

**Opening Statement of Chairman Walden
Subcommittee on Health
“Combating the Opioid Crisis: Improving the Ability of Medicare and
Medicaid to Provide Care for Patients”
April 11, 2018**

Today marks our third and final legislative hearing this spring aimed at advancing targeted, timely, and bipartisan legislative solutions to help combat the opioid crisis.

This committee has already been instrumental in working in a bipartisan manner to devote a record amount of federal resources towards the opioid epidemic, namely through the passage of CARA and 21st Century Cures last Congress. This hearing continues our work to address a crisis that has impacted virtually every neighborhood across our country.

At roundtables throughout Oregon, most recently in Pendleton and Madras, I’ve met with the people on the frontlines of this fight and with those who have lost a friend or loved one to this epidemic. These meetings are crucial to our efforts to put forth concrete solutions to stem the tide and save lives. With more than 100 Americans estimated to die each day from opioid overdoses, we simply must do more.

We must continue to push forward, and I would respectfully ask everyone involved – stakeholders and members alike – to push beyond their comfort zones and think creatively and boldly about how we can help. The status quo is not

acceptable. The unprecedented scope of the opioid crisis requires an unprecedented response.

To that end, over the span of two days, we will consider 34 bills from members on both sides of the aisle. These bills have a common theme – they seek improve the roles Medicaid and Medicare can play in helping combat the crisis.

This marks the largest number of bills noticed in a legislative hearing before this committee. But the number and scope of bills helps underscore how important this topic is to all of us and how many good ideas there are to help patients. While considering this many bills requires some extra work from members and staff, I think we should see this not as an inconvenience, but as an opportunity.

Just look at how many promising ideas there are to help patients who are served by these two programs—who represent roughly one in three Americans. Certainly, both programs play key roles in identifying at-risk beneficiaries, providing treatment, and decreasing overdose deaths. The bills we will consider today cover a range of important issues – including provisions to: remove barriers to treatment, improve data to identify and help at-risk patients, provide incentives for greater care coordination and enhanced care.

Many of the bills before us build on efforts in Medicaid and Medicare that are already yielding positive benefits for patients and reducing dependency or misuse of opioids.

As we move forward, we look forward to stakeholders and others providing feedback on the proposals before us. The input of the Congressional Budget Office

will also help shape our decision-making on several pieces of legislation before us today.

But our aim remains the same – moving through committee in regular order to advance legislation on the House Floor before the Memorial Day recess. We have seen announcements in sister committees recently as they are also developing and advancing legislation, and we look forward to continuing our work with them to get a robust, bipartisan package of proposals to the White House for signature in the coming months. The urgency of the crisis demands our response, and the challenges facing our communities demands action.

I'd like to thank our witnesses for taking the time to share their expertise with us today and tomorrow, and for our members – on both sides of the aisle – for making this fight a top priority.