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State of Indiana

Division of Mental Health and Addiction
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To: Substance Use Disorder Treatment and Mental Health Treatment Providers
From: Division of Mental Health and Addiction
Date: March 24th, 2020
Subject: COVID 19 Social Distancing Support Daily Programing

The Division of Mental Health and Addiction has been reviewing policies, Indiana Administrative Code (IAC), and federal requirements for Substance Use Disorder (SUD) and Mental Health service delivery. Our goal is maximum flexibility.

This assistance allows for continuing treatment with modifications while practicing caution to ensure safety for patients and staff during this emergency declaration.

For purposes of this document, we are using [SAMHSA's](#) definition for social distancing, quarantine and isolation:¹

- Social Distancing is a way to keep people from interacting closely or frequently enough to spread an infectious disease. Schools and other gathering places such as movie theaters may close and sports events and religious services may be cancelled.
- Quarantine separates and restricts the movement of people who have been exposed to a contagious disease to see if they become sick. It lasts long enough to ensure the person has not contracted an infectious disease.
- Isolation prevents the spread of an infectious disease by separating people who are sick from those who are not. It lasts as long as the disease is contagious.

Residential Situations (Sub-acute stabilization facilities, supervised group living facilities, transitional residential services facilities, semi-independent living facilities and alternative family homes)

Screening prior to admission:

1. Modify your pre-intake/screening process to include video or teleconferencing to assess for immediate need for mental health or addiction treatment as well as symptoms for COVID-19 (symptoms include: elevated temperature, shortness of breath, and cough).
2. If individual does not have any COVID-19 symptoms, assess for ability to remain safely in their home through the use of outpatient treatment via telehealth as needed in order to encourage social distancing.

¹ <https://www.samhsa.gov/sites/default/files/tips-social-distancing-quarantine-isolation-031620.pdf>



3. If individual does not show COVID-19 symptoms and do not have ability to remain in the home because of needing a higher level of care than outpatient treatment, bring in for admission with quarantine for 14 days. Offer mental health and SUD treatment via telehealth.
4. If an individual has COVID-19 symptoms, if at all possible, individual should be quarantined in their home with access to outpatient treatment via telehealth.
5. At any point during treatment, if COVID-19 symptoms progress to an uncomfortable shortness of breath to a point where individual is unable to catch their breath, individual should contact the local emergency department to arrange for evaluation.

Current Patients:

1. If individual does not have COVID-19 symptoms, they should remain in treatment as long as medically necessary with access to treatment via telehealth.
2. If individual does have COVID-19 symptoms, individual should return home with adequate supply of medication and resources (phone minutes, etc.) to ensure continued treatment via telehealth.
3. If individual does have COVID-19 symptoms with no place to live outside of facility, isolate them away from all other residents and staff with continued access to medication and treatment via telehealth. If symptoms develop to an uncomfortable shortness of breath to a point where individual is unable to catch their breath, contact local emergency department to arrange for evaluation.
4. Individuals that are COVID-19 symptomatic but are not experiencing shortness of breath requiring connection to an emergency room, who also no longer meet medical necessity for residential treatment and do not have a safe environment for discharge, should remain in their bed and contact DMHA to process other options for funding:
SUD.Services@fssa.IN.gov

General Guidance:

1. All in-person treatment groups should transition to telehealth. Please note the 42CFR Part 2 guidance for providing telehealth during an emergency by [SAMHSA](#).
2. If groups must convene for any reason, limit the number in the group so that clients can maintain a 6 foot distance from other clients
3. All outside personnel coming into the agency should be limited to those needed to maintain operations
4. All in-person visitation should stop until further notice and video or phone access should be made readily available to maintain connection with healthy supports.
5. For billing all of the above services via telehealth please refer to BT202022. Please send an email to DMHA Certification staff with number of staff or patients that test positive for COVID 19: DMHA-CL@fssa.IN.gov
6. All providers need to have an Infection Control Plan to reference to ensure that proper measures are being taken, appropriate sanitation is occurring on a regular basis, and universal precautions are utilized. Resources below can give ideas to include.

7. Utilize CDC/OSHA Standard Precautions when in contact with symptomatic consumers²³ (e.g. withdrawal management vital checks, other nurse or medical procedures) and treat all fluids as if they are contaminated.
8. Utilize Personal Protective Equipment (PPE) such as, gloves, face mask, and gowns if there are clients who have symptoms in the program.
9. When discharging a person refer to CDC transportation guidelines¹. This should only be done if the person's risk of leaving is not more detrimental than staying. Clients should always be discharged to a safe location and never to the street.
10. If possible, designate a quarantine space in your building for any client(s) that may start to exhibit symptoms congruent with COVID-19
11. Utilize [OSHA/CDC](#) Universal Precaution if there is a need to come into personal contact with a consumer.
12. SUD treatment with consumers that are clinically able to leave the facility for work
 - a. Ensure they are completely quarantined from any person in a higher level of care and not able to leave.
 - b. Limit consumers leaving services for reasons other than medical and possibly work.
13. Strongly encourage full attendance from staff and to save personal time, sick time, or voluntary time.
14. Limit and utilize PPE and other resources appropriately in order to prolong supply.

Outpatient Treatment:

1. Follow CDC guidelines around checking for [symptoms](#)
2. All in-person treatment groups should transition to telehealth. Please note the 42CFR Part 2 guidance for providing telehealth during an emergency by [SAMHSA](#).
3. Individual sessions should maintain social distancing, unless emergent needs require in person.
 - a. Telehealth video and phone is an encouraged alternative
4. Utilize CDC/OSHA Standard Precautions when in contact with symptomatic consumers⁴⁵ (e.g. withdrawal management vital checks, other nurse or medical procedures) and treat all fluids as if they are contaminated.
5. Utilize [OSHA/CDC](#) Universal Precaution if there is a need to come into personal contact with a consumer.
6. All outside personnel coming into the agency should be limited to those necessary to maintain operations

Recovery Services:

1. All in-person recovery groups should transition to telehealth. Please note the 42CFR Part 2 guidance for providing telehealth during an emergency by [SAMHSA](#).

² <https://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/standard-precautions.html>

³ https://www.osha.gov/SLTC/bloodbornepathogens/worker_protections.html

⁴ <https://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/standard-precautions.html>

⁵ https://www.osha.gov/SLTC/bloodbornepathogens/worker_protections.html

2. Utilize telehealth for all meetings but social distancing for emergent in-person individual meetings
3. If there is an emergency, base your decision of making in-person contact on:
 - a. Threat of consumer dying from SUD/Mental Health (MH) complications
 - b. Threat of current symptoms of provider and consumer Utilize CDC/OSHA Standard Precautions when in contact with symptomatic consumers⁶⁷ (e.g. withdrawal management vital checks, other nurse or medical procedures) and treat all fluids as if they are contaminated.
4. Utilize [OSHA/CDC](#) Universal Precaution if there is a need to come into personal contact with a consumer.
5. All outside personnel coming into the agency should be limited to those necessary to maintain operations.

Please refer to Governor Holcomb's Executive Order 20-08 Directive for Hoosiers to Stay Home regarding Essential Businesses and Operations: <https://coronavirus.in.gov/2496.htm>

Thank you again for the hard work you all are doing and know that we will get through this. If you have any questions, please contact us as at SUD.Services@fssa.IN.gov

For more information and direction about COVID 19, please visit <https://www.cdc.gov/coronavirus/2019-ncov/index.html> and <https://www.in.gov/coronavirus/>

⁶ <https://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/standard-precautions.html>

⁷ https://www.osha.gov/SLTC/bloodbornepathogens/worker_protections.html