The Joint Commission

Prepublication Requirements

• Issued June 20, 2024 •

Joint Commission Requirement

New BHC Requirements for Medication for Opioid Use Disorder (MOUD)

The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online *E-dition*®), accredited organizations and paid subscribers can also view them in the monthly periodical The *Joint Commission Perspectives*®. To begin your subscription, call 800-746-6578 or visit http://www.jcrinc.com.

Please note: Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

APPLICABLE TO THE BEHAVIORAL HEALTH AND HUMAN SERVICES ACCREDITATION PROGRAM

Effective August 1, 2024

Care, Treatment, and Services (CTS) Chapter

CTS.04.02.33

For organizations providing care, treatment, or services to individuals with addictions: The organization provides evidence-based treatment for opioid use disorder, including medications for opioid use disorder.

Element(s) of Performance for CTS.04.02.33

1. **For organizations providing care, treatment, or services to individuals with addictions: As indicated by evidence-based practice, the organization offers individuals served who have an opioid use disorder medication to treat opioid use disorder (MOUD) as part of their mutually agreed upon treatment plan. The MOUD can be provided by the organization, through contractual agreement, or through a referral.**
   Note: The organization documents if the individual served chooses not to receive MOUD.

2. **For organizations providing care, treatment, or services to individuals with addictions: If the organization provides a referral for medication to treat opioid use disorder, the organization coordinates their care and confirms initiation and continuation of medication.**

Key: (D) indicates that documentation is required; R indicates an identified risk area;

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3. **For organizations providing care, treatment, or services to individuals with addictions: At the initiation of medication for opioid use disorder, the organization informs the individual served about the dangers of abrupt discontinuation of treatment if they leave the organization for any reason, including but not limited to requiring a different level of care or transferring to a different facility.**
Note: If the individual served requires a different level of care or transfers, the organization coordinates their care so that there is no interruption in their treatment.

4. **For organizations providing care, treatment, or services to individuals with addictions: Staff who assess, plan services for, and deliver services to individuals with opioid use disorder demonstrate understanding of evidence-based treatment for opioid use disorder, which includes, at a minimum, the following:**
- Medication for opioid use disorder
- Psychosocial therapies
- Harm-reduction

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