



ASAM American Society of
Addiction Medicine

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October 25, 2017

The Honorable Greg Walden
U.S. House of Representatives
2185 Rayburn HOB
Washington, D.C. 20515

The Honorable Frank Pallone
U.S. House of Representatives
237 Cannon HOB
Washington D.C. 20515

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Dear Chairman Walden and Ranking Member Pallone,

On behalf of the American Society of Addiction Medicine (ASAM), a national medical specialty society representing more than 5,100 physicians and aligned health professionals who specialize in the treatment and prevention of addiction, thank you for the opportunity to provide comments and recommendations as the House Energy and Commerce Committee considers next steps in combatting the opioid epidemic.

ASAM agrees that our nation is in a crisis. Opioid overdoses and deaths continue to devastate families and communities across the country, and it is imperative that Congress take action to increase access to evidence-based addiction treatment and recovery support services, as well as take steps to enhance prevention and early intervention efforts.

ASAM appreciates the work the Committee has done to combat the opioid epidemic. The Comprehensive Addiction and Recovery Act (CARA) and the 21st Century Cures Act have made a valuable impact in increasing access to addiction treatment and recovery services and growing the treatment workforce. However, there is much more work to be done. The Centers for Disease Control and Prevention's (CDC) provisional count of drug overdose deaths reports a 21% increase in drug overdose deaths between 2016 and 2017, largely due to the increase prevalence of potent synthetic opioids such as fentanyl.

Respectfully, ASAM offers the following recommendations for the Committee's consideration as it works to develop strategies and craft legislation to combat the opioid epidemic.

Growing the Treatment Workforce

The current addiction treatment gap will never be closed with the current addiction treatment workforce. There are simply too few physicians and



other clinicians with the requisite training to meet the treatment needs of the estimated 19.4 million Americans suffering from untreated substance use disorders. To make a meaningful and sustainable impact on the current opioid overdose epidemic, and to stave off future epidemics related to other addictive substances such as cocaine, benzodiazepines or methamphetamine, it is imperative that our nation invest in training opportunities for clinicians seeking to specialize in addiction treatment.

- ASAM urges the Committee to take up H.R. 3692, the Addiction Treatment Access Improvement Act, introduced by Rep. Paul Tonko (NY-20) and Rep. Ben Ray Lujan (NM-03). This legislation would codify the 275-patient limit for addiction specialist physicians who treat patients in the office setting with FDA-approved Schedule III-V narcotic medications, eliminate the sunset date for nurse practitioners' and physician assistants' prescribing authority, and expand the definition of 'qualifying practitioner' to include nurse anesthetists, clinical nurse specialists, and nurse midwives.
- Congress should fully appropriate \$10 million in funding for Section 9022 of the 21st Century Cures Act, which authorizes the Secretary to establish a training demonstration program within the Health Resources and Services Administration (HRSA) to award grants for medical residents and fellows to practice psychiatry and addiction medicine in underserved, community-based settings.
- ASAM supports the proposal currently being finalized by Rep. Hal Rogers (KY-05) and Rep. Katherine Clark (MA-05) to authorize loan repayment for health professionals who specialize in addiction treatment and recommends the Committee take it up as soon as possible.

Opioid Prescriber Education

ASAM supports mandatory prescriber education on safe prescribing practices and the recognition and treatment of addiction for all health professionals registered with the Drug Enforcement Administration (DEA) to prescribe controlled substances. Thus, ASAM urges the Committee take up H.R. 4075, the Improved Addiction Education Act, introduced by Rep. Brian Fitzpatrick (PA-08), Rep. Thomas MacArthur (NJ-03), Rep. Donald Norcross (NJ-01), and Rep. Ann Kuster (NH-02). This legislation would establish guidelines for the content and certification of courses on safe prescribing and identifying patients with addiction and require that clinicians who prescribe Schedule II or III drugs demonstrate they have completed a certified course on the issue. This mandated education on safe prescribing and addiction is critical, and ASAM stands ready to support the Committee in this effort.

CARA Implementation

1. The Pain Management Best Practices Inter-Agency Task Force



ASAM commends the Department of Health and Human Services (HHS) for accepting nominations for the Task Force on Pain Management. The Task Force was authorized in Section 101 of CARA to review research and best practices and recommend strategies to combat the opioid epidemic. ASAM urges HHS to swiftly convene the Task Force and include an addiction specialist as a member of the Task Force. ASAM submitted a letter of support for the nomination of addiction specialist Dr. James Murphy and believes his work on the front lines of the opioid addiction epidemic will serve as an invaluable asset to the Task Force.

2. Improving Access to Overdose Treatment

Section 107 of CARA authorizes HHS to award grants to addiction treatment programs to expand access to drugs or devices for opioid overdose reversal. ASAM commends the Substance Abuse and Mental Health Services Administration (SAMHSA) for expeditiously awarding these grants and is looking forward to seeing grantees develop protocols to connect patients who have experienced a drug overdose with appropriate treatment. ASAM urges Congress to inquire about the results of these grant programs upon their completion, so that lessons learned about effective ways to connect patients who have experienced an overdose to treatment can be shared.

3. Improving Treatment for Pregnant and Postpartum Women

ASAM commends SAMHSA and the Center for Substance Abuse Treatment (CSAT) for issuing grants under Section 501 of CARA to improve addiction treatment for pregnant and postpartum women. Pregnant and postpartum women face numerous additional barriers that inhibit their ability to access the addiction treatment they need. Thus, these grants have a particularly valuable impact in ensuring that pregnant and postpartum women have access to the appropriate levels of care.

Patient Brokering

ASAM shares the Committee's concerns about predatory marketing campaigns that advertise non-medical, non-evidence-based addiction treatment. These campaigns take advantage of patients who are often desperate to find treatment for their addiction and are not aware of what is or is not evidence-based addiction treatment. ASAM stands ready to work with the Committee to develop strategies to ensure that patients can access high quality, evidence-based care.

Thank you again for your continued attention to this pressing public health crisis. ASAM looks forward to continuing to work with the Committee to expand access to high-quality addiction treatment and expand evidence-based prevention practices.

Sincerely,

Kelly Clark, MD, MBA, DFASAM
President, American Society of Addiction Medicine