**Court Letterhead**

Dear \_\_\_\_\_\_\_\_\_\_\_\_:

I am the presiding judge of the \_\_\_\_\_\_\_\_\_\_\_\_ Treatment Court in \_\_\_\_\_\_\_\_\_\_\_\_ County. Ours is one of more than 3,000 such programs in the United States dedicated to providing needed treatment and other services for persons with substance use disorders who are involved in the criminal justice, juvenile justice, or family dependency court systems. Our mission is to provide treatment in the community rather than sentencing participants to jail or prison or terminating their parental rights, and to give them the support and resources they need to live healthy, productive, and law-abiding lives.

I work with a multidisciplinary team of professionals that includes substance use and mental health treatment providers, probation officers, defense lawyers, prosecutors, and members of law enforcement. Team members contribute their observations and expertise to ensure that participants attend treatment, meet their other responsibilities in the program, receive all legal and constitutional protections to which they are entitled, and desist from dangerous or unlawful conduct. Successful graduates from our program avoid a criminal sentence or incarceration, retain or regain custody of their children, and may avoid many of the negative collateral consequences stemming from a criminal record, such as a loss of voting rights, difficulty finding a job, and barriers to obtaining subsidized housing.

Participants are tested frequently for drug and alcohol use, and come to court regularly for the team to review their progress in treatment and deliver rewards for their accomplishments, such as verbal praise, reduced supervision requirements, or token gifts; sanctions for infractions, such as verbal reprimands, community service, or brief jail detention of roughly one to five days for serious violations; and adjustments to their treatment plan if clinically indicated, such as transfer to a more intensive modality of care (e.g., residential treatment).

Approximately 15% to 30% of adult treatment court participants nationally [IF DATA ARE AVAILABLE – and \_\_\_% of participants in our program] suffer from a moderate to severe opioid use disorder and are at risk for serious repercussions from that illness, including overdose, treatment attrition or failure, and new drug-related arrests and incarcerations. We recognize that we cannot serve these individuals effectively and safely without offering medications for opioid use disorder (MOUD) as part of our core menu of needed services.

I am writing to invite you to meet with our team and consider helping us in our critical mission to save the lives of many of our fellow citizens. Let me assure you that our staff are well aware of the proven benefits of MOUD and support its use when delivered safely and appropriately by trained and credentialed medical practitioners. **We do not substitute our judgment for that of trained medical professionals and do not require our participants to change medications, reduce the medication dosage, or discontinue MOUD as a condition of entering or graduating successfully from our program. Participants receiving MOUD receive the same services as any other participant and the same benefits from graduation.** If the team has serious concerns about the treatment being delivered, we may, at most, solicit a second medical opinion from another trained and credentialed medical expert, but this happens rarely and is not anticipated in the usual course of treatment.

We do have certain expectations of medical providers working with our participants. We ask that treating providers keep us apprised of the participant’s diagnosis and clinical status, indications for MOUD or a particular medication, and progress in treatment (after participants execute all requisite releases of information and privacy notices pursuant to 42 CFR Part 2, HIPAA, and applicable state laws). This information is used to inform or adjust other conditions of the treatment court, such as drug testing or other monitoring procedures we may employ to ensure that medications are being taken safely and as prescribed. This information is also used to determine if other complementary counseling services may be indicated, such as educating participants’ family members or loved ones about MOUD or dispelling stigmatizing attitudes they may have about its use, pairing participants with peer mentors or peer recovery support specialists to facilitate their success on MOUD, or referring participants to peer-support groups that are accepting of MOUD. We also ask prescribing practitioners to be reasonably available to handle medical emergencies and instruct our staff on how to respond to medical crises. Finally, we ask that medical providers conduct prescription drug monitoring program (PDMP) inquiries [if such inquiries cannot lawfully be conducted by treatment court staff] to be certain participants are not obtaining other unauthorized controlled medications from other prescribers.

I do hope I can count on you to speak further with our team about possibly working with us. We have regular team meetings on \_\_\_\_\_\_ of each month and would be most delighted to have you join us either in person or by phone or videoconferencing. If you have any further questions or would like to schedule a time to speak, please contact my clerk, \_\_\_\_\_\_\_\_\_\_\_\_, at \_\_\_\_\_\_\_\_\_\_\_\_ to arrange a mutually convenient time for a meeting or phone call.

Most Appreciatively,

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Presiding Judge, \_\_\_\_\_\_\_\_\_\_\_Treatment Court