



215 S Power Road, Suite 113, 114 & 216  
Mesa, Arizona 85206

Phone: (480) 981-1022

Fax: (480) 981 1405

# PATIENT HANDBOOK

# Celebrating 33 Years

## 1988-2021



# WELCOME

Welcome to New Hope Behavioral Health Center, Inc. It is our goal to help you achieve your treatment expectations and goals. NHBHC staff encourages you to ask any questions you might have and to take full advantage of the services NHBHC is licensed to provide.

*What is New Hope Behavioral Health Center, Inc.?*

New Hope Behavioral Health Center, Inc. is a for profit, out-patient substance abuse treatment center that provides a full range of out-patient treatment services to residents of Maricopa, Pinal, Pima, and surrounding counties in Arizona. New Hope Behavioral Health Center, Inc. treated its first patient in 1988 and since that date, thousands of people have received some type of service from us.

*What services does New Hope Behavioral Health Center provide?*

New Hope Behavioral Health Center provides out-patient treatment services to adults, eighteen years of age or older, and their families with opioid addiction disorders. Services vary in type and level of intensity depending on each person's individual needs. Education and prevention services are also available.

If you are experiencing a Mental Health Crisis, please contact the following number(s):

**National Suicide Prevention Lifeline and  
Veterans Crisis Line (24/7)**

1-800-273-8255

**Arizona Complete Care Confidential  
Behavioral Health Crisis Line**

Cochise, Graham, Greenlee, La Paz, Pima, Pinal,  
Santa Cruz, Yuma Counties or on the San Carlos

Apache Reservation:

**1-866-495-6735**

Maricopa County:

**1-602-222-9444 or 1-800-631-1314**

**The Maricopa Crisis Line**

602-222-9444

1-800-631-1314 (toll-free)

Hearing impaired TTY/TDD

1-800-327-9254

[www.crisisnetwork.org](http://www.crisisnetwork.org)

**arizona211.org**

**For emergency situations always call 911**

## LOCATIONS

New Hope Behavioral Health Center, Inc. is located at:

215 S Power Road, Suite 114

Mesa, Arizona 85206

Phone: (480) 981-1022

Fax: (480) 981-1405

New Hope Behavioral Health Center, Inc.

Integrated Behavioral Health Primary Care is located at:

215 S Power Road, Suite 216

Mesa, Arizona 85206

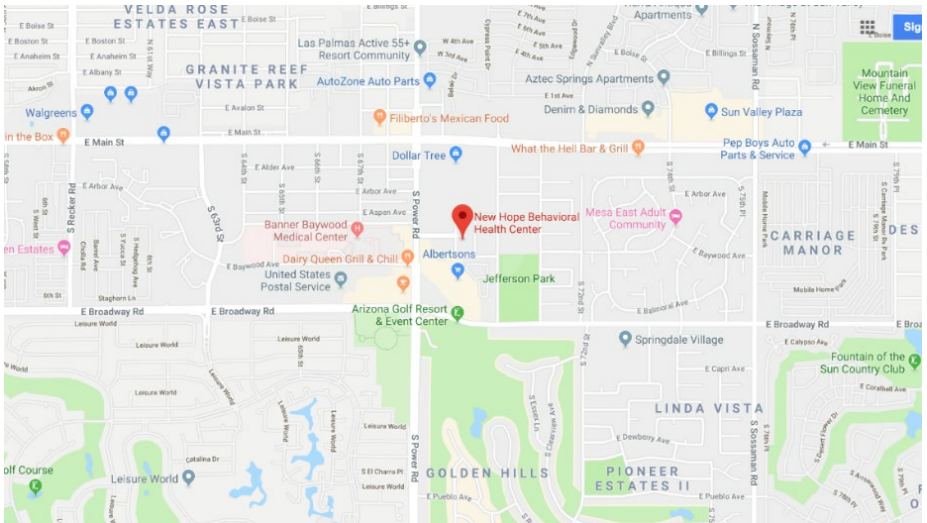
Phone: (480) 562-6628

Fax: (480)981-1405

### After-hours phone:

Medical: (480) 826-2646

Clinical: (480) 993-5919



## Clinic Hours

New Hope Behavioral Health Center, Inc.:

Monday, Tuesday, Thursday, Friday: 4:30AM to 2:30PM

Wednesday: 4:30AM to 11:30AM and 12:30PM to 2:30PM

Saturday: 6:30AM to 8:30AM

Sunday and All Federal Holidays: **CLOSED**

New Hope Behavioral Health Center, Inc.

