



THE SUPREME COURT *of* OHIO

PRINCIPLES FOR THE USE OF MEDICATION FOR ADDICTION TREATMENT (MAT) IN DRUG COURTS

1. Drug courts are in a unique position and leadership role to motivate and support recovery among individuals with an opioid use disorder who are involved in the criminal justice system.
 - a. Individuals, families, and communities benefit from reduced recidivism rates, increased public safety, and more efficient and coordinated use of resources that accompany a collaborative approach to long-term recovery without jeopardizing accountability.
 - b. Drug court advisory committees and treatment teams are important vehicles to coordinate efforts of the medical, behavioral health, social service, and criminal justice systems to achieve shared goals.
2. Drug court team members and stakeholders should engage in ongoing education to ensure a common understanding of the evolving research and literature, and commit to using best practices.
 - a. Cross-systems training will ensure all stakeholders have a current, complete, and shared understanding of core concepts such as the science of substance use disorders and MAT, behavioral health practices, evidence-based decision making, and court processes.
 - b. Known risk factors for relapse, recidivism, overdose, and other barriers to recovery should be reflected in drug court practices.
3. Drug courts should consider any of the medications approved by the FDA for treatment of an opioid use disorder as appropriate for use with justice-involved adults if prescribed for an individual by a qualified medical provider and administered in conjunction with behavioral health treatment.
 - a. Reduction in relapse rates is significantly improved with the inclusion of FDA-approved medications for opioid use disorders.
 - b. Medication should be used in conjunction with a comprehensive treatment plan that includes quality behavioral health services.
 - c. While each specific medication is effective for the treatment of opioid use disorders, like with any disease or condition, individuals respond differently to any particular treatment strategy.
4. Drug courts should refer participants for a medical exam to consider whether MAT is appropriate, and should monitor and enforce compliance with the full treatment plan.
 - a. Participants who present with confirmed or suspected opioid use should be referred to a properly licensed medical professional for a complete, in person assessment.
 - b. Incentives, sanctions and therapeutic interventions should take into account whether the desired behavior is a proximal or distal goal for each stage of their recovery.
 - c. Judges should consider seeking reassessments from treatment professionals as necessary and adopt any adjustments to the medical and behavioral treatment plans that are indicated.

Principles for the Use of Medication for Addiction Treatment (MAT) in Drug Courts

5. Drug courts should rely on medical providers and participants to present well-informed medical treatment plans to the court, which may include MAT.
 - a. Providers should address opioid use disorders as a chronic relapsing disease of the brain and adhere to current and emerging evidence-based practices.
 - b. Any plans involving MAT should take an individualized approach to medication choice, delivery method, dosage, and length of treatment.
 - c. Courts should establish a process for identifying and working with qualified providers that prescribe appropriate medication as medically indicated for each participant.
6. When addressing program violations, drug court judges should consider how the potential collateral consequences of any sanction may disrupt recovery.
 - a. Incentives, sanctions and therapeutic interventions should be used in a manner that minimize the unintended termination of medication, behavioral health treatment, health insurance, employment, and other resources needed to support long-term recovery.
 - b. When using court-ordered confinement as a sanction, it may be necessary to consult with the participant's medical treatment provider in advance to ensure continuity of effective medical care within institutional formularies and other limitations.
 - c. Special populations, such as pregnant women, warrant additional considerations.
7. Drug courts should approach recovery as an ongoing process that may be initiated with the court's intervention but is ultimately supported and sustained in the community.
 - a. Drug courts should connect participants to recovery-oriented systems of care upon entry into the program.
 - b. Throughout the process, drug courts should build a participant's capacity to engage with community-based services and supports that will sustain recovery beyond program commencement.
 - c. Drug courts should consider options to offer support for participants after commencement from the docket.

Participating Organizations

The Supreme Court of Ohio would like to thank the following professionals who participated in the development of these principles:

Case Western Reserve University	Ohio Attorney General's Office
Casey Family Programs	Ohio Department of Health
Clermont County Juvenile Court	Ohio Department of Medicaid
Cuyahoga County Common Pleas Court	Ohio Department of Mental Health and Addiction Services (Ohio MHAS)
Fairfield County Common Pleas Court	Governor's Cabinet Opiate Action Team (GCOAT)
Hamilton County Common Pleas Court	Ohio Department of Rehabilitation and Corrections (ODRC)
Health Recovery Services	Ohio Judicial Conference
Hocking County Municipal Court	Ohio Medical Board
Illinois TASC - Center for Health and Justice	Ohio Society of Addiction Medicine (OHSAM)
Lorain County Alcohol and Drug Addiction Services (ADAS) Board	State of Ohio Board of Pharmacy
Mahoning County Common Pleas Court	Substance Abuse Mental Health Services Administration (SAMHSA)
Meridian Healthcare Services	Center for Substance Abuse Treatment (CSAT)
National Association of Drug Court Professionals (NADCP)	Supreme Court of Ohio
Office of National Drug Control Policy (ONDCP)	The Ohio State University
Ohio Association of County Behavioral Health Authorities (OACBHA)	U.S. Department of Health & Human Services
	Union County Common Pleas Court