## **Before You Write Your First Buprenorphine Prescription**

What you need to know

## **Section 1: Data 2000 Waiver Providers**

Do you have a DATA 2000 waivered provider?

Yes

No

**Pending** 

How many providers?

How many on each license?

Ex: 2 providers with 30 waiver; 1 provider with 100 waiver

Do your providers serve pregnant patients?

Yes

No

Pending

Do you have pediatric providers in your community who treat infants affected by neonatal opioid withdrawal syndrome (NOWS)?

Yes

No

Pending

Do you have a DATA 2000 waivered provider who can see women affected by opioid use disorder (OUD) who are on buprenorphine after delivery?

Yes

No

Pending

Do you have an identified opioid treatment program (OTP) to refer for methadone treatment?

Yes

No

Pending

## **Section 2: Planning Patient Flow**

How will you identify a patient who may be a candidate for medication for opioid use disorder (MOUD)? Check all that apply.

Self-report

Verbal screening tool

Outside referral

Other:

How do you refer a patient for substance use-specific behavioral health (BH) intake (comprehensive assessment)? Check all that apply.

Internal referral

Refer to outside therapist/community behavioral health clinic

Other:

Have you created a patient registry for buprenorphine prescribing?

Yes

Maintained by:

No

Will be maintained by:

Which team members will determine that a patient needs a higher level of substance use disorder (SUD) services? Check all that apply.

Integrated behavioral health clinician

Outside clinician

Clinical staff

Medical provider

Which tools will be used to make this decision? Check all that apply.

**ASAM** Criteria

Discussion

Unexpected UDS

Pill counts

Other:

What services are available for ongoing BH support? Check all that apply.

One-on-one

Group

Intensive outpatient therapy

Substance abuse comprehensive outpatient treatment

Other:









## **Section 3: Clinical Operations**

Will providers with DATA 2000 waivers be available at multiple clinics during the week or just one?		What are the most common false negatives and false positives for your point of care cup? Please specify:
Multiple One		•
Other:		•
Who will cover for a buprenorphine provider during vacation/after hours? Please specify:		Do you have access to confirmatory testing? If yes, what is the turnaround time?  No Pending Yes Turnaround time:
What will be your preferred set Check all that apply.	tting of buprenorphine induction?	
Home Office Hospital		Create a decision tree for sending out urine drug screens for confirmatory testing. Write in your decision tree below:
How frequently will patients vi	sit the office?	•
Weekly Bi-weekly Case-by-case Other:		
What is your policy for missed specify:	appointments/need Rx/refills? Please	
What is your policy for illicit use? Please specify:		How frequently will you see patients postpartum? Every 2 weeks Every 4 weeks Other:
Who will create dot phrases or documentation? Please specify	quick charts to include required /:	• • • • • • • • • • • • • • • • • • •
		For how long will your team write the buprenorphine Rx?
		6-9 months postpartum Up to 12 months postpartum
Which substances does your p Check all that apply.	oint of care urine drug screen test for?	Other:
Opiates Buprenorphine Fentanyl THC Other:	Methadone Methamphetamines Amphetamines Cocaine	How will you assist your patients in the transition to a new provider? Please specify:
What does it not test for? Chec	ck all that apply.	
Opiates Buprenorphine Fentanyl THC	Methadone Methamphetamines Amphetamines Cocaine	

Other: