



ASAM American Society of
Addiction Medicine

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Addiction Medicine Specialists Urge Senate Leaders to Pass Comprehensive Opioid Legislation

Rockville, MD (August 20, 2018) – Today, the American Society of Addiction Medicine (ASAM) – the nation’s leading authority on evidence-based treatment and prevention for the chronic disease of addiction — and 28 of its chapters — [sent a letter](#) to Senate Majority Leader Mitch McConnell and Senator Minority Leader Chuck Schumer urging the US Senate to pass swiftly comprehensive legislation to address the opioid overdose epidemic.

Noting that regarding addiction involving opioid use, discrimination and stigma have “crippled our national response to a public health crisis of historic proportions,” the letter states that effectively addressing the opioid overdose epidemic “requires a new approach to the delivery of substance use prevention, addiction treatment, and recovery support services. Considering all the lives we have lost and all the lives we still risk losing, the time for change is now.”

Additionally, the letter outlines specific provisions supported by the addiction medicine community that prioritize the following key areas: expanding the addiction workforce, standardizing treatment practices, and ensuring appropriate coverage of addiction treatment that recognizes and facilitates the full continuum of care for patients.

“These provisions collectively recognize that, when it comes to addiction medicine, we must do three things: Teach it, standardize it, and cover it,” the letter states, urging Senators to include the following critical provisions in its opioid legislative package:

Teach It

Successfully reversing the course of the opioid epidemic will require a transformation of the current addiction treatment workforce. To close the current addiction treatment gap, it is imperative that the US incentivize clinicians to work in programs and practices that specialize in the treatment of substance use disorder and provide clinicians with the requisite skills and

knowledge to care for the millions of Americans suffering from untreated substance use disorder.

- **Sections 7071, 7072 of H.R.6, the *SUPPORT for Patients and Communities Act* - H.R. 5102, *Substance Use Disorder Workforce Loan Repayment Act*:** Incentivizes treatment providers to practice in high-need areas by offering student loan repayment opportunities.
- **Section 3003 of H.R. 6 - H.R. 3692 – *Addiction Treatment Access Improvement Act*:** Makes permanent buprenorphine prescribing authority for nurse practitioners and physician assistants; temporarily expands the definition of “qualifying practitioners” to include nurse anesthetists, clinical nurse specialists, and nurse midwives, and increases the immediate number of patients certain providers can treat at a time with buprenorphine.
- **Sections 406 and 407 of S. 2680:** Creates a new, voluntary pathway for physicians to obtain a waiver to treat patients with opioid use disorder using FDA-approved medications by taking approved courses during medical school and establishes a grant program to support the development of medical school curricula on addiction medicine.
- **The Opioid Workforce Act of 2018 (S. 2843) –** Expands the number of graduate medical education positions in teaching hospitals that have approved programs in addiction medicine and related fields.

Standardize It

“When we say, ‘treatment works,’ we are not referring to every approach that claims to be treatment,” the letter states. “Rather, as physicians and other clinicians who specialize in the treatment of addiction, we are specifically referring to those interventions that have scientific evidence to support their effectiveness.”

- **Section 7121 of H.R.6 - H.R. 5272:** Directs the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide explicit guidance on evidence-based practices in its substance use disorder treatment and prevention grant programs.
- **H.R. 6082 – *The Overdose Prevention and Patient Safety Act*:** Carefully expands the circumstances under which a patient’s medical records related to substance use can be shared among healthcare providers, plans, and healthcare clearing houses to enable safe, high-quality, coordinated care.

Cover It

The current physician payment system offers little support for the coordination of behavioral, social, and other support services that patients being treated for opioid use disorder often need

in addition to their medication. This segregation and lack of coordination has contributed to patient difficulty receiving comprehensive care.

- **Section 2007 of H.R. 6:** Expands access to Medication Assisted Treatment (MAT) in Medicare through bundled payments made to opioid treatment programs.
- **Section 5031, 5032 of H.R. 6 - H.R. 4005, the Medicaid Reentry Act:** Requires the US Department of Health and Human Services to produce a report of best practices for states to consider in healthcare-related transitions for inmates in correctional institutions.
- **Section 6041, 6042 of H.R. 6 - H.R. 5605, the Advancing High-Quality Treatment for Opioid Use Disorders in Medicare Act:** Creates a voluntary Alternative Payment Model (APM) demonstration program for opioid use disorder treatment to incentivize the delivery of evidence-based treatment.
- **Sections 11001-11002 of H.R. 6 – HR 5797 – IMD CARE Act – With Expansion:** Currently provides a limited repeal of the Medicaid IMD exclusion to enable broader access to residential treatment for individuals with opioid use disorder or cocaine use disorder and should be expanded to substance use disorder. In addition, eligible residential treatment programs should be required to provide evidence-based, substance use disorder treatment, including offering FDA-approved medications for the treatment of addiction.

“Each one of us has friends or relatives who have lost loved ones to this epidemic or suffered personally from this tragedy. It will take all of us working together to stem the tide of this public health emergency that claimed 42,249 lives in 2016 alone. Only then, will we be able to ensure our fathers, mothers, sisters, brothers, and friends get the help they need and are treated with the dignity we all deserve,” concludes the letter.

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About ASAM

The American Society of Addiction Medicine, founded in 1954, is a professional society representing over 5,700 physicians, clinicians, and associated professionals in the field of addiction medicine. ASAM is dedicated to increasing access and improving the quality of addiction treatment, educating physicians and the public, supporting research and prevention, and promoting the appropriate role of physicians in the care of patients with addiction. For more information, visit www.ASAM.org.