

Rep. Tom O'Halleran – Testimony before Energy and Commerce Committee

Chairman Walden, Ranking Member Pallone, and Members of the Committee:

Thank you for allowing me to come before you today to testify on an issue that has had a devastating impact in my district.

At least two Arizonans die every day from opioid overdoses. Last year, deaths due to opioids rose 16% from the year before.

As a former law enforcement officer, some of what I see today is familiar from my time serving communities: the harrowing stories of addiction, the pain family members face, and the relationship to organized crime.

But I must tell you that what we're seeing today – the devastation that opioids have wrought on our communities – is far scarier than the drugs I fought to keep off the streets when I was a cop.

Over the summer, I held a roundtable in my district on opioids. I heard from families, first responders, local law enforcement, and health care providers. I'm here today to bring their voices to you as we commit to tackling this issue in a bipartisan and comprehensive way.

As you work to develop policies to combat this epidemic, I implore you to consider the impacts to rural communities and to tribal communities, which face unique obstacles and barriers to treatment, care, and recovery resources.

According to the CDC, American Indian and Alaska Natives have the highest death rates from opioids than any other community.

American Indian and Alaska Natives have long faced disparities when it comes to resources for mental health care and substance abuse.

That's why funding created by the 21st Century Cures Act, in addition to expanded Medicaid coverage in Arizona have been crucial in helping families get the care they need.

As many of you know, access to critical health care services in rural communities and across Indian Country can be scarce, and often requires families to travel long distances.

Providers in rural America have benefitted from expanded Medicaid coverage, and are now seeing lower rates of uninsured patients than before. In fact, in states that expanded Medicaid, the share of uninsured substance use or mental health disorder hospitalizations fell from 20% in 2013 to about 5% in 2015.

The increase in coverage has allowed rural providers, who operate on the thinnest of margins, to help keep their lights on and their doors open. In communities across my district, these providers are the backbone of care.

If Congress repeals that coverage, rural providers will close their doors and patients who need help now will face fewer choices. We need to work with each other to build on the progress we've made, not go backwards.

We need to give states, local law enforcement, and tribes more resources and more flexibility to test what works. But we must approach this problem comprehensively, and with a robust commitment to those we represent. For too long, care and resources have been delivered in silos, and those looking for help have had to navigate a patchwork of programs, many of which were never created to address the scope of the problems we're seeing today.

I urge your Committee to thoughtfully consider these issues and how they affect communities across rural and tribal communities, whose voices must be heard when it comes to this crisis.

Thank you.