

Statement for the Record – H.R. 3832, “Veteran’s Opioid Abuse Prevention Act”

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Committee on Veterans’ Affairs Subcommittee on Health

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Mr. Chairman, thank you for the opportunity to speak today on behalf of H.R. 3832, the “Veterans Opioid Abuse Prevention Act.”

According to the Centers for Disease Control, 249 million prescriptions were written by healthcare providers in 2013. The Department of Veterans’ Affairs healthcare system is the nation’s largest healthcare provider, and because of this, is in a unique position to help curb the opioid epidemic by using every tool available when a veteran is prescribed an opioid. The “Veterans Opioid Abuse Prevention Act” gives VA health care providers access to these valuable tools.

H.R. 3832 comes directly from recommendations from the nation’s top policy makers. The White House’s Commission on Combatting Drug Addiction and the Opioid Crisis recommended last July that the VA lead efforts to have all state and federal Prescription Drug Monitoring Programs – known as PDMPs – share information. The interim report cited multiple published best practices for PDMPs, and has identified interstate data sharing among PDMPs as a “top priority” to ensure that healthcare professionals have a better understanding for prescribing practices for their patients.

H.R. 3832 directs the VA to have healthcare providers participate in sharing prescribing data across a network of interstate prescription drug monitoring programs. PDMPs are state-based networks which healthcare providers and pharmacists can access when writing or filling a prescription. PDMP data includes types of medications dispensed, fill dates, and dosage amounts. PDMPs improve a clinician’s ability to follow good prescribing practices for at-risk patients who may have a pattern of prescription opioid abuse. In 2011, the National Board of Pharmacy created a national platform of Prescription Monitoring Programs — or PMPs – called “PMP Interconnect” – which allows states to share PDMP data across state lines securely. Today, 44 states and Washington D.C. participate in PMP Interconnect, with more soon to follow suit.

I have veterans in my district who are desperate for opioids because well-meaning but underinformed doctors have time and time again have overprescribed opioids for them. I can guarantee everyone sitting on this dais today has veterans back home suffering for the same reason. And let me be clear – this is not something anyone up here on this dais or in this room should accept as good treatment for our veterans. The tragedy in these situations is that so many of them are preventable by just giving doctors the right tools to decide on how to prescribe an opioid safely. We must make sure this is a priority.

H.R. 3832 implements the Commission's recommendation by granting providers the ability to use an interstate PDMP platform for the betterment of our veterans who are at risk of opioid abuse. Every doctor has a duty to help the sick according to one's own ability and judgment, and we as a Committee have a duty to ensure veterans have access to doctors who are enabled to make the best clinically-informed judgments for veterans.

I encourage my colleagues to support H.R. 3832, and I yield my time back to the Chairman. Thank you.