



Health Services MOUD PROGRAM UPDATE North Carolina Department of Adult Correction (NCDAC)

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PROGRAM HISTORY:

MAT (MOUD) REENTRY PILOT:

- Initiated through grant funding beginning in 2021
- Partnership with NC-FIT / UNC-MAHEC
- Two facilities: Orange CC (male) / NCCIW-Minimum custody (female)
- Funding was exhausted in June 2024, and DAC has had sole responsibility for the program since

PROGRAM STRUCTURE/ ORGANIZATION:

- Medical Director / Clinical Director / Regional MOUD Practitioners / Program Manager / Nursing staff
- Regionally-aligned program; one MOUD practitioner per region, including a newly hired fellowship trained addiction medicine physician

EXPANSION UPDATE:

- Have expanded to include all custody levels
- Have expanded from two (2) to now 24 institutions, including:
 - All female facilities (NCCIW / Anson CI / WCCW and North Piedmont CRV)
 - 20 male facilities, including Robeson CRV
- **FUNDING:** Currently, there has been no funding allocated to NCDAC for implementation of the program, and all costs are at the expense of other medical programs.
 - Requested \$10.5M (recurring) funding from legislature in current budget
 - Request included funding for DAC healthcare staff, medications and additional community health workers for NC-FIT to support continuity of care after release





PROGRAM DEVELOPMENT CONSIDERATIONS:

- PRIORITIZATION OF EFFORT/ RESOURCES (Given limited funding):
 - Most critical need: Individuals releasing from custody have 40-50x increased risk of overdose death in first week(s) after reentry, and therefore our initial priority of effort is focused on those individuals
 - In-custody deaths within NCDAC from illicit drug overdose remain low, and of those, opioids are not the leading cause
 - Last opiate-related death in NCDAC custody was 21 months ago (February 2024)
 - For 2025, there have been 6 OCME-confirmed deaths from illicit drug overdoses
 - None were attributable to opiates (5-synthetic cannabinoids / 1-methamphetamine)

MEDICATION SELECTION CONSIDERATIONS:

- Safety/ security: Minimize diversion
- Staffing: Minimize detraction from other critical healthcare requirements and patient care needs
 - Persistent nursing and officer shortage
- Increased protection post-release (while continuity of care is established in the community)
- ➤ Long-acting buprenorphine remains our preferred treatment option





CURRENT PROGRAMS IN PLACE:

- MATERNITY MOUD TREATMENT: Under the care of UNC obstetricians who provide care for our pregnant patients)
- **SUSTAINED MOUD TREATMENT:** Individuals arriving on active MOUD treatment either from the community (ie to our CRVs-Confinement in Response to Violations facilities) or county jails/ detention centers. Sentences </= 90 days.
- **REENTRY MOUD:** 45 days prior to release
 - Referrals through several mechanisms:
 - Proactive screening using established criteria
 - OUD diagnosis, previous MOUD treatment, positive urine drug screens, previous overdose
 - Medical and mental health practitioners
 - Correctional Case Managers
 - Self-referrals
 - Screening by MOUD practitioners and enrollment if meet criteria
 - Treatment initiation within 30 days of release
 - Induction using sublingual-administered tablets, followed by injection within 3-5 days of release
 - NC-FIT referral
 - Continued partnership with NC-FIT and other community resources for continuity of care
- NALOXONE (NARCAN):
 - Provided to all patients initiated on MOUD treatment prior to release since program inception.
 - Currently, providing Narcan to ALL individuals releasing from custody
 - Continuation is funding-dependent