Integrated Behavioral Health Primary Care:

Monday, Tuesday, Thursday, Friday: 5:00AM to 1:00PM  
(subject to change)

Wednesday: 5:00AM to 11:30AM and 12:30PM to 1:00PM (subject to change)

Sunday and all Federal Holidays: **CLOSED**

## Administrative Hours

Admin. Assistant Phone: (480) 562-6645

Monday through Friday: 7:00 AM to 3:00PM

Saturday, Sunday, and All Federal Holidays: **CLOSED**

# MISSION STATEMENT

New Hope Behavioral Health Center, Inc. uses a unique philosophy that has opened a door and created an opportunity for “New Hope to be Born Again.” We strive for success in the development of innovative solutions for a well-balanced, healthy, and diverse community suffering from drug abuse and addiction from the high-school student to the retired executive.

## VISION STATEMENT

New Hope Behavioral Health Center, Inc. is recognized by the faith-based community as the provider and employer of choice for behavioral health care services in the treatment of opioid addiction disorders

## VALUES STATEMENT

The Staff of New Hope Behavioral Health Center, Inc. is values committed to the following:

- Compassion
- Service Excellence
- Integrity
- Optimal Care
- Creativity
- Positive Workplace
- Fiscal Management
- Grace upon Grace

## CONFIDENTIALITY

All services and written information at New Hope Behavioral Health Center, Inc. are confidential as mandated by federal and state laws, as well as HIPAA regulations. Patient charts, or verbal disclosures, will **NOT** be released without the patient's written consent, except under the following circumstances:

- Information from charts requested through a valid court order or subpoena naming a specific individual.
- Child abuse or adult abuse is identified or suspected.
- The patient is in a state of medical emergency that necessitates disclosure of information to medical personnel, including police if suicide is attempted or planned.
- If the patient threatens to harm someone, the intended victim and the police will be notified.

**(New Hope Behavioral Health Center is a Mandated Reporter) See Duty To Report on Page 10**

**Legal Definition of *mandated reporter***

: an individual who holds a professional position (as of social worker, physician, nurse, teacher, or counselor) that requires him or her to report to the appropriate state agency cases of child/adult abuse that he or she has reasonable cause to suspect



Please be aware that the clinical staff may listen to information about you volunteered by an outside source; however, information will not be shared with that source unless you have signed a release. This includes parents or others who may provide financial assistance for you.

Additional information regarding confidentiality issues may be obtained from the Administrator/Director by calling (480) 981-1022.

#### Copies of Record

You may request a copy of your records at any time for reasonable fee for the cost of time, materials, equipment and personnel in producing such productions. This fee will be determined by the Administrator of New Hope Behavioral Health Center who is also the “Custodian of Records”. Please note that progress notes and assessments will not be released to a non-professional entity (family members, friends, etc.).

#### Insurance Company Requirements

At this time, NHBHC is contracted with AHCCCS (Arizona Health Cost Care Containment System)— Mercy Care, Magellan Health Services, Arizona Complete Care, or any other contracted RBHA. We are also contracted with TriWest for our veteran patients. You, as a patient, with other insurance may request an itemized bill to submit directly to your individual insurance company for reimbursement. An itemized bill presented to the patient does not guarantee that your insurance company will cover (pay) for services rendered at this clinic.

