substances.
- g) Has suitable security for take home opiate replacement medication.
- h) Has received education regarding contraception prior to induction. If applicable
- i) Ability to attend appointments and therapy as required.
- j) HIV/AIDS, hepatitis, or sexually transmitted diseases and current biomedical complications, do not contraindicate replacement therapy.

How It Is Taken:

If you are dependent on opiates – any opiates – you should be in as much withdrawal as possible when you take the first dose of buprenorphine. If you are not in withdrawal buprenorphine can cause precipitated withdrawal. Buprenorphine films must be held under the tongue until they dissolve completely. Buprenorphine is then absorbed over the next 30 to 120 minutes from the tissue under the tongue. Buprenorphine will not be absorbed from the stomach if it is swallowed, you will not have the important benefits of the medication, and it may not relieve your withdrawal. You should refrain from eating or drinking for approx. 15 mins following the administration of the medication. Some patients find that it takes several days to get used to the transition from the opiate they had been using to buprenorphine. During that time, any use of other opiates may cause an increase in withdrawal symptoms. You should not take any other medication without discussing it with the medical provider first. Possible side effects of buprenorphine include constipation, headache, diaphoresis, vasodilation and sedation.

Risks:

Do not drive or operate heavy machinery until you know how buprenorphine will affect you, this includes your first dose and during a dose increase. After you become stabilized on buprenorphine, it is expected that other opiates will have less effect. Attempts to override the buprenorphine by taking more opiates could result in an opiate overdose. Also, combining buprenorphine with alcohol or some other medications is hazardous. The combination of buprenorphine with medication such as Valium, Xanax, and Ativan has resulted in deaths. If the Suboxone films were dissolved and injected by someone taking heroin or another strong opiate, it would cause severe opiate withdrawal. You may find that you are unable to afford the cost of the medication. There are alternatives such as methadone which may be less expensive.

Benefits:

Used properly, buprenorphine can help you manage your substance use disorder so that the benefits of recovery can be maintained. Suboxone Treatment, particularly with opioid agonist medications like buprenorphine, have been found to reduce morbidity and mortality, decrease overdose deaths, reduce transmission of infectious disease, increase treatment retention, improve social functioning, and reduce criminal activity.

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Alternatives to Buprenorphine:

CBH can provide outpatient behavioral health services including individual and group therapy. CBH will also provide reasonable information and referrals to alternative therapies if it is available. There are also outpatient drug use treatment services available that provide individual and group therapy, which may emphasize treatment that does not include maintenance on medications. Other forms of opioid maintenance therapy include methadone maintenance or naltrexone, which is a medication that blocks the effects of opioids, but has no opioid effects of its own.

The Inclusion of Culture in Treatment:

There is growing evidence that the most successful treatment programs for Tribal members are those that include cultural interventions and traditional wellness practices. In our Peer Run Recovery Center, we offer Wellbriety groups each week, including Talking Circles and the Medicine Wheel/12-Step Program. Wellbriety means to be both sober and well. It is an English translation of a word from the Passamaquoddy language given by an Elder in the mid-1990s. "It also means going beyond "clean and sober" by entering a journey of healing and balance – mentally, physically, emotionally and spiritually. For many Native Americans, it also means recovering culturally. It signifies a desire to live through the best attributes of traditional Native cultures, while standing firmly on the round of contemporary life." Wabanaki strongly supports this and encourages your participation in the Wellbriety groups, as well as other cultural offerings in the Peer Recovery Center as part of your ongoing treatment.

