

May 6, 2022

The Honorable Frank Pallone, Jr.
Chairman
Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Anna Eshoo
Chairwoman
Health Subcommittee of the Committee on
Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Cathy McMorris Rodgers
Ranking Member
Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Brett Guthrie
Ranking Member
Health Subcommittee
2125 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Pallone, Ranking Member McMorris Rodgers, Chairwoman Eshoo, and Ranking Member Guthrie:

On behalf of the physician and student members of the American Medical Association (AMA), I am writing to express our opposition to H.R. 2067, the “Medication Access and Training Expansion (MATE) Act of 2021” (Trahan, D-MA/Carter, R-GA). This legislation would require most physicians and other prescribers of controlled substances, unless otherwise exempted, to complete mandatory education on opioid and other substance use disorders (SUDs). While the AMA strongly supports efforts by the medical community to enhance education for physicians to help reverse the nation’s drug overdose epidemic, the AMA has long-standing policy opposing federal intervention or mandates on educational standards for physicians, especially as a condition of licensure. The mandate also directly interferes with state licensing and professional accrediting bodies that have responsibility to design and implement appropriate educational standards for the training of physicians.

There is no evidence showing that a one-time mandated education requirement, as the MATE Act requires, will have the result that we all want: improving patient outcomes and stopping patients from dying from a drug-related overdose. In response to increasing numbers of people dying from a drug-related overdose, beginning in 2016-2017, states began enacting mandates to restrict opioid prescribing, use state prescription drug monitoring programs and CME mandates. These policy interventions have not had a positive effect on reducing drug-related overdose or increasing access to evidence-based treatment for SUDs. This includes the 40 states with mandated CME requirements. A one-time training mandate for substance use disorders, no matter how well-intentioned, will not have a meaningful impact on reducing drug-related overdose for the same reasons state-level CME mandates have not had the desired effect.

For education to be effective, it has to be foundational. This is why we support the grant program to help medical schools and residency programs to implement enhanced education efforts. The AMA has strongly supported medical schools and residency programs to incorporate training on the broad range of issues essential to end the epidemic, i.e., substance use disorders, pain management, and harm reduction. The

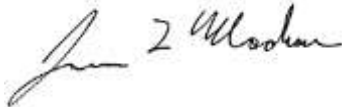
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AMA also continues to urge physicians to enhance their education on SUD care, pain management and evidence-based harm reduction initiatives. In addition, the AMA regularly promotes and updates more than 400 state, specialty, and other resources provided by the nation's medical societies and other leading institutions.

To increase access to evidence-based care and improve patient outcomes, the AMA is working to remove health insurer prior authorization barriers, address inadequate SUD networks and strongly supports enforcement of ongoing mental health/SUD parity violations. We stand ready to work with Congress to take action on evidence-based measures to end the epidemic—removing the x-waiver, finalizing SUD telemedicine, providing the U.S. Department of Labor increased authority to enforce mental health and SUD parity laws, removing arbitrary thresholds for patients with pain, increasing access to harm reduction initiatives, and making naloxone available over the counter. These measures will help patients and physicians.

We appreciate the changes that were made to the MATE Act from the version introduced in the 116th Congress, specifically regarding the deletion of detailed curricular content and the addition of a practitioner grant program. However, the AMA is unable to support this legislation.

Sincerely,

A handwritten signature in black ink, appearing to read "James L. Madara". The signature is fluid and cursive, with the first name "James" being the most prominent.

James L. Madara, MD

cc: The Honorable Lori Trahan
The Honorable Earl L. "Buddy" Carter