ONE HUNDRED FIFTEENTH CONGRESS

Congress of the United States

House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

2125 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515-6115

Majority (202) 225–2927 Minority (202) 225–3641

April 20, 2018

Ms. Jessica Hulsey Nickel Founder, President, and CEO Addiction Policy Forum 718 7th Street, N.W. Washington, DC 20001

Dear Ms. Nickel:

Thank you for appearing before the Subcommittee on Health on March 21, 2018, to testify at the hearing entitled "Combatting the Opioid Crisis: Prevention and Public Health Solutions."

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. To facilitate the printing of the hearing record, please respond to these questions with a transmittal letter by the close of business on May 4, 2018. Your responses should be mailed to Zack Dareshori, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, DC 20515 and e-mailed in Word format to zack.dareshori@mail.house.gov.

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

Sincerely

Michael C. Burgess, M.D.

Chairman

Subcommittee on Health

cc: The Honorable Gene Green, Ranking Member, Subcommittee on Health

Attachment

Attachment — Additional Questions for the Record

The Honorable Brett Guthrie

Currently there are only three types of medications approved for the treatment of opioid use disorders (methadone, naltrexone and buprenorphine), yet according to a recent analysis in Health Affairs fewer than 3% of all licensed substance abuse treatment facilities in the country are able to offer all three. In other words, we have a lot of one-size-fits-all treatment programs.

- 1. What's wrong with our current, fragmented and siloed approach in the treatment of opioid use disorders a problem?
- 2. How do you believe the Comprehensive Opioid Recovery Centers, or "CORCs," would help to correct this problem?
- 3. In your work with family members of people who unfortunately have lost their battle with addiction as a result of an opioid overdose, how common is it that their loved one completed treatment without being offered a range treatment options and the necessary support services?
- 4. One of the unique provisions of CORCs is the requirement that they provide job-training and job placement assistance. Why might this be an important component within a treatment center?