

April 23, 2018

The Honorable Lamar Alexander  
Chairman  
Senate Committee on Health, Education,  
Labor and Pensions  
428 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member  
Senate Committee on Health, Education,  
Labor and Pensions  
428 Dirksen Senate Office Building  
Washington, DC 20510

Dear Chairman Alexander and Ranking Member Murray:

On behalf of the physician and medical student members of the American Medical Association (AMA), I am writing to commend your bipartisan leadership for taking action to provide critically needed support for efforts to address the ongoing opioid epidemic. Ending this public health crisis requires leadership and commitment from all health care stakeholders, policymakers, law enforcement, the justice system, and local communities. It also requires strong, dedicated physician leadership and commitment by all physicians to reduce prescription opioid-related mortality and increase access to treatment for opioid use disorder (OUD), while, at the same time, ensuring that patients with pain receive appropriate treatment.

In 2015, the AMA launched the AMA Opioid Task Force and continues to work with state and specialty medical societies to address legislation and regulation ranging from developing effective prescription drug monitoring programs (PDMPs), continuing medical education, restrictions on treatment for OUD as well as enactment of naloxone access and Good Samaritan overdose protections. The medical profession's collective efforts are having an impact, but much more work remains to end this epidemic. The legislation you have introduced, S. 2680, the "Opioid Crisis Response Act of 2018," which will be considered in committee next week, is consistent with the ongoing efforts of the AMA and our colleagues in the medical profession to fight this epidemic and will provide critical support and tools for those efforts.

We are particularly pleased that the Opioid Crisis Response Act includes the following provisions:

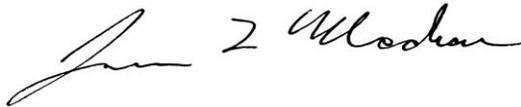
- reauthorization and improvement of grants to states and Indian tribes for prevention, response, and treatment of the opioid crisis that were originally authorized in the 21<sup>st</sup> Century Cures Act, for three more years;
- the Advancing Cutting Edge Research Act;
- improvement of detection and seizure of illicit drugs, such as fentanyl, by strengthening coordination activities between the Food and Drug Administration and the U.S. Customs and Border Protection;
- authorization of a grant program for comprehensive opioid recovery centers, as well as a grant program to provide care, overdose reversal medication, and follow-up services to an individual after an overdose;

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- clarification of the Drug Enforcement Administration's ability to develop a regulation to allow qualified providers to prescribe controlled substances through telemedicine, while maintaining proper safeguards;
- requirement that the Secretary of the Department of Health and Human Services examine and report on the impact of federal and state laws regulating the length, quantity, or dosage of opioid prescriptions; information on the impact of such limits on overdose rates and diversion is sorely lacking and is needed to better inform policymakers and regulators considering and evaluating policy proposals;
- requirement that the Centers for Disease Control and Prevention educate health care providers, patients, and the public about the partial fill option authorized in the Comprehensive Addiction and Recovery Act in 2016;
- prevention of overdoses of controlled substances through support for states and localities to improve their PDMPs and implement other evidence-based prevention strategies; and
- reauthorization of the National All Schedules Prescription Electronic Reporting Reauthorization Act to allow states to develop, maintain, or improve PDMPs and improve the interoperability of PDMPs with other states and with other health information technology.

The AMA is committed to reversing the opioid epidemic and ensuring that our patients have access to treatment for OUD as well as appropriate, compassionate treatment for pain. We are pleased to support the Opioid Crisis Response Act of 2018, and look forward to working with you and your colleagues to advance this legislation through committee and the Senate.

Sincerely,

A handwritten signature in black ink, appearing to read "James L. Madara". The signature is fluid and cursive, with a large initial "J" and "M".

James L. Madara, MD