



Substance Use Disorder Compliance Guidance Letter

Number: GL 22-3004-A
Title: Preparing for Emergencies or Disasters
Provider Types: Narcotic Treatment Programs
Date Issued: June 19, 2024

1.0 Subject and Purpose

This letter provides guidance to narcotic treatment programs (NTPs) on how to prepare for:

- Infectious disease and public health emergencies or disasters.
- Adverse weather events or conditions.
- Natural emergencies or disasters.
- Emergencies or disasters resulting from human activity.

2.0 Letter Details & Provider Responsibilities

In accordance with [Texas Administrative Code Title 25 Section 229.148\(c\)\(1\)](#), each NTP must develop and maintain a written plan to ensure patient treatment continuity during an emergency or disaster that disrupts the program's functions. As part of the written emergency and disaster response plan, an NTP must notify HHSC of any disruption affecting the program's ability to provide medication to patients by completing and submitting [Form 3215 Emergency/Disaster Notification](#) as soon as possible, after ensuring patient health and safety.

If an NTP plans a closure and offers take-home medication to patients, the NTP does not have to complete Form 3215, but must follow the Substance Abuse and Mental Health Services Administration (SAMHSA) process to request an Opioid Treatment Exception. The Opioid Treatment Exception process on the [SAMHSA/CSAT Opioid Treatment Program webpage](#) includes

requesting HHSC approval for the exception. An NTP that seeks an Opioid Treatment Exception does not need to inform HHSC separately.

If an NTP cannot reopen as intended after a planned closure, the NTP must notify HHSC as soon as possible by submitting [Form 3215 Emergency /Disaster Notification](#) and contacting the State Opioid Treatment Authority at laurie.delong@hhs.texas.gov.

HHSC encourages NTPs to continually evaluate, update, and implement emergency and disaster preparation and response planning to reduce patient medication insecurities. The plan should include provisions for:

- Infectious disease and public health emergencies or disasters.
- Adverse weather events or conditions.
- Natural emergencies or disasters.
- Emergencies or disasters resulting from human activity.

2.1 Infectious Disease and Public Health Emergencies or Disasters

HHSC encourages NTPs to be proactive in preparing for public health emergencies and disasters by:

- Designating clinic staff, including staff to act as a back-up when needed, to monitor infectious diseases.
- Adjusting protocols, strategies, and interventions according to applicable public health guidelines.
- Training staff on the clinic's emergency and disaster response plan to ensure patient treatment continuity during an emergency or disaster.
- Developing signage as determined necessary by the clinic's medical director to communicate relevant information to patients during an emergency or disaster.
- Establishing an adequate and appropriate supply of personal protective equipment to maintain safe operations during an emergency or disaster.
- Developing a plan for obtaining, prioritizing, and disseminating personal protective equipment during public health emergencies or disasters.

2.2 Adverse Weather Events or Conditions

To prepare for adverse weather events or conditions, HHSC encourages NTPs to:

- Designate clinic staff, including staff to act as a back-up when needed, to monitor adverse weather events or conditions.
- Develop parameters for distributing take-home medications, including how many take-home medications an NTP will provide and how many days before and after the event the NTP will provide them.
 - **Note:** When there is a prediction of adverse weather events or conditions, each clinic must prepare patient take-home medications *before* the event to ensure patients maintain access to medication.
- Develop a policy for notifying patients (refer to the [Communication Plan section below](#)).
- Enter an exception into the SAMHSA Extranet.

2.3 Natural Emergencies and Disasters

HHSC encourages NTPs to plan for a potential natural emergency or disaster for which a program receives advanced warning, such as a hurricane. Planning includes directly impacted clinics and “non-impact zone” clinics located outside the declared disaster area that may receive displaced clients from impacted areas.

