

House Energy and Commerce Committee – Health Subcommittee
“Member Day: Testimony and Proposals on the Opioid Crisis”
Testimony of Congressman Paul Tonko
October 10, 2017

Thank you, Mr. Chairman.

We are a nation in crisis. The opioid epidemic is wreaking havoc in our communities at an unprecedented scale, with the CDC estimating 64,000 dead from drug overdoses in 2016, an astonishing 21 percent increase from the previous year.

This public health disaster is costing us more lives annually than at the peak of the AIDS epidemic – as many lives as gun violence and traffic accidents combined.

If this Congress doesn't find additional solutions to turn the tide on the opioid epidemic, we will be complicit in this American tragedy.

I'm here today to offer two such legislative solutions.

First, I introduced the Addiction Treatment Access Improvement Act, H.R. 3692, with my good friend Congressman Ben Ray Lujan. This legislation would expand access to medication-assisted treatment by allowing certified nurse midwives and other advanced practice registered nurses to prescribe buprenorphine. In addition, this legislation would codify the 2016 rule that allowed physicians to treat up to 275 patients with buprenorphine and eliminate the sunset of a provision that allows non-physician providers to prescribe MAT.

The Addiction Treatment Access Improvement Act would particularly benefit pregnant and postpartum women who are struggling with addiction and improve outcomes for the over 13,000 infants that are born each year with neonatal abstinence syndrome.

Despite the expansion of medication-assisted treatment in Comprehensive Addiction and Recovery Act, there is still a significant shortage in treatment capacity, resulting in individuals waiting months or years to receive effective addiction treatment. Only 20 percent of patients who need treatment for opioid use disorder are currently receive it.

The Addiction Treatment Access Improvement Act would address this treatment gap and save lives. This committee should act on this bipartisan legislation without delay.

The second bill I'd like to discuss is the Medicaid Reentry Act, which is a targeted attempt to address the problem of overdose deaths that occur post-incarceration.

Studies have shown that individuals who are released back into the community post-incarceration are roughly 8 times more likely to die of an overdose in the first two weeks post-release compared to other times. The risk of overdose is elevated during this period due to reduced physiological tolerance for opioids among the incarcerated population, a lack of

effective addiction treatment options while incarcerated and poor care transitions back into the community.

The Medicaid Reentry Act would grant states flexibility to restart Medicaid coverage for Medicaid-eligible individuals 30-days pre-release. By allowing Medicaid benefits to restart prior to release, states would be able to more readily provide effective addiction treatment pre-release and would allow for smoother transitions to community care, reducing the risk of overdose deaths post-release.

This legislation would not expand Medicaid eligibility in any way, it would simply grant states new flexibility to restart an individual's Medicaid benefits 30-days earlier than allowed under current law. This increased flexibility would dovetail with innovative reentry programs already being championed by Republicans and Democrats in states across the country and would give individuals reentering society a fighting chance to live a healthier, drug-free life.

Let me just end with an urgent plea for action and bipartisanship. I know that many of the ideas that this committee will hear today would, in normal times, be met with the typical partisan objections and end up stuck in a procedural morass.

These are not normal times. When your house is on fire, you don't look to see whether the firemen are wearing red or blue uniforms before they turn the hoses on.

If we are truly going to make a difference in this crisis and save lives we have to have a big heart and an open mind.

I thank my colleagues for their time and for their consideration of the legislation I have presented.