With regards to payment of services received at NHBHC require the clinic to submit services in a numeric code

format identifying the services received and the diagnosis supporting services rendered. An insurance company may require supporting documentation in order to consider these charges for payment of services rendered. It is the responsibility of NHBHC to provide requested information to the insurance agency to determine necessity. By enrolling at NHBHC for services and signing the intake paperwork required for treatment, NHBHC is permitted to bill for services rendered to you during your enrollment in the clinic. It is the responsibility of you, the patient, to know your policy provisions and to comply with your insurance requirements. Should your insurance become inactive, you, the patient, will become a private pay patient and all charges during your inactive period will be your responsibility. Some insurance plans have copay or deductible requirements that are the responsibility of the patient. These charges are not waived and will be added to your bill for patient payment.

Private pay patients on **Methadone** should expect to pay \$110 upon intake and \$70 weekly thereafter.

Private pay patients on **Suboxone** should expect to pay \$125 upon intake and \$90 weekly thereafter.

## DUTY TO REPORT

New Hope Behavioral Health Center, Inc. is an out-patient Medication Assisted Treatment (MAT) program licensed by Federal and State regulatory agencies, and as such, we must continually meet standards to continue treatment services to our patients. New Hope Behavioral

Health Center, Inc. also meets and maintains international treatment standards established by our accrediting agency

Among many of the rules and regulations, we are responsible for is “A Duty to Report.”

The staff of New Hope is required, by law, to report to the appropriate authorities

Any suspected or alleged

- Abuse of a child or an adult\*
- Neglect of a child
- Exploitation of a child or an adult

\*Note: Abuse of child is to include, but not limited to, continued illicit use of drugs or alcohol while pregnant. This notification to authorities is done immediately, without hesitation.

#### What rights do I have to receive services?

Services for treatment at New Hope Behavioral Health Center, Inc. are available without regard to age (unless a minor under 18 years of age), sex, gender identity, sexual orientation, race, creed, color, ancestry, national origin, disability, familial status, or marital status. Individuals who are enrolled in the AHCCCS (Arizona Health Care Cost Containment System) may be assigned to a different service provider. Everyone has the right to request or refuse treatment to the extent provided by the law. The right to treatment is not absolute, and under some circumstances it may be in the best interest of the patient and the agency if the patient is referred



# PATIENT RESPONSIBILITIES

## IMPORTANT

While receiving treatment services at New Hope Behavioral Health Center, Inc., patients are responsible for:

- Providing information necessary to complete an appropriate clinical, medical, and financial assessment to ensure proper treatment. This includes, but is not limited to:
  - Valid photo ID
  - Working phone number with a functioning voicemail
  - Information for an emergency contact
  - Insurance information (AHCCCS card)
- It is the policy of NHBHC that ALL patients attend at least one counseling session per month. These sessions must be one-on-one, at least 15 minutes in length, and preferably with the patient's assigned counselor; however, any counselor on-staff and available at the time will suffice. Group counseling sessions do not meet this requirement.
- Attending required 1:1 and group counseling sessions.
- Giving NHBHC ample notice if they plan to travel more than 200 miles from NHBHC and may require courtesy/guest dosing at another MAT clinic.
- Complying with coordination of care with other health care professionals that handle any/all care outside of NHBHC.
  - It is expected that patients are transparent about their methadone treatment with other health care providers, as this can have

an impact on care delivery and safety of the patient.

- Working with the staff to develop an individual treatment plan and follow the agreed upon course of action. Treatment plans will be reviewed with the patient every 90 days for the first year, and then as needed, but at least annually, thereafter.
- Understanding that NHBHC does NOT provide pain management/chronic pain relief services. If this is the primary goal of the patient, NHBHC will deny him/her admission and refer them to medical services elsewhere.
- Complying with medical reviews on a yearly basis for justification of continued treatment which may include but is not limited to:
  - TB Testing
  - RPR (blood test for Syphilis)
  - Vitals
  - Urine analysis
  - Physical assessment
- Complying with state and federal policies regarding urinary analysis tests. Patients should expect to complete a urinary analysis test *at least* 8 times per year.
- Signing releases (when indicated) and other paperwork, contracts, and consents for the continuation of care.
- If eligible for take-home medication: Complying with NHBHC's Diversion Control Plan, which requires Monthly Diversion Checks. These Diversion Checks are to assure accountability for patient take-home medication.
- Participating in a "DO NO HARM" environment that promotes wellness and detours unsafe and unhealthy practices.
- Treating other patients and staff in a respectful manner.

