# Attachment 2

# Kentucky Overdose Response Effort: Attestation to Support Access to FDA-Approved Medications for Opioid Use Disorder

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|---|---|
| Organization Name: | |
| Signature: | |
| Printed Name: | |
| Organization Role: | |
| Date: | |

As the CEO, President, or Program Director, I attest that the Organization named above will maintain compliance with the following Substance Abuse and Mental Health Services Agency (SAMHSA) funding policies:

Funds may not be expended through the grant or a subaward by any agency that would deny individuals access to their services because of their use of FDA-approved medications for the treatment of opioid use disorders (e.g., methadone, buprenorphine products including buprenorphine/naloxone combination formulations and buprenorphine mono-product formulations, naltrexone products including extended-release and oral formulations or implantable buprenorphine).

Individuals receiving services must be allowed to participate in methadone treatment rendered in accordance with current federal and state methadone dispensing regulations from an Opioid Treatment Program and ordered by a physician who has evaluated the client and determined that methadone is an appropriate medication treatment for the individual's opioid use disorder. Similarly, medications available by prescription or office-based implantation must be permitted if it is appropriately authorized through prescription by a licensed prescriber or provider.

In all cases, medications for opioid use disorder must be permitted to be continued for as long as the prescriber determines that the medication is clinically beneficial. Grantees must assure that individuals will not be compelled to no longer use medications for opioid use disorder as part of the conditions of any programming if stopping is inconsistent with a licensed prescriber's recommendation or valid prescription. As such, a policy of mandatory medication taper for all individuals after fixed duration of time would preclude program eligibility.