

# Coordinated Opioid Recovery (CORE) Network of Addiction Care

## MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding ("MOU" or "Partnership Agreement") is entered into by and between **Alachua County Coordinated Opioid Recovery (CORE) Network of Addiction Care Partners** (collectively, "Partners", as listed by entity at end of this document) and **Lutheran Services Florida, Inc. d/b/a LSF Health Systems**, a Florida not for Profit Corporation, the Managing Entity (hereafter referred to as LSF), and is executed pursuant to the terms and conditions set forth herein. In consideration to those mutual undertakings and covenants, the Parties agree as follows:

### I. PURPOSE

This Memorandum of Understanding ("MOU") is entered into by the Parties to establish a formal partnership for the implementation and ongoing operation of the Coordinated Opioid Recovery (CORE) Network of Addiction Care, in accordance with the Florida Department of Children and Families (DCF) Guidance Document 41, incorporated by reference hereto, which can be found at following link using the applicable fiscal year: <https://www.myflfamilies.com/services/samh/samh-providers/managing-entities>. The CORE Network establishes a recovery-oriented continuum of care and support for those seeking treatment and recovery support services for substance use disorder.

### II. TERM OF AGREEMENTS

This MOU shall become effective **upon execution**, and shall remain in effect until one or all Parties terminate this agreement.

### III. SHARED VISION

The CORE Network disrupts the revolving door of substance use disorder by providing an evidence-based coordinated network of care linking individuals to community partners in a continuum of care from crisis to lifelong care in an accessible, sustainable way.

CORE Network employs a tiered approach with warm handoff provided at each level:

1. Law Enforcement
2. Rescue Response and Related Follow-up Emergency Medical Services (EMS) or Mobile Integrated Health (MIH) Services
3. 24-7 access point for stabilization/assessment
4. Receiving clinics for long-term treatment

### IV. SHARED VALUES

- a. COLLABORATION: Partners are committed to ongoing communication and collaboration to reduce barriers to treatment and improve recovery outcomes for individuals in need of treatment for substance use disorder.

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- b. COORDINATION OF CARE: Partners are committed to coordinating care through warm handoffs at transitions between all points of entry and levels of care. Partners will utilize the attached workflow to coordinate warm handoffs.
- c. ACCOUNTABILITY: Partners are committed to providing all required data and reporting required by DCF.

### **V. PARTNERSHIP AGREEMENT**

Each partner agrees to fulfill their role in the CORE Network as outlined below:

#### a. Law Enforcement

- i. Law enforcement is often the first on scene during emergencies, where fire rescue might not typically respond, enabling them to identify individuals in crisis and connect them with appropriate support services.
  - ii. Their early involvement highlights their critical role within the CORE Network, fostering collaboration and timely interventions.
  - iii. Integrating law enforcement into the CORE Network allows them to engage in community activities that inform residents about CORE Networks, how to access services and available support systems. Integrating law enforcement encourages and connects individuals to treatment and recovery support services through CORE Networks.
  - iv. These activities focus on building trust, fostering relationships, and bridging the gap between individuals in crisis and essential treatment services.
2. Rescue Response and Related Follow-up Emergency Medical Services (EMS) or Mobile Integrated Health (MIH) Services
- i. Individual in need of services is treated by first responders (fire rescue/ emergency medical services personnel).
  - ii. Treatment includes use of specialized emergency medical services protocols for overdose, acute withdrawal, and can include Medications for Opioid Use Disorder.
  - iii. Emergency medical services provides a warm handoff to the emergency department or receiving clinic/long-term medication assisted treatment provider.
  - iv. Emergency medical services may provide Medications for Opioid Use Disorder for patients while waiting for warm handoff to receiving clinic after induction performed by emergency medical services or emergency department.
  - v. CORE emergency medical service partners will coordinate with other emergency medical service agencies within in their county to follow up with patients who overdosed and received care from a non-CORE Network emergency medical services provider.

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### **3. Stabilization/Assessment**

- i. Individual receives treatment at a 24-7 access point.
- ii. Treatment options include medication-assisted treatment, which entails, at a minimum, the ability to induct individuals on buprenorphine, and issue a prescription for Medications for Opioid Use Disorder that lasts until their initial appointment with a community-based provider prior to being released from the emergency department.
- iii. Specialty-trained medical staff recommend the care best suited for the individual and a peer navigator facilitates a warm handoff to the receiving clinic for long-term treatment.

### **4. Receiving Clinics/Long-term treatment provider**

- i. Individual receives long-term-care and wrap around support.
- ii. Individual is treated by a team of licensed and certified professionals that specialize in treating addiction.
- iii. Services may include long-term management of medication assisted treatment, therapy, psychiatric services, individualized care coordination, and links to other health services.
- iv. Individuals shall receive services to address any identified social service needs.
- v. Ensure implementation of the Brief Addiction Monitor tool along with other data requirements.

### **5. Warm Handoff and Recovery Supports**

- i. Certified Recovery Peer Specialists utilize direct experience with substance use disorder and recovery to reduce stigma and increase engagement into services.
- ii. Certified Recovery Peer Specialists facilitate warm handoffs to treatment and recovery community organizations.