Patient Treatment Contract

As a participant in medication treatment for opioid misuse and dependence, I freely and voluntarily agree to accept this treatment contract as follows:

- I agree to keep and be on time to all of my scheduled appointments.
- I agree to adhere to the payment policy outlined by this office.
- I agree to conduct myself in a courteous manner in the treatment office.
- I agree not to sell, share, or give any of my medications to another person. I understand that such mishandling of my medications is a serious violation of this agreement and would result in my treatment being terminated without any recourse for appeal.
- I agree not to steal, deal, or conduct any illegal or disruptive activities in the treatment office.
- I understand that if any illegal or disruptive behaviors are observed or suspected by the employees of the pharmacy where my medication is filed, it will be reported to my doctor's office and could result in termination of my treatment without any recourse for appeal.
- I agree that my Suboxone prescription can only be given to me at my regular office visits. If I miss an appointment, I will not be able to get my prescription until my next scheduled appointment.
- I agree to make another appointment in case of lost or stolen prescription/medication, and file a police report. Will be required.
- I agree to store medication properly. Medication may be harmful to children, household members, guests and pets. The Suboxone Film should be stored in a safe place, out of the reach of children.
- I agree not to obtain medications from any doctors, pharmacies, or other sources without telling my Suboxone provider.
- I understand that mixing Suboxone with other medications, especially Benzodiazepines (for example, Valium, Klonopin, or Xanax) can be dangerous. I also understand that several deaths have occurred among people mixing Buprenorphine and Benzodiazepines (especially if taken outside the care of a physician, using routes of administration other than sublingual or in higher recommended therapeutic doses).
- I agree to read the Medication Guide and consult my provider should I have any questions or experience any adverse events.

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- I agree to take my medication as my provider has instructed and not to alter the way I take my medication without first consulting my doctor.
- I understand that medication alone is not sufficient for my condition, and it is mandatory for me to participate in counseling as discussed and agreed upon with my provider and specified treatment plan.
- I agree to notify the agency in case of a relapse to drug abuse. Relapse to opiate drug abuse can result in being removed from the Suboxone program. An appropriate treatment plan must be developed as soon as possible. The provider should be informed of a relapse before random urine testing reveals it
- I agree to the guidelines of the agency's operations. I understand the procedure for making appointments and late cancellation fees and paying for missed appointments. I know the phone number of this agency and I understand what the hours of operation are. I am aware that I am not able to get medication by phone or on weekends. I understand that I am required to abide by these restraints in order to remain in the Suboxone treatment program.
- I agree to comply with the required film counts and urine screens. Urine screening is a mandatory part of office maintenance. The client must be ready to supply a urine sample at each visit to the agency and to show staff the Suboxone film for a film count including any extra medication.
- I agree to abstain from addictive drugs (except nicotine), which include cocaine, alcohol, opioids, marijuana. (Unless client has a medical marijuana card)
- I agree to allow my physician to test my blood alcohol level.
- I understand that violations of the above may be grounds for termination of treatment.
- I understand that the phone numbers I give will be used to contact me to remind me of appointments. I give my permission for the agency staff to leave messages on these phone numbers.
- We will monitor your prescriptions.
- I understand that I will need to sign releases for my primary care physician, med management, substance abuse provider, pharmacist/pharmacy and caseworker so that Cornerstone can communicate with them in my treatment.
- I understand that the Prescription Monitoring Program (PMP) will be used to identify all medications prescribed.
- I understand that it is my responsibility to inform the agency of any changes in medications, providers, or updated personal information, including phone numbers.

Females of Child Bearing Age and Ability Only

1. You should use some form of birth control during treatment due to the unknown safety of buprenorphine.
2. The medical Provider may have to discontinue your treatment or consider alternative medications if you become pregnant.
3. If you are or become pregnant, it is important to inform the medical provider right away so you can receive the appropriate care and referrals.
4. There are ways to maximize the healthy course of your pregnancy while in opioid pharmacotherapy.

