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ONE HUNDRED FOURTEENTH CONGRESS

Congress of the United States

House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

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June 10, 2015

Dr. Jerome M. Adams
Health Commissioner
Indiana State Department of Health
2 North Meridian Street
Indianapolis, IN 46204

Dear Dr. Adams:

Thank you for appearing before the Subcommittee on Oversight and Investigations on Thursday, May 21, 2015, to testify at the hearing entitled "What are the State Governments Doing to Combat the Opioid Abuse Epidemic?"

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

Also attached are Member requests made during the hearing. The format of your responses to these requests should follow the same format as your responses to the additional questions for the record.

To facilitate the printing of the hearing record, please respond to these questions and requests with a transmittal letter by the close of business on Wednesday, June 24, 2015. Your responses should be mailed to Brittany Havens, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to brittany.havens@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,

Tim Murphy

Tim Murphy
Chairman
Subcommittee on Oversight and Investigations

cc: The Honorable Diana DeGette, Ranking Member, Subcommittee on Oversight and Investigations

Attachments

Attachment 1—Additional Questions for the Record

The Honorable Michael C. Burgess

1. Complaints regarding PDMPs suggest that these systems are not real time, not widely used, and are time consuming and burdensome. In 2005, Congress enacted NASPER, with strong support from health care providers and broad, bipartisan support. However, the program has not been funded since 2010 and faced similar lack of funding prior to 2010. NASPER would provide assistance to allow PDMPs to meet consistent national criteria and allow for interoperability between state PDMPs. This is a question that I had previously asked of the CDC, due to their state monitoring efforts. However, I would like to hear the state perspective. Do you think that national criteria and standardized content would be beneficial in fostering a more attractive state-based PDMP network for providers?

2. Interoperable PDMPs would do much to decrease incidence of doctor shopping. What has been your experience with interstate accessibility of PDMPs? Are the current interstate data-sharing exchanges, such as the Prescription Monitoring Program Interconnect effective?

3. It is my understanding that obstacles to managing the opioid abuse epidemic vary widely from state to state, ranging from stigma associated with medication assisted treatments to lack of adequate data, which is sometimes associated with the need for interoperable PDMPs. Could each of you discuss what you recognize as being the biggest obstacle towards controlling the opioid epidemic in your state? Do you think that the federal response to the opioid epidemic has been sufficient?

Attachment 2—Member Requests for the Record

During the hearing, Members asked you to provide additional information for the record, and you indicated that you would provide that information. For your convenience, descriptions of the requested information are provided below.

The Honorable Tim Murphy

1. During the hearing you discussed the emergence of pain as the fifth vital sign as well as the impact of patient satisfaction surveys on the prescribing patterns in our country. Could you elaborate further on how this has contributed to the opioid abuse epidemic?

2. What are the pros and cons of giving someone Naloxone? What type of educational component should be directly linked to the expansion of this overdose reversal drug?

The Honorable David McKinley

1. You spoke in great detail about the measures you have taken in Indiana to combat this epidemic. Please share any ideas that you have that we would be able to apply to West Virginia and across the country.

2. The rate of deaths from drug overdose in America is anywhere from seven to ten times higher than it is in Europe. What are they doing right and what are we doing wrong that there is such a drastic difference in our overdose death rates?