- **NO** Loitering, **NO** Littering, **NO** Destroying of public or private property. This may be grounds for immediate dismissal. **This is a zero-tolerance policy. \***
- Notifying a staff member, nurse, counselor of their intention to discontinue treatment services.
- Refraining from bringing alcohol, drugs, or weapons onto or into the agency's properties, as well as loitering on the premises or smoking outside of designated areas. **This is a zero-tolerance policy. \***
- Arriving on time for appointments; or if unable to keep appointment, calling 24 hours in advance to cancel/reschedule.
- Providing medical staff with information regarding prescribed medications, over-the-counter (OTC) medication, and all herbal supplements or vitamin preparations the patient is taking throughout treatment.
- **For ALL Patients:** It is important to maintain updated Treatment Plans and Assessments with your intake facility. Without these, your services at New Hope Behavioral Health Center, Inc. will become your responsibility to pay.
- **For ALL AHCCCS Patients:** it is YOUR responsibility to notify New Hope Behavioral Health, Inc. about eligibility changes (newly enrolled/newly terminated/etc.). When your coverage is terminated it is your responsibility to pay your bill timely. Unpaid balances will affect your phase status/eligibility in NHBHC program.

\*Zero-tolerance is defined as an activity that has the potential to lead to disrespectful, unsafe, or destructive outcomes. This activity could lead to the immediate dismissal from the clinic and treatment services.

## PATIENT BENEFITS

When you come for your first appointment, a clinical staff member will work with you to determine the focus of treatment and the appropriateness of New Hope Behavioral Health Center, Inc. to meet your needs, based upon your problem(s), needs, strengths, abilities, skills, interests, and preferences. The assessment of the clinical and medical issues will determine necessity and your ability to meet eligibility requirements, as well as financial requirements to receive treatment services (medication assisted treatment). The first appointment will help guide you and staff to the best types of care and services you require and the available choices that must be made. Please understand that not all individuals with an opioid addiction are candidates for out-patient treatment and a referral may be suggested for more appropriate treatment intervention.

During the first 90 days of comprehensive maintenance treatment, a patient may receive a single dose of take-home medication for each day that the agency is closed for business, including Sundays and Federal/State holidays.

NHBHC provides take-home medication services, for which patients become eligible for after 90 in comprehensive maintenance treatment. However, please note that take-home medication services are a privilege and not a right. NHBHC reserves the right to refuse any patient take-home medication privileges, as deemed necessary.



Adult therapy services include individual and group counseling. Counselors work from a brief solution-focused model that utilizes patients' strengths, teaches new skills, and promotes change in the patient's life. Group counseling is often the intervention of choice, as it has the potential to yield great personal change for the patient while contributing to their sense of belonging and providing social support and peer advice. Group counseling may be provided at New Hope Behavioral Health Center, Inc. when resources are available or by referral to outside resources.

New Hope Behavioral Health Center provides Hepatitis C and HIV rapid testing to all patients, Monday to Friday 5:00 AM until 1:00 PM. There is no appointment needed. Please allow up to 20 minutes to have your results. New Hopes Nursing staff will supply patients with literature and linkage to care. It is recommended that if you test positive to get tested every 6 months. Positive results are subject to reporting to the local health department. *(Anonymity is not possible as these are considered communicable diseases and must be reported.)*

In order to better serve our population New Hope will be providing a holistic approach to treatment by adding on integrated Behavioral Health Primary Care Services.

New Hope offers harm reduction tools such as Naloxone to patients/clients/participant(s) upon request.

## COUNSELOR ASSIGNMENT

The counselor will meet with the patient to complete an assessment and jointly develop an individualized service plan that dictates the course of treatment. During the patient's time at NHBHC, any non-compliance of clinic policies, state, and/or federal mandates and the impact on their treatment will be addressed with a counselor.

