

Example of Request for Proposals (RFP) Language for Contracted Medical Providers: Medications for Opioid Use Disorder (MOUD) Treatment Integration

Developed by faculty and clinicians supporting the HEALing Communities Study at the University of Kentucky, the following contractual language can be copied into medical provider Requests for Proposals (RFP) to support correctional facilities integrating MOUD treatment into their standard of care. These guidelines have been developed to ensure the contracted medical provider is equipped to offer and support MOUD.

Requirements for Proposals

Below are the minimum criteria used to evaluate medical provider proposals for MOUD treatment. The failure to meet any of the following criteria may, in the discretion of the Jailer, disqualify a proposal from further consideration:

- Available services must include evidence-based treatment of substance use disorder, including but not limited to, treatment of opioid use disorder utilizing FDA-approved medications for opioid use disorder (MOUD).
- The contracted medical provider must have within their staff serving the detention center a DEA-licensed clinician (i.e., physician, physician assistant, or advanced practice nurse) with knowledge and training in treatment of substance use disorder, including opioid use disorder and MOUD. This “knowledge and training” must include buprenorphine education (formerly known as X-waiver training), or board certification in Addiction Medicine or Addiction Psychiatry.
- The contracted medical provider should develop, implement, and oversee a MOUD program that must be available for all persons with an opioid use disorder. Available medications must include all three FDA approved MOUD: methadone, buprenorphine, and extended-release naltrexone. If the medical provider company cannot provide methadone, they must partner with an Opioid Treatment Program to provide this option. Access to these medications must be made available to incarcerated persons within 24 hours of arrival and continued throughout incarceration if medically appropriate using guidelines from SAMHSA and the American Society of Addiction Medicine.

- Medical provider(s) (physician, physician assistant, or advance nurse practitioner) who is/are qualified to diagnosis and manage opioid use disorder must be available 7 days a week. The jail medical provider company must have providers with active DEA licenses and be able to order/store/prescribe/dispense controlled substances from the detention center in full compliance with state and federal regulations for controlled medications. A qualified provider must be readily available to evaluate and treat individuals acutely for time-sensitive conditions, including but not limited to acute withdrawal from alcohol, benzodiazepines and opioids (i.e., perform a medical evaluation within 24 hours of arrival to detention center).
- Medical intake screening performed on incoming persons during the booking process must include screening for opioid use disorder, including assessment of self-report of use and/or urine drug screening. Individuals identified with a possible opioid use disorder must be referred for evaluation by a qualified clinician within 24 hours who can initiate MOUD treatment if indicated.
- Staffing of a sufficient number of competent Registered Nurses, minimum of one (1) RN or higher medical provider per shift 24 hours/day, 7 days/week is required, Licensed Practical Nurses and/or Certified Medical Assistants to provide adequate medical staff coverage 24 hours/day, 7 days/week at the Detention Center facility. This nursing staff must be qualified to dispense/administer controlled substances, conduct triage, conduct medical screenings for incoming persons and see any inmate who might need immediate medical attention.
- If for any reason during the contract period the above conditions are not met, the detention center reserves the right to terminate the contract.

For Additional Information:

- Please see SAMHSA's guidance: <https://www.samhsa.gov/resource/ebp/medication-assisted-treatment-mat-opioid-use-disorder-jails-prisons-planning>