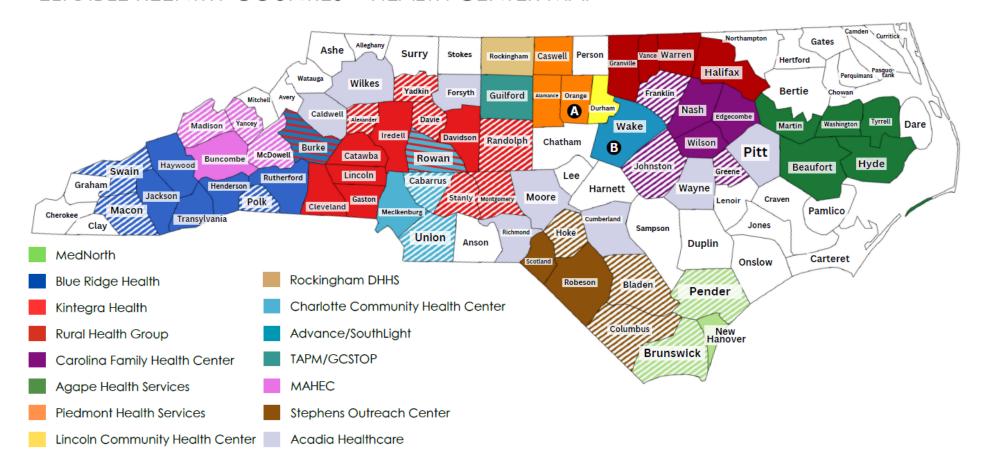
Health Services MOUD PROGRAM UPDATE- NC-FIT PARTNERSHIP Department of Adult Correction (NCDAC)



66 counties currently have services available to releasing offenders, either directly or through partnerships

MOUD Program for Non-Pregnant Adults & FIT Recovery:

ELIGIBLE REENTRY COUNTIES + HEALTH CENTER MAP







INTAKES

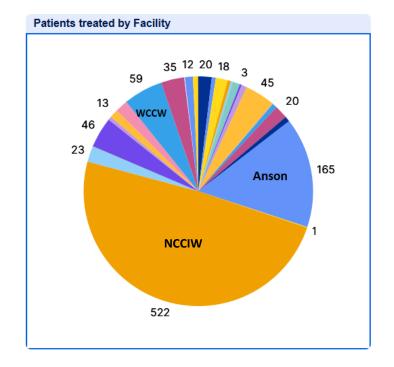
COUNTY JAILS/ DETENTION CENTERS:

- 46 NC county jails/ detention centers have transferred individuals to DAC custody on active MOUD treatment
 - 760 cases transferred to DAC from the jails on active MOUD treatment in last two years:
 - **2023**: 221 **2024**: 264 **2025**: 275

MOUD- PROCESORS -2025			
COUNTY			
Buncombe	46		
Randolph	44		
Guilford	22		
Durham	20		
New Hanover	15		
Wake 14			
Onslow	11		

RELEASES

1100 offenders have had MOUD treatment initiated prior to release in the last 12 months (88 NC counties and 11 other states)



RELEASES - TOP 20 COUNTIES			
Wake	108	Rockingham	36
New Hanover	72	Iredell	37
Randolph	59	Alamance	35
Guilford	58	Gaston	34
Buncombe	55	Cabarrus	32
Onslow	47	Cleveland	27
Surry	47	Wilkes	26
Davidson	42	Cumberland	25
Catawba	41	Wayne	24
Rowan	40	Pitt	24

13,800 doses of Narcan have been provided to individuals releasing from prison since July 2024





CONTINUED EXPANSION EFFORTS:

- Further expansion on hold (Continuing Resolution / Uncertain future funding)
- Next goals (Pending funding/ staffing):
 - Initiate Maintenance MOUD Program at both residential ACDP facilities (DART Center / Black Mountain)
 - Sustain provision of Narcan to ALL individuals releasing from DAC custody
 - Expand Reentry MOUD Program to all Institutions
 - Expand Maintenance MOUD Program (increase qualification beyond 90-day sentences)
- Future Goals will include such initiatives as expansion of medication treatment options
- More broadly:
 - Increase funding for NC-FIT to recruit additional community health workers and for expansion of services to all counties in NC
 - Post-release research is needed to track individuals after release and measure outcomes (overdose, including deaths, productivity/ quality of life and recidivism)