Patients will be automatically assigned a counselor or clinician during the intake process or after admission, by review of the following information

- The patient's treatment goals and needs
- The most convenient times for you
- Language or other special needs

Patient input is also considered when assigning a counselor; patients have the right to request a change in counselor at any time. However, NHBHC reserves the right to refuse this request.

*\*\* Remember, the staff person who does your intake upon admission may not be assigned as your regular counselor or clinician.*

## CULTURAL AND LINGUISTIC INFORMATION

It is the policy of New Hope Behavioral Health Center, Inc. to provide services that are culturally competent and that are provided in the patient's primary language whenever possible.

## TREATMENT LENGTH

If you are here for substance abuse treatment, specifically opiate addiction, the length of time in treatment depends on your individual recovery plan, which you and your counselor will create together during your first session. In general, counseling and opioid replacement therapy at New Hope Behavioral Health Center, Inc. is solution-focused with an emphasis on strength-based treatment and family involvement when indicated.

Transition and discharge from treatment is incorporated into the treatment plan and generally occurs following attainment of treatment goals established upon admission and/or fourteen (14) days absent from the clinic (AWOL). Failure to comply with the agreed upon treatment activities may result in an administrative discharge, as allowed by agency policy and signed contracts by the patient (you).

If you have a co-occurring illness (physical and/or mental), ongoing treatment services may be required and/or indicated, which you or your counselor identified together at the beginning of your treatment at NHBHC. Failure to comply with the agreed upon treatment could and may compromise your success in your recovery and treatment with NHBHC. The same consequences hold true in this example as it does in the above paragraph. You, the patient, will always retain the right to stop or end your treatment services with New Hope Behavioral Health Center, Inc. or request to be transferred to another Medication Assisted Treatment (MAT) program (OTP).

## **FAMILIAL INVOLVEMENT**

New Hope Behavioral Health Center, Inc. believes that support in the form of “family” (as identified by the patient) and significant others are extremely beneficial for the recovery from, and the prevention of, addiction disorders. The patient’s support system will be encouraged to participate in treatment services if the patient so chooses. The patient will meet with his/her counselor or clinician to determine who is to be included.

## **PATIENT FEEDBACK**

New Hope Behavioral Health Center, Inc. invites you to provide feedback regarding the quality of care using patient satisfaction surveys. Also, in the patient waiting room, a suggestion box is provided for any feedback. You are also welcome and invited to participate in weekly staffing which pertains to helping us improve patient services.

## **STAFF CONDUCT**

All staff is always expected to conduct themselves in a manner reflecting the highest professional and ethical standard. New Hope Behavioral Health Center, Inc. has established a policy and procedure addressing this topic. To review this article(s), please set a time (appointment) with the Administrator/Director by calling (480) 981-1022.

## **VEHICLE SAFETY**

New Hope Behavioral Health Center, Inc. cannot be, and is not, responsible for damage to, or loss of non-company owned vehicles at any facility or function. It is the responsibility of the owner of the lost, stolen, or damaged vehicle. Parking at New Hope Behavioral Health Center, Inc.'s is available at the vehicle owner's risk.

## **ACCESSIBILITY**

NHBHC is committed to having its clinic comply with all aspects of a formal accessibility plan, which includes Health, Safety, and Transportation Issues.

Since NHBHC started in 1988, the clinic has complied with all required standards – providing an accessible, healthy, and safe environment for the patients served and for staff members.

NHBHC is committed to providing an organization climate that accommodates the needs of all patients, families, and staff members. Central to this commitment is the removal of architectural, attitudinal, employment, and other barriers that may impede full access to NHBHC services and programs.

## PATIENT GRIEVANCE PROCEDURE

Patient grievance procedure is the formal mechanism for the resolution of a disagreement that may arise between patients and staff. It assures that any patient with a legitimate grievance is given the opportunity for redress. Step one need be initiated within fourteen (14) days from the time of the incident.

It is the policy of NHBHC that all patients have access to a procedure for submitting any grievances, comments, and suggestions.

