

Statement of Congressman Bruce Poliquin (ME-02)
Committee on Energy and Commerce
Subcommittee on Health
Member Day: Testimony and Proposals on the Opioid Crisis
October 11, 2017

Good afternoon, Chairman Burgess, Ranking Member Green and Members of the Subcommittee. I appreciate the opportunity to discuss an issue that touches so many Maine families, including my own. An increasing number of Mainers are severely affected by drug abuse and addiction. In 2015 alone, 269 Mainers died of an opioid overdose. It is clear that we must work to solve this serious problem impacting Maine and the rest of our nation.

I am a founding member of the Bipartisan Task Force to Combat the Heroin Epidemic. Since 2015, we have been a force for action, addressing the epidemic by learning from professionals in communities impacted by addiction. We have welcomed panelists, who have been able to provide valuable, real-life insight to help us work toward common-sense solutions. The Task Force helped bring awareness to the nation's need to address drug prevention and treatment, as well as to ensure that law enforcement officers have the tools necessary to fight this epidemic. I'm pleased that Congress responded to this crisis by passing the Comprehensive Addiction and Recovery Act.

This legislation was a crucial step towards recovery for our families, friends, and communities, but was just one of many steps on the long road ahead. I am here today to discuss the importance of advancements in tools for prevention, enhanced reforms for bad actors, and our role in fostering interagency communication.

In order to help ensure that patients are not abusing prescriptions, Maine has set strict limits on opioid prescriptions. In addition to mandating the use of the prescription monitoring program, Maine requires prescribers to check the program when first prescribing, and every 90 days thereafter, requires dispensers to check the respective state's program when dispensing to an out-of-state resident and for a prescription written by an out-of-state provider. The dispenser also needs to check the program if an individual is paying with cash or if the person has not had a prescription for an opioid medication in the previous 12 months.

These additional requirements create significant barriers to those attempting to abuse the system. Looking forward, it is crucial that we work toward the sharing of data between states to further deter system abuse and decrease the number of patients who will develop an addiction. As a member of the House Veterans Affairs Committee, I, along with Rep. Dunn, Rep. Tenney, Rep. Arrington and Rep. Tonko, have introduced the Veterans Opioid Abuse Prevention Act to ensure that providers from the Department of Veterans Affairs also use the program when prescribing controlled substances.

There will always be bad actors, but it is our responsibility to remain steadfast in our work to close any loopholes for abuse. As the Energy and Commerce Committee continues to examine synthetic opioids, it is crucial that law enforcement receive the resources they need to hold accountable those who illegally manufacture fentanyl. The death rate for synthetic opioids other than methadone has significantly increased in Maine. The Task Force has discussed how local law enforcement can collaborate with the federal and state

governments as well as public health agencies to combat the use of synthetic opioids.

Furthermore, we have discussed how the investigative arm of the Department of Homeland Security works with federal, state and local law enforcement to investigate criminal organizations that are participating in the trafficking of synthetic drugs. I hope to continue these discussions as we review and modify best practices.

As we continue to work towards addressing today's crisis and future threats, I would like to thank you for your time and attention to these critical issues.