LANCASTER COUNTY DRUG AND ALCOHOL COMMISSION
SUPRT Instructions & Process

I.   **SUPRT-A** and **SUPRT-C** reporting tools
   a. SUPRT is an acronym for: SAMHSA Unified Performance Reporting Tool
   b. SUPRT is utilized for the purpose of collecting report performance data specific to State Opioid Response (SOR) funding
   c. SUPRTs are done at baseline, reassessment, annual assessment, and closeout
      i. A closeout SUPRT-A should be completed when an individual is no longer receiving SOR funded services
      ii. If a closeout SUPRT-A is completed, reassessment and annual SUPRT assessments are not required

II.   **SUPRT-A** MUST be completed **by the service provider** for individuals who have used substances that contain **opioids and/or stimulants**
   SUPRT-C Is to be completed **by the individual** who is receiving SOR funded services. The individual **can refuse** to complete SUPRT-C or only complete parts of the tool.
   SUPRT-A and **C** tools along with instructions for completing them can be found at this link [For Single County Authorities | Department of Drug and Alcohol Programs | Commonwealth of Pennsylvania](#)

III. **Inpatient Treatment Providers**
   a. **Staff** must complete a **baseline SUPRT-A** when an individual is admitted to services
   b. Provider will ask **the individual** to complete a **baseline SUPRT-C** (The individual can refuse to complete SUPRT-C or only complete part of the tool)
   c. **Staff** will complete the **SUPRT Coversheet** (form 10a on LCDAC website under Client Forms and Instructions)
   d. **Staff** must email paper copies of **SUPRT-A** and **C** along with the **SUPRT Coversheet** to drugalcohol@lancastercountypa.gov

   Note- (DO NOT ENTER THE SUPRT Tools in PA-WITS, LCDAC will enter ALL SUPRT tools in PA-WITS)

   e. Once the individual obtains Medicaid or is discharged from inpatient services (whichever comes first), please complete a **closeout SUPRT-A**
   f. Upon completion of the closeout SUPRT-A send a paper copy to drugalcohol@lancastercountypa.gov

IV.   **LCDAC funded Case Management Services at the Outpatient Level**

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    a. **Staff** must complete a **baseline SUPRT-A** when an individual is admitted to services

    b. Provider will ask **the individual** to complete a **baseline SUPRT-C** (The individual can refuse to complete SUPRT-C or only complete part of the tool)

    c. **Staff** will complete the **SUPRT Cover sheet** (form 10a on LCDAC website under Client Forms and Instructions)

    d. **Staff** must email paper copies of **SUPRT-A** and **C** along with the **SUPRT Coversheet** to drugalcohol@lancastercountypa.gov

Note- (DO NOT ENTER THE SUPRT Tools in PA-WITS, LCDAC will enter ALL SUPRT tools in PA-WITS)

    e. Complete a **closeout SUPRT-A** once the individual is discharged from Case Management Services

    f. Upon completion of the **closeout SUPRT-A** send a paper copy to drugalcohol@lancastercountypa.gov

V.   Individuals Prescribed Medication(s) for Opioid Use Disorder (MOUD)

    a. **Staff** must complete a **baseline SUPRT-A** when an individual applies for LCDAC funded MOUD

    b. Provider will ask **the individual** to complete a **baseline SUPRT-C** (The individual can refuse to complete SUPRT-C or only complete part of the tool)

    c. **Staff** will complete the **SUPRT Cover sheet** (form 10a on LCDAC website under Client Forms and Instructions)

    d. **Staff** must email paper copies of **SUPRT-A** and **C** along with the **SUPRT Coversheet** to drugalcohol@lancastercountypa.gov

Note- (DO NOT ENTER THE SUPRT Tools in PA-WITS, LCDAC will enter ALL SUPRT tools in PA-WITS)

    e. Once the individual obtains Medicaid or is no longer receiving LCDAC funded MOUD (whichever comes first), please complete a **closeout SUPRT-A**