Procedure:

**Step One** – within fourteen (14) days of grievance. The meeting shall occur between the patient and the counselor. It shall be an informal presentation of the grievance with the counselor. If grievance cannot be resolved, the patient may submit a grievance. If the decision to submit a grievance is reached by the patient, he/she will be given the form for Step Two, and will fill out the patient portion with, or without, the counselor's assistance (preferably this is to be completed during the meeting). If no grievance is submitted, the counselor is expected to note a complaint and the meeting in the patient's file under "Progress Notes".

**Step Two** – (See Form A-102 Patient Grievance Form) within five (5) days of Step One meeting. A formal grievance hearing needs to be held with the Clinical Director, counselor, and patient. The patient needs to sign a written notification that the matter was sustained,

settled, or withdrawn and a copy will be given to the patient. If sustained, proceed to next step.

**Step Three** – A patient will always retain the right to appeal a grievance action to the State Department of Health. NHBHC shall be prohibited from involuntary discharging, retaliating, or discriminating against any patient who submits a complaint, grievance, assists the AZDBHS or any other legal authority in a complaint related investigation for reason such submission or assistance.

Agency grievance policies and procedures shall be explained to the patient, parental guardian, or designated representative at the time of admission.

Understanding of the grievance policies and procedures shall be verified by the dated signature of the patient, parent, guardian, or designated representative. These steps are also posted in the patient waiting room for easy access by patients and their families.

When information is received, either orally or in writing, that the individual has Limited English Proficiency (LEP) or any other communication need, NHBHC must follow requirements outlined in Article 3, Cultural Competency and Diversity, regarding oral interpretation services, translation of written materials, and services for the deaf and hard of hearing:

1. For all individuals with LEP, the provider must make available oral interpretation services.
  - a. For individuals needing translation in the prevalent non-English language within the region, NHBHC shall provide a

written translation in accordance with the requirements of Article 3, Cultural Competency and Diversity.

- b. For individuals who need translation in a language that is not considered a prevalent non-English language within the region or who require alternative formats (such as TTY/TTD), NHBHC shall provide oral interpretation of written materials or make alternative communication formats available as indicated.

The addresses and telephone numbers of agencies needed for grievance are as follows:

Arizona Department of Health Services  
Bureau of Medical Facility Licensing  
150 N. 18th Ave., Suite 410  
Phoenix, AZ 85007-3242 (602) 364 – 2595

State Opioid Treatment Authorities  
Arizona Health Care Cost Containment System  
701 E Jefferson St., MD 6500  
Phoenix, AZ 85034  
(602) 364 – 2111

CARF International  
6951 E. Southpoint Rd. Tucson, AZ 85756-9407, USA  
888-281-6531 Phone (520) 318-1129 Fax

The Administrator of New Hope Behavioral Health Center, Inc. conducts annual reviews of all written complaints and or grievances to identify trends, areas





# PATIENT RIGHTS

(Arizona Administrative Code (A.A.C.) R9-10-1008)

## The patient has the following rights

### **A. An administrator shall ensure that:**

1. The requirements in subsection (B) and the patient rights in subsection (C) are conspicuously posted on the premises;
2. At the time of admission, a patient or the patient's representative receives a written copy of the requirements in subsection (B) and the patient rights in subsection (C); and
3. Policies and procedures are established, documented, and implemented to protect the health and safety of a patient that include:
  - a. How and when a patient or the patient's representative is informed of patient rights in subsection (C); and
  - b. Where patient rights are posted as required in subsection (A)(1).

