

UPDATE

The coronavirus disease 2019 (COVID-19) outbreak is a rapidly evolving event, and CMS is monitoring the situation closely. We would like to reassure our valued patients and system partners that we are working hard to ensure minimal disruptions to our current or future operations.

We also understand that our patients are some of the most vulnerable segments of the population for the risk-factors associated with COVID-19. As such, we have been working hard to ensure we are prepared to respond to the needs of our patients and the communities where our clinics reside.

We are talking with all of our system partners to ensure medications and supplies remain available. We are also working diligently with all state and federal agencies to ensure regulatory barriers to not hinder sustainment and access to the highest quality care. We have developed a three-tier approach to handling the COVID-19 outbreak, in accordance with our guiding principles, as outlined below.

GUIDING PRINCIPLES

Our core tenants guiding our response to this pandemic are as follows:

- The Opioid crisis will be claiming lives long after the COVID-19 pandemic has subsided. It is imperative that we continue conducting intakes and minimize disruption to our patients' care, while taking the necessary steps to accommodate the needs of all our stakeholders.
- Our patients have a higher risk to COVID-19 than the general population due to the higher rates of comorbid conditions. Therefore, our staff, who chose to work at CMS because of the impact we make everyday, are the tip of the spear, fighting on the front lines in this crisis.
- Our services are critical so we will work hard to limit the disruption to our normal operations to the greatest extent possible. Any shortcomings that are resultant from our COVID-19 response should be communicated long before their impact is seen so that others can pivot as necessary.
- Cross functional teams and collaboration are imperative to ensure our employees and system partners are communicating, preventing redundant efforts, and aligning our focus towards the common goal of providing the highest quality care to our patients and the communities in which our clinics reside.
- We are working with state and federal agencies, but the situation is changing rapidly. We will respond as quickly as possible to implement all policy and regulatory changes as they are communicated to us.
- As a national leader in the addiction treatment space, we will make ourselves readily available to all key stakeholders to share our best practices and learned experiences.
- Technology and innovation must be leveraged to the greatest extent possible to ensure the scalability of our operations.
- Stress tests amplify our weaknesses; by improving our weak points, we will grow as an agency during our response to this crisis.

RESPONSE LEVELS

Our operational response to the COVID-19 Outbreak is broken into the following three levels:

LEVEL ONE

Preventative measures at all sites; if there have been no identified exposures to COVID-19 directly related to the clinic staff or patients.

1.0 3/13/2020
1.1 3/16/2020

LEVEL TWO

Preventative measures plus adjusted staff schedules

2.0 3/17/2020
2.1 3/23/2020
2.2 4/15/2020

LEVEL THREE

Preventative measures plus adjusted staff schedules and significant reduction of onsite staff; attempts to increase take-home levels if allowed by SAMHSA

SUMMARY OF LEVEL 1

- Increased frequency in cleaning our facilities
- Increased staff training and education
- Minimized client contact
- Contingency plans for continuation of all services (medication, counseling, case management) for patients at high risk of complications

SUMMARY OF LEVEL 2

- Protocol from Level 1 continues
- Adjusted staff schedules and implementation of a work-at-home program for applicable employees
- Critical functions identified by location and modifications to existing schedules to accommodate clinic needs
- Level Two exceptions for take-home medication as permitted by states (ultimate discretion remains the responsibility of medical providers)
 - While the Substance Abuse and Mental Health Services Administration (SAMHSA) has released federal guidance allowing more lenient take-home options, each state has the authority to set standards at their own discretion. As such, it's important to note that the guidance is state-by-state specific. As information is released on state-level implementation of the SAMHSA recommendations, we will update our policies and procedures to reflect the most up-to-date information.
- TB, RPR, or other required bloodwork to be done contingent on PPE availability for nursing staff
- Naloxone policy remains in place – all intakes and high-risk patients must be offered a kit (if available) or a prescription
- Daily meetings with local and regional leadership, medical providers, quality management, and other key functions

SUMMARY OF LEVEL 2.1

- Protocol from Level 2 continues
- Additional PPE guidelines and instructions
- Activation of Engage, the companion application to our EHR to allow patients to check in remotely and view other clinic information important to their treatment
- Patient and employee verification letters for locations in states with stay at home or lockdown protocols in place

SUMMARY OF LEVEL 2.2

- Protocol from Level 2 continues
- Continue to aggressively manage clinic traffic via a variety of the following methods:
 - Remote check in via the Engage App
 - Remove most chairs so people cannot sit in the waiting room
 - Have clients wait in their vehicles or in the parking lot
 - Revised protocol enhanced by increased communication to track the movement of high-risk patients in the clinic and adjust accordingly
 - Use barriers and/or markers to maintain 6-foot separation
 - Use client navigators to actively manage patient flow

- Use dosing blocks to mitigate the number of clients present in the clinic simultaneously
- Maximum use of personal protective gear.

NEW PATIENTS

Community Medical Services will continue to provide intakes for new patients. MAT is a life-saving treatment and CMS will continue to offer this to patients during this crisis, while taking appropriate precautions to protect other patients and staff. We understand that the opioid crisis does not lessen as a result of the COVID-19 outbreak. CMS is doing everything within our control to ensure that those suffering from OUD who are ready to enter treatment still have the opportunity to do so.

FURTHER GUIDANCE

Community Medical Services is dedicated to remaining open and ensuring all patients continue with their medication as scheduled while limiting exposure for patients and staff. If you are at risk for complications, have been placed on quarantine by your medical provider, or were confirmed to have COVID-19, please call your clinic to make arrangements for your continued treatment.

As we monitor the COVID-19 outbreak, we will continue to communicate with our patients and stakeholders to notify them of changes in protocols and clinic hours of operation. Please speak with clinic staff regarding any questions or concerns you may have.

RESOURCES

For latest information on federal and state guidance towards treatment providers that are informing the preceding changes, please see below.

MEDICATED-ASSISTED TREATMENT (MAT)

- DEA GUIDANCE: [EXEMPTION ALLOWING ALTERNATE DELIVERY METHODS FOR OTPs](#)
- DEA GUIDANCE: [USE OF TELEMEDICINE WHILE PROVIDING MEDICATION ASSISTED TREATMENT \(MAT\)](#)
- SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA): [OTP UPDATE PAGE](#)
- SAMHSA: [COVID-19 GUIDANCE FOR OPIOID TREATMENT PROGRAMS](#)

IMPORTANT FEDERAL LINKS

- [GOVERNMENT RESPONSE TO CORONAVIRUS, COVID-19](#)
- [CENTERS FOR DISEASE CONTROL AND PREVENTION](#)
- [DEPARTMENT OF HEALTH AND HUMAN SERVICES](#)
- [SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION](#)
- [DEA SIGNIFICANT GUIDANCE DOCUMENT PORTAL](#)
- [FEDERAL EMERGENCY MANAGEMENT AGENCY](#)
- [CORONAVIRUS.GOV](#)

The health and safety of our patients and staff has, and always will be, our top priority.

