

EXHIBIT E

List of Opioid Remediation Uses

Andy Phillips

Attolles Law, s.c.

Schedule A

Core Strategies

States and Qualifying Block Grantees shall choose from among the abatement strategies listed in Schedule B.

However, priority shall be given to the following core abatement strategies

Please remember that these are not recommendations for how to spend, but examples of qualifying abatement strategies

A. Naloxone or Other FDA-approved Drug to Reverse Opioid Overdoses

1. Expand training for first responders, schools, community support groups and families
2. Increase distribution to individuals who are uninsured

B. Medication-Assisted Treatment (“MAT”) Distribution and Other Opioid Related Treatment

1. Increase distribution of (“MAT”) to individuals who are uninsured, or not covered
2. Provide education and awareness training to healthcare providers, EMTs, Law enforcement and other first responders

C. Pregnant and Postpartum Women

1. Expand Screening, Brief Intervention, and Referral to Treatment (“SBIRT”) services to non-Medicaid eligible or uninsured pregnant women
2. Provide comprehensive wrap-around services to individuals with Opioid Use Disorder including housing, transportation, job placement/training, and childcare

D. Expanding Treatment for Neonatal Abstinence Syndrome (“NAS”)

1. Expand comprehensive evidence-based and recovery support for (“NAS”) babies
2. Expand long-term treatment and services for medical monitoring of NAS babies and their families

E. Expansion of Warm Hand-Off Programs and Recovery Services

1. Broaden scope of recovery services to include co-occurring Substance Use Disorder (SUD) or mental health conditions
2. Hire additional social workers or other behavioral health workers to facilitate expansions

F. Treatment for Incarcerated Population

1. Provide evidence-based treatment and recovery support, within and transitioning out of the criminal justice system
2. Increase funding for jails to provide treatment to inmates with Opioid Use Disorder

G. Prevention Programs

1. Funding for media campaigns to prevent opioid use (similar to FDA's campaign to prevent youth from misusing tobacco)
2. Funding for community drug disposal programs and evidence-based prevention programs in schools

H. Expanding Syringe Service Programs

1. Provide comprehensive syringe services programs with more wrap-around service, including linkage to Opioid Use Disorder treatment, access to sterile syringes and linkage to care

I. Evidence-Based Data Collection and Research Analyzing The Effectiveness of the Abatement Strategies Within the State

Schedule B Approved Uses

Support treatment of Opioid Use Disorder and any co-occurring Substance Use Disorder or Mental Health conditions through evidence-based or evidence-informed programs or strategies.

A. Treat Opioid Use Disorder (OUD)

1. Expand availability of treatment for OUD and co-occurring conditions
2. Improve oversight of Opioid Treatment Programs (“OTP”)

B. Support People in Treatment and Recovery

1. Provide wrap-around services to individuals with OUD and co-occurring conditions, including housing, transportation, education, job placement, job training, or child care
2. Engage non-profits, faith-based communities and community coalitions to support people in treatment and recovery

C. Connections to Care

1. Ensure health care providers are screening for OUD and other risk factors
2. Support the use of Emergency Medical Systems, including peer support specialists, to connect individuals to treatment

D. Address the Needs of Criminal Justice-Involved Persons

1. Support pre-arrest or pre-arraignment diversion and deflection strategies for persons with OUD and con-occurring conditions
2. Support pre-trial services that connect individuals with OUD and any co-occurring conditions to evidence-informed treatment

E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome

1. Expand evidence-based treatment and recovery services for uninsured women with OUD and any co-occurring conditions for up to 12 months postpartum
2. Provide child and family supports for parenting women with OUD and co-occurring conditions

Schedule B Approved Uses

Support the prevention of Opioid Use Disorder and any co-occurring Substance Use Disorder or Mental Health conditions through evidence-based or evidence-informed programs or strategies.

F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids

1. Training for health care providers regarding safe and responsible opioid prescribing, dosing and tapering patients off opioids
2. Increasing electronic prescribing to prevent diversion or forgery

G. Prevent Misuse of Opioids

1. Funding media campaigns to prevent opioid misuse
2. Funding community anti-drug coalitions that engage in drug prevention efforts

H. Prevent Overdose Deaths and other Harms (Harm Reduction)

1. Increased availability and distribution of naloxone and other drugs that treat overdoses
2. Expanding, improving, or developing data tracking software and applications for overdoses/naloxone revivals

Schedule B Approved Uses

Support other strategies that may prevent or treat Opioid Use Disorder and any co-occurring disorders or mental health conditions through evidence-based or evidence-informed strategies

Part Three Other Strategies

I. First Responders

1. Education of law enforcement or other first responders regarding appropriate practices and precautions when dealing with fentanyl or other drugs
2. Provision of wellness and support services for first responders and others who experience secondary trauma associated with opioid-related emergency events

J. Leadership, Planning and Coordination

1. Provide resources to staff government oversight and management of opioid abatement programs
2. Regional planning to identify root causes of addiction and overdoses, goals for reducing harms related to the opioid epidemic

K. Training

1. Provide funding for staff training or networking programs and services to improve the capability of government, community and not-for-profit entities to abate the opioid crisis
2. Support infrastructure and staffing for collaborative cross-system coordination to prevent opioid misuse, prevent overdoses, and treat those with OUD

L. Research

1. Research non-opioid treatment of chronic pain
2. Monitoring, surveillance, data collection and evaluation of programs and strategies described in this opioid abatement strategy