### **B. An administrator shall ensure that:**

1. A patient is treated with dignity, respect, and consideration;
2. A patient is not subjected to:
  - a. Abuse;
  - b. Neglect;
  - c. Exploitation;
  - d. Coercion;
  - e. Manipulation;
  - f. Sexual abuse;
  - g. Sexual assault;

- h. Except as allowed in R9-10-1012(B), restraint or seclusion; This document contains an unofficial
  - i. Retaliation for submitting a complaint to the Department or another entity; or
  - j. Misappropriation of personal and private property by an outpatient treatment center's personnel member, employee, volunteer, or student; and
- 3. A patient or the patient's representative:
  - a. Except in an emergency, either consents to or refuses treatment;
  - b. May refuse or withdraw consent for treatment before treatment is initiated;
  - c. Except in an emergency, is informed of alternatives to a proposed psychotropic medication or surgical procedure and associated risks and possible complications of a proposed psychotropic medication or surgical procedure;
  - d. Is informed of the following:
    - i. The outpatient treatment center's policy on health care directives, and
    - ii. The patient complaint process;
  - e. Consents to photographs of the patient before a patient is photographed, except that a patient may be photographed when admitted to an outpatient treatment center for identification and administrative purposes; and
  - f. Except as otherwise permitted by law, provides written consent to the release of information in the patient's:
    - i. Medical record, or
    - ii. Financial records.

**C. A patient has the following rights:**

1. Not to be discriminated against based on race, national origin, religion, gender, sexual orientation, age, disability, marital status, or diagnosis;
2. To receive treatment that supports and respects the patient's individuality, choices, strengths, and abilities;
3. To receive privacy in treatment and care for personal needs;
4. To review, upon written request, the patient's own medical record according to A.R.S. §§ 12-2293, 12-2294, and 12-2294.01;
5. To receive a referral to another health care institution if the outpatient treatment center is not authorized or not able to provide physical health services or behavioral health services needed by the patient;
6. To participate or have the patient's representative participate in the development of, or decisions concerning, treatment;
7. To participate or refuse to participate in research or experimental treatment; and
8. To receive assistance from a family member, the patient's representative, or other individual in understanding, protecting, or exercising the patient's rights.

## METHADOSE™ ORAL CONCENTRATE

*(Methadone hydrochloride oral concentrates USP)*

### Special-Risk Patients

Methadone should be given with caution, and the initial dose reduced, in certain patients such as the elderly and debilitated, and those with severe impairment of hepatic or renal function, hypothyroidism, Addison's disease, prostatic hypertrophy, or urethral stricture. The usual precautions should be observed and the possibility of respiratory depression requires added vigilance.

### Information for Patients

- Patients should be cautioned that Methadose, like all opioids, may impair the mental and/or physical abilities required for the performance of potentially hazardous tasks such as driving or operating machinery.
- Patients who are ambulatory should be cautioned that Methadose, like other opioids may produce orthostatic hypotension.
- Patients should be cautioned that alcohol and other CNS depressants may produce an additive CNS depression when taken with this product and **should be avoided**.
- Patients should be instructed to seek medical attention immediately if they experience symptoms suggestive of an arrhythmia (such as palpitations, dizziness, lightheadedness, or syncope) when taking Methadose.
- Patients initiating treatment with Methadose should be reassured that the dose of methadone will “hold” for longer periods of time as treatment progresses. NDA 17-116/S-021 Page 21.
- Patients should be instructed to keep Methadose in a secure place out of the reach of children and other

household members. Accidental or deliberate ingestion by a child may cause respiratory depression that can result in death.

- Patients should be advised not to change the dose of Methadose without consulting their physician.
- Women of childbearing potential who become or are planning to become pregnant should be advised to consult their physicians regarding the effects of Methadose use during pregnancy.
- If a physically dependent patient abruptly discontinues use of Methadose, an opioid abstinence or withdrawal syndrome may develop. If cessation of therapy is indicated, it may be appropriate to taper the methadone dose, rather than abruptly discontinue it, due to the risk of precipitating withdrawal symptoms. Their physician can provide a dose schedule to accomplish a gradual discontinuation of the medication.
- Patients seeking to discontinue treatment with Methadose for opioid dependence should be apprised of the high risk of relapse to illicit drug use associated with discontinuation of methadone maintenance treatment.
- Patients should be advised that Methadose is a potential drug of abuse. They should protect it from theft, and it should never be taken by anyone other than the individual for whom it was prescribed.
- Breastfeeding:
  - Methadone use is usually compatible with breastfeeding. Pregnant mothers using methadone should be counseled about the benefits and risks of breastfeeding while using methadone. Counseling should include the following information:
  - The baby receives a small amount of methadone through breast milk.



