



Section: Substance Use Treatment & Prevention	Policy Name: Continuity of Care for Medications for Opioid Use Disorder	Policy Number: 11.24
Owner: Substance Use Treatment & Prevention Director	Reviewed By: Joel A. Smith, LMSW	Total Pages: 3
Required By: <input type="checkbox"/> BBA <input checked="" type="checkbox"/> MDHHS <input type="checkbox"/> NCQA <input checked="" type="checkbox"/> Other (please specify): 1115 Waiver	Final Approval By: <i>Joel Smith, LMSW</i> <u>Joel Smith, LMSW (Jan 21, 2026 11:36:14 EST)</u>	Date Approved: 01/21/26
Application: <input type="checkbox"/> SWMBH Staff/Ops <input type="checkbox"/> Participant CMHSPs <input checked="" type="checkbox"/> SUD Providers <input type="checkbox"/> MH/IDD Providers <input type="checkbox"/> Other (please specify): _____	Line of Business: <input checked="" type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): <input checked="" type="checkbox"/> Healthy Michigan <input checked="" type="checkbox"/> SUD Block Grant <input checked="" type="checkbox"/> SUD Medicaid <input type="checkbox"/> MI Health Link	Effective Date: 7/21/2022

Policy: It shall be the policy of Southwest Michigan Behavioral Health (SWMBH) to assure continuity of care is provided to customers in the event a facility that provides medications for opioid use disorder (MOUD) closes.

Purpose: Continuity of care to customers with substance use disorders who are receiving medication for opioid use disorder is essential to maintaining individual's recovery, improves outcomes, and reduces relapse potential by assuring on-going medication management is provided.

Scope: This policy applies to all SWMBH contracted MOUD providers and community-based providers, as needed.

Responsibilities: SWMBH will coordinate with SWMBH contracted MOUD providers and other community based MOUD providers, as needed, to ensure that necessary treatments can continue without interruption.

Definitions: None

Standards and Guidelines:

1. In the event a SWMBH funded substance use disorder (SUD) provider who provides MOUD services closes, the provider will notify SWMBH within required timeframes as outlined in their SWMBH contract.



2. In partnership with the contracted MOUD provider, SWMBH will assure medication management service provision continues by assuring referral to another SWMBH provider, or by identifying alternative community-based services where a comparable level of care is available.
3. If a non-SWMBH contracted MOUD provider closes, these providers are encouraged to contact SWMBH as needed, prior to the provider closing to assure continuity of care. In these situations, SWMBH will identify potential referrals in partnership with the provider and other community-based partners.

References: None

Attachments: None





SOP Template

Final Audit Report

2026-01-21

Created:	2026-01-21
By:	Erin Peruchietti (erin.peruchietti@swmbh.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAMOn71zFwTtxfc82lvfaNWadeabvMUWkg

"SOP Template" History

-  Document created by Erin Peruchietti (erin.peruchietti@swmbh.org)
2026-01-21 - 4:26:38 PM GMT- IP address: 104.159.231.26
-  Document emailed to Joel Smith (joel.smith@swmbh.org) for signature
2026-01-21 - 4:26:42 PM GMT
-  Email viewed by Joel Smith (joel.smith@swmbh.org)
2026-01-21 - 4:35:45 PM GMT- IP address: 104.47.56.126
-  Signer Joel Smith (joel.smith@swmbh.org) entered name at signing as Joel Smith, LMSW
2026-01-21 - 4:36:12 PM GMT- IP address: 216.250.152.18
-  Document e-signed by Joel Smith, LMSW (joel.smith@swmbh.org)
Signature Date: 2026-01-21 - 4:36:14 PM GMT - Time Source: server- IP address: 216.250.152.18
-  Agreement completed.
2026-01-21 - 4:36:14 PM GMT