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Instructions for Appointments

Instructions for Induction Appointment

1. Arrive 20 minutes before your scheduled appointment time to complete paperwork.
2. Arrive with a full bladder.
3. Bring all pill bottles.
4. Bring valid photo ID and insurance card.
5. Bring a driver.
6. Must be in mild withdrawal to insure treatment is started the first day. Withdrawal symptoms include sweating, restlessness, bone/joint aches, runny nose, tremors, yawning, anxiety/irritability, and goosebumps.
 - No methadone for at least 48-72 hours before your appointment. Methadone dose for the prior seven days must be 30 mg/day or less.
 - No MS Contin, OxyContin, Opanna for at least 24 hours before your appointment.
 - No Vicodin, Percocet, Heroin for at least 12 hours (preferably 24 hours) before your appointment.
7. Induction appointment will last up to 3 hours, possibly longer, and you must remain at the clinic/office for two hours after the test dose is given.

Instructions for all Follow Up Appointments

1. Arrive 20 minutes early with a full bladder, prepared to give a urine sample prior to your appointment.
2. Bring all pill bottles, including Suboxone Film.

Please write in your appointment times:

Appointment #1: Induction	Time:	Date:
Appointment #2: Follow-up (2-3 day)	Time:	Date:
Appointment #3: Follow-up (4-28 day)	Time:	Date:

Office Use Only:

Confirmation of a Substance Abuse Appointment or making an appointment with our Substance Abuse Provider is required. A release for this provider is required. Have you confirmed appointment? Yes No

If so what is the name of provider, time and date of appointment:

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Follow Up Appointment Protocol *Follow up appointments will be at least monthly.*

The visits are focused on evaluating compliance and the possibility of relapse. They include:

- Film counts
- Urine screening for drug abuse at every visit and may be required during any time during your treatment
- An interim history of any new medical problems or social stressors
- Prescription medication
- **No refills of Suboxone will be made for any reason except during an Agency appointment.**
- Appointments do not include evaluation or care for other problems outside of Suboxone management. Should you have other medical conditions that you wish to address, you will need to schedule a separate appointment with your primary care physician.
- Weekly sessions for Opioid Health Homes clients
- Peer Recovery Coach meetings
- We also offer Patient Navigation Support

Dangerous Behavior and signs of relapse

The following signs of possible relapse and/or dangerous behavior will be addressed with the client as soon as they are noticed:

- Not attending therapy
- Missing appointments
- Not taking medications properly
- Refusing to do a urine screen
- Not informing the agency that you are taking new medications and/or changes in current medication.
- Agitated behavior
- No inappropriate phone calls
- Not controlling anger
- Lost or stolen medication
- Non-payment of visit bills as agreed, missed appointments or cancellations within 24 hours of your appointment.
- Treatment may be stopped if these behaviors happen

Suboxone treatment may be stopped for a number of reasons. They include:

- If you are not able to stop your heroin abuse or you still desire to use narcotics, even at the top doses of Suboxone, the doctor will stop treatment and you will need to find services elsewhere.
- It is mandatory that you follow the rules and agreements that you agreed to while in Suboxone treatment. As the client you are required to read all the documents explaining the process and to sign the paperwork before you start the Suboxone treatment. If you fail to comply with the agreements and rules for being in treatment you will no longer be receiving Suboxone treatment from this agency.
- Prompt payment of the agency's fees is part of this program. If your account is not paid at time of service you will not receive a prescription for your Suboxone and your next appointment will not be scheduled. If you have not kept your account up to date then you cannot schedule appointments you will no longer be in the program. There will be no exceptions.

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- As with any medication there can be a possibility of an allergic reaction, if this happens Suboxone treatment will stop.
- There are behaviors that will not be allowed (for example, dangerous behavior that could cause harm to you or other clients and staff, as well as inappropriate behaviors) this will cause the client to be removed from the program. Clients who come to their appointment under the influence of alcohol and/or other drugs will be dropped from the program.
- Dangerous behavior will lead to the client leaving the program immediately without receiving any tapering off of the Suboxone. Client will not be allowed to come back to the agency after being discharged.

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Program Description

Medication-Assisted Treatment (MAT) is the use of medications, in combination with counseling and behavioral therapies, to provide a “whole-patient” approach to the treatment of substance use disorders.

This program’s Medication Assisted Treatment is designed to provide clients the opportunity to stabilize from opiate use disorder and further engage in the recovery process.

