

Remarks at Energy and Commerce, Subcommittee on Health

Thank you Chairman Burgess and Ranking Member Green for inviting me here today to discuss the epidemic of opioid addiction, abuse, and overdose that is ravaging our communities.

I represent the people of Illinois's Tenth District including parts of Cook and Lake Counties, and the opioid crisis has hit our neighborhoods hard. In 2015, there were 42 heroin-related deaths in Lake County, a seven-percent increase over the previous year. In Cook County, which includes the City of Chicago, opioid overdoses increased by 87.4 percent between 2013 and 2016.

Over the same period, we've witnessed a troubling increase in fentanyl – a synthetic opioid which is even more deadly than heroin and whose overdoses are often fatal.

In the face of these challenges, I'd like to recognize the Lake County Opioid Initiative and Chicago Area Opioid Task Force, along with other area organizations, for their work to prevent opioid abuse, addiction, overdose, and death.

In this epidemic, our adversary is constantly shifting, so we must ensure our doctors are up-to-date with the most recent best practices and research for preventing and treating this disease.

Earlier this year I introduced a bill called the **Preventing Opioid Abuse Through Continuing Education or Opioid PACE Act**, that would require providers who treat patients with prescription opioids for pain management to complete 12 hours of continuing medical education (CME) every three years, linked to the renewal of the provider's Drug Enforcement Agency (DEA) license.

In an effort to cut down on overprescribing, the CME would focus on pain management treatment guidelines and best practices, early detection of opioid use disorder, and the treatment and management of patients with opioid use disorder.

I'm proud that a modified version of this bill requiring continuing education medical professionals

at the Department of Defense was included as an amendment in the National Defense Authorization Act. Our men and women in uniform are not immune from the damages of opioid addiction. In fact, the National Institute of Health reports rates of prescription opioid misuse are higher among service members than among civilians due to the use of these drugs to treat the symptoms of PTSD and chronic pain.

As we seek new legislative solutions, I urge my colleague to also support the programs we have in place to fight back.

In particular, the Affordable Care Act greatly increased our ability to counter the opioid epidemic by expanding Medicaid and requiring individual

market policies cover services related to treating substance use disorders.

The states with the highest rates of drug overdose deaths are also the states that would suffer from a rollback of the Medicaid expansion. Simply put, repealing the ACA would add fuel to the fire of the opioid epidemic.

I urge my colleagues to consider new solutions to address this crisis – including the Opioid PACE Act – and preserve the programs we have in place to counter the epidemic.