

Referral Criteria for a Telemedicine Bridge Program

A medications for opioid use disorder (MOUD) bridge program is intended for patients under treatment with buprenorphine or Suboxone®/Zubsolv® who have reached a stable state in their recovery.

Criteria for referrals are determined jointly by MOUD bridge providers and local substance use disorder (SUD) treatment organizations. Below is a list of questions that bridge providers might ask SUD treatment providers as they discuss referrals:

1. Does this patient attend regular appointments?
2. Have there been any positive urine screens for non-prescribed substances?
3. Is this patient involved in other programs, and if so which ones?
4. Will this patient be graduating from your program? When?
5. What is the current prescribed Suboxone®/Zubsolv®/buprenorphine dosage? Has this dose been stable? Our maximum dosage is 20 mg of buprenorphine daily. If patients are on higher doses we will work with them to taper down over a few months if they are willing.
6. We offer 1-2 clinical sessions a week for patients on Suboxone®/Zubsolv®/buprenorphine. At this time, we do not have onsite addiction counseling, so we are unable to best serve patients requiring more intensive recovery support. Do you think this patient will be a good fit?
7. Is this patient at a stage where they don't require intensive recovery support? Can they get that counseling independent of the MOUD provider's office?

Some patients may not be appropriate for a telemedicine-based approach, such as:

- Patients who have a pattern of missing visits
- Patients who request medication between scheduled visits
- Patients who have been requiring frequent dose changes
- Patients who have active or unstable mental health disorders (*Note: Patients with active depression or anxiety typically do fine with telemedicine.*)

This HRSA RCORP RCOE program is supported by the Health Resources & Services Administration (HRSA) of the US Department of Health & Human Services (HHS) as part of an award totaling \$9.1M with 0% financed with non-governmental sources.

The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by HRSA, HHS or the US Government.