Candidates for Our MAT Program:

- Patient must have a diagnosis of Opioid Use Disorder.
- Patient is able to come to appointments during office hours of operation.
- Patients seeking treatment must not have acute/chronic pain issues requiring opioid management.
- Patient should be willing to address use of other harmful and/or illicit substances.

Meeting these criteria does not guarantee your participation in our program; the treatment team will review and determine the suitability of each patient for medication assisted treatment in an office-based setting.

Induction:

Clients will complete a full clinical intake and evaluation and are expected to be engaged in treatment. Treatment will include assessment and preparation for medication assisted treatment. Clients will arrive in mild withdrawal having abstained from all opiates for 12-48 hours, depending on what they have been using. If clients are not in mild withdrawal, they WILL NOT BE STARTED ON THE MEDICATION. Mild withdrawal includes symptoms of goose flesh, sweating, increased pulse rate, cramping, dilated pupils and nausea.

Follow-up Appointments:

Clients will have weekly appointments (or more frequent depending on client need) where they will check-in with the provider and obtain their new prescription. This will change to bi-weekly to monthly based on provider’s assessment.

Phase System:

The medication assisted treatment program at CBH operates on a phase system. Clients progress through the three phases: induction, stabilization and maintenance, as they work through their recovery. Clients may always move up or down the phase system as needed and determined by the results of client behavior, drug screening, and treatment attendance. You will be provided a detailed description of the Phase System and the requirements of each phase.

Therapy Requirements:

As a condition of participating in medication assisted treatment, clients are required to participate in therapy. Treatment of opioid dependency with buprenorphine is most effective in combination with counseling services, which can include different forms of behavioral therapy and self-help programs. You will need to sign a release for your counselor so we may ensure your participation in therapy.

Other Expectations:

For advancement in the MAT Phase System you must meet the following expectations:

- If you are being prescribed medicine, the purpose of this medication is to facilitate treatment. **Continued prescribing is based upon your active participation in treatment.**
- Part of Recovery is being *fiscally* responsible; therefore, **payments and copays are due at each appointment.**
- **Attend all treatment sessions and participate.** Please remember to call if not able to attend any treatment session or if you will be late.
- **No use of opioids, benzodiazepines, or stimulants, prescribed or otherwise,** unless you speak with the medical provider beforehand and/or provide a medical provider’s note.

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- Recovery means **using skills not substances to manage feelings**. The goal of treatment is to abstain from all intoxicants including alcohol, illicit drugs or non-prescribed medications and marijuana.
- Take all medications **only as prescribed**.
- For treatment to be successful it is *essential* that you **give an honest reporting of any substance use**.
- Urine Drug Screens confirm abstinence from all non-prescribed substances; be prepared to give a sample if asked. **Tampering with a urine sample in any way is grounds for dismissal from the program.**
- Safeguarding your medications is your responsibility. **NO EARLY REFILLS FOR ANY REASON.**
- **Do not interfere with another's recovery in any way.**
 - No selling or diverting medication.
 - Be prepared for pill counts at any time to confirm proper use of medications.Understand that such conduct is a serious violation of this agreement and will result in treatment with buprenorphine being terminated immediately.
- **Respect privacy and confidentiality of all participants including the fact that they are in treatment.**

Office Hours:

To schedule appointments, discuss side effects, or any issues that are discussed in your patient responsibilities and agreement please call 207-680-2065. Office hours are Mon-Friday 8:30 am to 4:30 pm. (Will vary for Suboxone provider who is only available identified days)

Medications Cost:

Clients are responsible for the cost of their medications. Payment is due to the pharmacy at the time of pick up.

Suboxone Treatment Financial Policies

Mainecare, Medicare, Private Insurances, cash and credit cards will be accepted for Suboxone induction and follow-up appointments. Insurance will also be accepted for counseling services. All deductibles, co-pays, and co-insurance are required at the time of services. At the conclusion of your visit you will be required to schedule your next visit. We do not wish you to undergo sudden withdrawal from Suboxone which will happen if you fail to keep your appointment. If payment is not made you cannot be seen.

Appointments are charged at the following rate:

- \$275.00-Induction-2 Day Process
- \$200.00- 1 day induction if already receiving Suboxone
- \$135.00-Follow-up appointments
- \$75.00-No Show
- *See Mainecare rates for OHH Services*

There will be a fee for missed appointments if less than a 24 hour notice is provided prior to appointment.

If you are a new client of Cornerstone an intake assessment (CA) and treatment plan must be scheduled and completed prior to your first appointment with the medication provider.

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Sliding Scale

All clients who do not have health insurance coverage, which include MaineCare and Medicare, are potentially eligible for a reduced fee for mental health services.

The fee will be based on the client's or legal guardian's annual income. The following will be used for income verification: prior year's tax return, last 5 payroll stubs and any written verification of employment from the employer. If the client cannot prove their annual income then they will have to pay the full agency's usual and customary rate for the specific service.

Income Range	Percentage Reduction
\$25,000 to \$20,000	15%
\$19,999 to \$15,000	20%
\$14,999 to \$10,000	25%

Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

CBH is required by law to maintain the privacy of your health care information, and to provide you with a notice of CBH's privacy practices. While required to abide by the terms of the notice that is currently in effect, CBH reserves the right to change privacy practices at any time. If privacy practices change, CBH will provide you with a revised notice at your next visit following the change.

Use of Health Care Information

CBH may use your information for:

- Treatment
- Payment
- Health Care Operations

For example:

- Your information may be used to develop a diagnosis and treatment plan, or to coordinate referrals to another health care provider
- Portions of your information may be submitted to your insurance carrier or other third-party payer to secure payment on your behalf
- Your information may be used in the course of health care operations, such as for quality assurance, evaluation, training, or audit activities

Business associates performing services on behalf of CBH related to treatment, payment, or health care operations may also have access to your information solely for the purpose of providing such services, provided that the business associate has agreed in writing to maintain the confidentiality of such information.

CBH may disclose information without your authorization as permitted or required by applicable law, including any of the following: to comply with public health statutes and rules; to make any required reports of abuse or neglect; to

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comply with health oversight activities by government agencies (for example, licensure); to comply with a court order, government subpoena, or other lawful process; for research purposes; in the event of your death, to a medical examiner; to avert a serious threat to health or safety; or for workers' compensation purposes.

CBH may use your information to contact you for appointment reminders, or to provide information about treatment alternatives or other health services. Except as described above, CBH will not disclose your information, except with your written authorization. You may revoke your authorization at any time by giving written notice of revocation to CBH.

Rights

- You have the right to request restrictions on the use and disclosure of your information. However, CBH is not required to agree to a requested restriction, and it is CBH's policy not to agree to such restrictions unless CBH determines, in CBH's sole discretion, that a compelling reason exists to do so.
- You have the right to receive communications from CBH in a confidential manner. If you would like CBH to use another address or telephone number to contact you, you must request so in writing.
- You have the right to receive an accounting of disclosures of your health care information that you have not authorized. To receive such an accounting, please contact CBH at the address given below.
- You have the right to inspect and copy your information. If you wish to do so, you will be provided an opportunity to inspect your information within 30 days of receipt of your written request. You may be charged reasonable costs of copying your information, or of preparing any summaries that you request.
- You have the right to amend your health care information. If you wish to do so, please submit the proposed amendment in writing to CBH at the address given below.
- You have the right to a copy of this Notice of Privacy Practices upon request.
- You have the right to complain to CBH and to the Secretary of the U.S. Department of Health and Human Services if you believe your privacy rights have been violated. To file a complaint, please contact CBH as set forth in this notice. Nobody is permitted to retaliate against you filing a complaint.

For further information about Cornerstone Behavior Healthcare's privacy policies, please contact:

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