

Chairman Hal Rogers
House Committee on Appropriations
Opening Statement (submitted for the record)
Office of National Drug Control Policy
Hearing on FY15 Budget Request
Acting Director Michael Botticelli
March 24, 2014

Mr. Crenshaw, thank you for holding this important hearing today about the budget for our county's Office of National Drug Control Policy (ONDCP). Mr. Botticelli, thank you for being with us to discuss ONDCP's Fiscal Year 2015 budget request.

ONDCP has the critical task of coordinating our country's federal response to illicit drug use. Your budget request for Fiscal Year 2015 is \$366.7 million, constituting a \$55.2 million reduction below last year's enacted level. While I certainly understand that we must all make difficult decisions in this tough budgetary environment, I have to question the wisdom in such drastic reductions to our High Intensity Drug Trafficking Area (HIDTA) programs. HIDTAs throughout the country leverage federal, state and local enforcement resources to maximize anti-drug efforts in the areas hardest hit by drug abuse and diversion. HIDTAs have made a meaningful impact in reducing the drug trade to make our communities safer, more healthy places, and yet it has become an annual tradition for ONDCP to slice its budget to the chagrin of this Committee and so many members of the Congress. I hope we can work together to remedy this problem.

This is particularly important as we continue to fight against the abuse of prescription medications. Your predecessor visited many communities in my congressional district to learn first-hand the truly devastating impact of prescription drug abuse in small town America. Where I live, it is hard to find someone who hasn't been left in the wake of this scourge. When OxyContin first came to the market in the late 1990s, our towns were completely overrun by pills that had been marketed to doctors as completely safe and resistant to abuse. The pills that were supposed to *treat* pain were *creating* pain in the form of addiction, abuse and, tragically, the untimely overdose deaths of far too many mothers, fathers, daughters and sons.

Unfortunately, what once was sequestered in small towns of Appalachian Kentucky and West Virginia has now been characterized by the CDC as a national epidemic. Whether it's rural Vermont, the beaches of South Florida, or the glamorous streets of Hollywood, this crisis knows no socio-economic, gender or racial bounds. It is indiscriminate in its path of destruction, and it will require a coordinated, multi-pronged approach to finally put a dent in the problem. I am heartened that ONDCP has made this a priority through its National Prescription Drug Abuse strategy that focuses on education of the public and prescribers, increased utilization of state-run prescription drug monitoring programs, the proper disposal of unused medications, and strong law enforcement efforts to root out bad actors. I feel like we have made some progress in the past several years, but a number of concerns remain.

First, despite some meaningful reforms on the regulatory front, the FDA has recently taken a major step backwards by approving a pure, hydrocodone painkiller without any protections against abuse. The FDA's justifications for defying the recommendations of its own Advisory Panel against approval are incredibly weak in my estimation, and I would like to hear how you anticipate Zohydro's entrance into the market will impact both our public health officials and the law enforcement community. My region in Southern and Eastern Kentucky is bracing for a wave of abuse and addiction, and I can only pray that the fears of so many in my community do not come to fruition once this drug becomes a household name.

The approval of Zohydro is particularly egregious because with certain regulatory changes at the federal level and a number of statutory changes at the state level, some regions have experienced some much-needed relief from the challenges associated with prescription drug abuse. In Kentucky, for example, we saw overdose deaths plateau in 2012 for the first time in a decade. The FDA risks reversing this hard-fought progress by allowing a new, crushable pill to flood into our streets.

It is important to note, however, that though we have made some meaningful progress in beating back on prescription drug abuse and misuse, we have seen deaths related to heroin increase by 450% in Kentucky. I know that you have been seeing similar trends on the national scale, and this uptick in heroin abuse is incredibly alarming. It raises important questions about the availability of treatment options for those struggling with addiction and also about the strain on our law enforcement officers who must now grapple with a different type of challenge. Operation UNITE in my congressional district has always approached this problem from the perspective of investigations, treatment and education, and so I look forward to hearing from you about how ONDCP is addressing these important concerns at the federal level.

Thank you for being with us not only today, Mr. Botticelli, but for joining us in Atlanta for the National Rx Drug Abuse Summit in a few short weeks. This conference will bring together our country's best, brightest and most passionate policy makers, scientists, law enforcement officials, and advocates, and I am grateful you've taken the time to lend your voice and expertise to the cause. Thank you and I look forward to your testimony.

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