

## Full Committee Mark Up 2022

May 17, 2022

*As Prepared for Delivery*

- I would like to take the time to express my support and gratitude to members and staff who have dedicated time to working on the bills that are included in the mark up today.
- However, I am also a bit disappointed that a few bills were slipped into the mark up that we did not have the chance to discuss.
- Today, we will be considering the *Mainstreaming Addiction and Treatment Act*, the MAT Act. The MAT Act would remove the requirement that a health care practitioner apply for a separate waiver through the Drug Enforcement Administration to dispense certain narcotic drugs for maintenance and detoxification treatment purposes.

- Most people do not understand that after the SUPPORT Act passed, there was a significant decrease in overdose deaths across the country.
- However, that is no longer the case. Today, we have an enormous problem with the influx of fentanyl coming into our country through the southern border.
- The increase in fentanyl directly correlates with the rise of overdose deaths in our country. The opioid crisis, and its associated deaths, has become a fentanyl crisis. Since 2021, approximately 70% of opioid overdose deaths have been caused by illicit fentanyl.
- Our providers now have to deal with treating individuals struggling with fentanyl and opioid

use disorder (FOUD). FOUD is a multi-faceted and complex condition.

- Often, individuals with FOUD have multiple other difficult health issues and have behavioral conditions that make it difficult for providers to manage. I have personal experience dealing with these individuals, and it is a sad and stressful experience.
- As of April 28<sup>th</sup>, 2021, training is no longer required for providers to obtain an X-waiver and prescribe buprenorphine for up to 30 patients. Providers may also forgo certification and other services. The X-waiver no longer serves as a barrier to getting more physicians to prescribe treatment. Therefore, the MAT Act would drastically expand access to unregulated treatment programs.

- Prescribing medication alone is not a medication assisted treatment. If we want to see positive clinical outcomes, we need to focus on a more personalized care plan for individuals struggling with FOUUD.
- I plan to support several of the packages put forth today, but we should not aim to legislate this way in the future.