



NHSC Site Application Process: SUD Opt-In

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[Home](#) » [NHSC Sites](#) » How to Meet NHSC Site Eligibility Requirements

How to Meet NHSC Site Eligibility Requirements

To become a National Health Service Corps (NHSC)-approved site, your facility must meet the requirements in the [NHSC Site Reference Guide](#) (PDF - 807 KB) and [NHSC Site Agreement](#) (PDF - 291 KB).

This page provides an overview of NHSC eligibility requirements.

[Give Feedback](#)

<https://nhsc.hrsa.gov/sites/eligibility-requirements>

Substance Use Disorder Opt-In Documentation

Substance Use or Addiction Counseling/Psychotherapy Services - Submit one of the following:

- ▶ Substance use disorder operating certificate issued by the state, territory, county, etc.
- ▶ Site brochure listing the on-site substance use disorder services
- ▶ Site policy that outlines on-site substance use disorder services
- ▶ Document that includes the website link and screenshot of available onsite substance use disorder services
- ▶ Other documentation that outlines on-site substance use disorder services provided on-site

Substance Use Disorder Opt-In Documentation

Medications for Opioid Use Disorder Services - Submit an attestation letter from the site Chief Executive Officer or Medical Director stating:

- ▶ That the site offers medications for opioid use disorder on-site
- ▶ The days and hours when the site offers medications for opioid use disorder services
- ▶ The size of the medications for opioid use disorder patient panel for the most recent 6-month period for which data is available.

APPENDIX F: MEDICATIONS FOR OPIOID USE DISORDER ATTESTATION LETTER
TEMPLATE

ORGANIZATION LETTERHEAD

DATE:
FROM:

RE: Attestation to provision of Medications for Opioid Use Disorder
TO: National Health Service Corps

[INSERT BRIEF OVERVIEW OF SITE (AND ORGANIZATION IF APPLICABLE) AND SERVICES PROVIDED AND PATIENT POPULATION].

This letter is to certify that [SITE NAME] located at [SITE ADDRESS] provides Medications for Opioid Use Disorder (MOUD) in an outpatient clinical setting. Medications For Opioid Use Disorder services are available to patients [INSERT DAYS AND HOURS OF OPERATION FOR MEDICATIONS FOR OPIOID USE DISORDER]. At this clinical service site, the Medications For Opioid Use Disorder patient panel for the six-month period beginning [START DATE] and ending [END DATE] included [# OF PATIENTS RECEIVING MEDICATIONS FOR OPIOID USE DISORDER].

[INK OR E-SIGNATURE OF CEO AND/OR MEDICAL DIRECTOR]

[PRINTED SIGNATOR NAME]
[POSITION/TITLE]
[ORGANIZATION]

Who Submits SUD Opt-In

Exempt Facilities

- ▶ Federally Qualified Health Centers (FQHCs)*
- ▶ Federally Qualified Health Center Look-Alikes*
- ▶ Indian Health Service Facilities*
- ▶ Federal/State Prisons*
- ▶ ICE Facilities*
- ▶ Substance Abuse and Mental Health Services Administration-Certified Opioid Treatment Programs*

Non-exempt Facilities

- ▶ All other eligible National Health Service Corps site types

For questions, email

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