## **VI. ADMINISTRATIVE AND FUNDING TERMS, REQUIREMENTS AND LIMITATIONS**

The partners acknowledges and agrees that funds will be paid to the Partners for the purpose of performing the work related to this agreement as outlined in the preceding scope of work, according to their existing Network Service Provider Contract or Purchase Order Agreement with LSF.

## **VII. PLANNING AND COLLABORATION MEETINGS**

Partners are committed to attending the scheduled bi-weekly CORE Planning Meetings to provide updates, share successes, problem solve challenges and barriers and monitor outcomes. The meeting frequency will change to monthly or quarterly as implementation progresses and the Network becomes established.

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### VIII. SECURITY AND PRIVACY OF HEALTH INFORMATION

Through this MOU the parties wish to acknowledge their mutual obligations arising under laws and regulations of the following:

Health Insurance Portability and Accountability Act of 1996 (HIPAA), Privacy Regulations effective April 14, 2003, and Security Regulations effective on April 20, 2005; and (2) Confidentiality of Alcohol and Drug Abuse Patient Records (CADAPR). 45 CFR 164. 42 CFR 2.

The Partners agree to comply with all requirements of HIPAA and confidentiality guidelines in all activities related to the MOU, to maintain compliance throughout the life of the MOU, to operate any systems used to fulfill the requirements of this MOU in full compliance with HIPAA and to take no action with adversely affects the Partners' compliance with either federal statute.

To the extent required by the provisions of HIPAA and regulations promulgated hereunder, the parties assure that they will appropriately safeguard Protected Health Information (PHI), as defined by the regulations, which is made available to or obtained by the organizations in the course of their work under the MOU. For purposes of this MOU the term PHI shall include the protections under both 45 CFR 164 and 442 CFR 2. The parties agree to comply with all applicable requirements of law relating to PHI with respect to any task or other activity it performs under this MOU, including the following:

- Implementing administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the PHI either party receives, maintains, or transmits related to services in this MOU;
- Not using or further disclosing PHI other than as permitted or required by this MOU or by applicable law;
- Using appropriate safeguards to prevent use or disclosure of PHI other than as provided by this MOU or by applicable law;
- Mitigating, to the extent practicable, any harmful effect that is known to either party;
- Ensuring that any sub-contractors or agents to whom either party provides PHI agree to the same restrictions, conditions, and obligations applicable to such party regarding PHI and agrees to implement reasonable and appropriate safeguards to protect it;
- Making available the information required to provide an accounting of disclosures pursuant to applicable law; and
- At the termination of the MOU the protections in this agreement shall continue to be extended to any PHI maintained by both parties for as long as it is maintained.

The parties agree that all terms in this section of the MOU not otherwise defined shall be defined by reference to the same terms in the HIPAA in its implementing regulations.

Liability - Each party shall be responsible for any liability arising from its own conduct and shall retain all immunities and defense available pursuant to law. No party agrees to insure, defend, or indemnify any other party.

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Public Records - The Parties acknowledge that they are subject to the requirements of the §119.0701, Florida Statutes and shall maintain records and documents in accordance with same.

### **IX. MODIFICATION**

This memorandum may be modified at any time by a written modification, upon mutual agreement by both agencies.

### **XI. TERMINATION**

Termination at will. This MOU may be terminated without cause by one or all parties upon no less than thirty (30) days written notice.

### **XII. NON-COLLUSION AND ACCEPTANCE**

The undersign attests, subject to the penalties for perjury, that he/she is the agreeing party, or that he/she is the representative, agent, member, or officer of the agreeing party, that he/she has not, nor has any other member, employee, representative, agent, or officer of the division, firm, company, corporation, or Partnership representative by him/her, directly or indirectly, to the best of his/her knowledge that, entered into or offered to enter into any combination, collusion or agreement to receive or pay, and that he/she has not received or paid, any sum of money or other consideration for the execution of this agreement other than that which appears upon the face of the agreement.

**Coordinated Opioid Recovery (CORE) Network of Addiction Care**

**XIII. SIGNATURES**

In Witness Whereof, the parties have, through dually authorized representatives entered into this agreement. The parties having read and understand the foregoing terms of the Agreement do by their respective signatures dated below hereby agree to the terms thereof.

**Alachua County Board of County Commissioners**

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Signature Date

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Printed Name Title

**Coordinated Opioid Recovery (CORE) Network of Addiction Care**

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In Witness Whereof, the parties have, through dually authorized representatives entered into this agreement. The parties having read and understand the foregoing terms of the Agreement do by their respective signatures dated below hereby agree to the terms thereof.

**City of Gainesville – Gainesville Fire Rescue**

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Signature

Date

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Printed Name

Title

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In Witness Whereof, the parties have, through dually authorized representatives entered into this agreement. The parties having read and understand the foregoing terms of the Agreement do by their respective signatures dated below hereby agree to the terms thereof.

**Meridian Behavioral Healthcare, Inc.**

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Signature Date

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Printed Name Title

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**UF Health, Shands Hospital**

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Signature Date

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Printed Name Title

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**HCA Florida North Florida Hospital**

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Signature Date

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Printed Name Title

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**Lutheran Services Florida, Inc. d/b/a LSF Health Systems**

Signature	Date
Dr. Christine Cauffield	CEO
Printed Name	Title