2.4 Non-Impact Area Clinics

A clinic in a non-impact region should prepare for patient surges that may result from evacuations in areas directly impacted by an emergency or disaster by:

- Communicating with area clinics and discussing how clinics may help one another.
- Establishing a process that allows for an increase in patient dosing and allows time for guest dosing patients to be served in an orderly manner.
- Considering all the following:

- Any impact from evacuees who are not currently patients receiving treatment at an NTP
 - **Note:** Emergencies and disasters may interrupt the supply of non-prescribed drug use for individuals who are not NTP patients, which may result in new patients seeking treatment.
- Extending dosing hours
- Staffing to address patient surges
- Providing information on recognizing and addressing trauma
- Updating outgoing phone messages for patients evacuating to the program's geographic area with instructions on when to go to the clinic.

2.5 Emergency and Disaster Response Plan Development and Implementation

When developing the NTP's emergency and disaster response plan and procedures, an NTP should:

- Identify all the following:
 - Staff roles
 - Minimum guest dosing paperwork
 - Signatures required to facilitate guest dosing and how those signatures will be obtained
- Consider all the following resources required to implement the emergency and disaster response plan:
 - Medication stock
 - Labels
 - Take-home bottles
 - Staff, including possible staff shortages that may occur or additional staff needed to complete a task
- Prepare to dose with no power by practicing manual dispensing and medication inventory.

- Advise patients to keep take-home bottles because patients may need to rely on another clinic for continued dosing.
 - **Note:** The label on a patient's medication bottle may assist another clinic in providing the correct dosage for the patient if patient displacement occurs.
- Encourage patients to make a copy of their identification card (ID) and place the copy in their medication lockbox.
- Provide patients with a list of clinics in the area to which they may evacuate.
- Identify which staff may handle medications per Drug Enforcement Administration (DEA) regulations.
- Ensure treatment staff are trained on and understand medication stock transfer procedures as required by DEA regulations.

If an NTP has a disruption affecting the program's ability to provide medication to patients, the NTP must submit [Form 3215, Emergency/Disaster Notification](#) to HHSC and include both of the following:

- The emergency clinic phone number provided to patients.
- The contact information for the staff who will retain dosing information.

2.6 Communication Plan

HHSC encourages NTPs to develop an ongoing communication plan and provide patients with multiple emergency clinic phone numbers. A communication plan may include any of the following:

- Links to website information
- Postings and signage
- Social media pages
- Recorded messages to communicate important information

HHSC encourages NTPs to review emergency and disaster response plans with patients to alleviate concerns related to patient medication access and medication insecurity.

When implementing emergency and disaster response plans, an NTP should

update their outgoing phone message to provide information to patients about the changes the clinic is making due to the emergency or disaster.

2.7 Training Staff

HHSC encourages NTPs to practice their emergency and disaster response plans and ensure each staff member:

- Understands their role in each phase of the emergency and disaster response plan and practices the plan's procedures.
- Has contact information for the State Opioid Treatment Authority.

2.8 Post-Emergency

An NTP must notify HHSC that the clinic is back in operation after the emergency or disaster by submitting a new [Form 3215 Emergency/Disaster Notification](#) to HHSC.

3.0 Resources

Texas Administrative Code Title 25 Section 229.148(c)(1):
[texreg.sos.state.tx.us/public/readtac\\$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=229&rl=148#:~:tex t=\(1\)%20Each%20program,disruption%20in%20function](http://texreg.sos.state.tx.us/public/readtac$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&p_tac=&ti=25&pt=1&ch=229&rl=148#:~:tex t=(1)%20Each%20program,disruption%20in%20function).

Form 3215 Emergency/Disaster Notification: <https://ithhs.my.salesforce-sites.com/EMR3215>

GL 23-0001-A, Preparing for Hurricane Season:
hhs.texas.gov/providers/health-care-facilities-regulation

Sign up for GovDelivery to receive HHSC updates:
service.govdelivery.com/accounts/TXHHSC/subscriber/new

4.0 Contact Information

If you have any questions about this letter, please contact the Substance Use Disorder Compliance Unit by email at SUDCU@hhs.texas.gov.