# Buprenorphine and Naloxone Sublingual Tablets

## Important Safety Information

### **Contraindications**

Buprenorphine and Naloxone Sublingual Tablets are contraindicated in patients with a history of hypersensitivity to buprenorphine or naloxone as serious adverse reactions, including anaphylactic shock, have been reported.

## Information for Patients

- Patients should be cautioned that Buprenorphine and Naloxone Sublingual Tablets, like all opioids, may impair the mental and/or physical abilities required for the performance of potentially hazardous tasks such as driving or operating machinery.
- Patients should be cautioned that alcohol and other CNS depressants may produce an additive CNS depression when taken with this product and **should be avoided**.
- Patients should be instructed to keep Buprenorphine and Naloxone Sublingual Tablets in a secure place out of the reach of children and other household members. Accidental or deliberate ingestion by a child may cause respiratory depression that can result in death.
- Patients should be advised that Buprenorphine and Naloxone Sublingual Tablets contain buprenorphine, a schedule 3 controlled



substance that be abused in a similar manner to other opioids, legal or illicit.

- Patients should be cautioned that a marked and intense opioid withdrawal syndrome is highly likely to occur with parenteral misuse of Buprenorphine and Naloxone Sublingual Tablets by individuals physically dependent on full opioid agonists or by sublingual administration before the agonist effects of other opioids have subsided.
- Patients should be advised that Buprenorphine/naloxone products are not recommended in patients with severe hepatic impairment and may not be appropriate for patients with moderate hepatic impairment.
- Patients should be cautioned that like other opioids, Buprenorphine and Naloxone Sublingual Tablets may produce orthostatic hypotension in ambulatory patients.
- Patients should be cautioned that like other opioids, buprenorphine has been shown to elevate cerebrospinal fluid pressure and should be used in caution in patients where cerebrospinal pressure may be increased
- Patients should be cautioned that like other opioids, buprenorphine has been shown to increase intracholedochal pressure and should be administered with caution in patients with biliary tract dysfunction.

#### Adverse Reactions

Adverse event commonly observed with administration of Buprenorphine and Naloxone Sublingual Tablets are oral hypoesthesia, glossodynia, oral mucosal erythema,



## RESOURCES

### **Bureau of Medical Facilities Licensing**

AZ Department of Health Services

150 N. 18th Ave., Suite 450

Phoenix, Arizona 85007

(602) 364-2536

(602) 364-4808 Fax

### **Arizona Department of Health Services**

150 North 18th Avenue

Phoenix, Arizona 85007

General and Public Information:

(602) 542-1025

(602) 542-0883 Fax

### **Arizona Health Care Cost Containment System (AHCCCS)**

AHCCCS

801 E Jefferson St

Phoenix, Arizona 85034

Behavioral Health Services

(602)-364-4558 or

(800)-867-5808

### **Arizona Department of Economic Security**

Adult Protective Services

(877) 767-2385

### **Arizona Department of Child Safety**

Child Abuse Hotline

(888) 767-2445

### **Mercy Maricopa Integrated Care (MMIC)**

By mail:

Mercy Care RBHA  
4755 S. 44th Place  
Phoenix, AZ 85040

By phone:

Mercy Care RBHA Member Services  
24 hours a day, 7 days a week  
602-586-1841  
1-800-564-5465 (toll-free)  
Hearing impaired TTY/TDD 711  
24-hour nurse line: 602-586-1841 or 1-800-564-5465

Media inquiries

Monica Alonzo  
602-453-8056

### **Magellan Complete Care**

Monday through Friday from 8 a.m. - 6 p.m. local time  
1-800-424-5891 (TTY 711)

### **Arizona Complete Health Care**

Medicaid Member Services: 1-888-788-4408  
AZ Crisis Line: 1-866-534-5963  
TTY/TDY: 711  
Provider Customer Service: 1-866-796-0542.





