



**American Hospital
Association®**

800 10th Street, NW
Two CityCenter, Suite 400
Washington, DC 20001-4956
(202) 638-1100 Phone
www.aha.org

April 26, 2016

The Honorable Fred Upton
Chairman
House Committee on Energy and Commerce
United States House of Representatives
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Frank Pallone, Jr.
Ranking Member
House Committee on Energy and Commerce
United States House of Representatives
2322A Rayburn House Office Building
Washington, DC 20515

Dear Chairman Upton and Ranking Member Pallone:

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, and our 43,000 individual members, the American Hospital Association (AHA) thanks you for your leadership in moving forward legislation to help stem the epidemic of opioid abuse. Hospitals see firsthand the effects of opioid dependency and overdoses in the communities we serve across the nation. We would like to share our views regarding opioid legislation pending before the committee.

Our members' experiences in treating those affected by opioid use disorders have demonstrated that only a multifaceted approach that invests in education, prevention, treatment and rehabilitation can end the public health crisis that threatens the health and lives of millions of Americans. While many state legislatures have enacted measures to address the crisis, we believe that a coordinated nationwide strategy, including grant programs to support the efforts of state and local governments and community-based organizations, and expanded use of prescription drug monitoring programs (PDMPs), is required. We also support increasing training for first responders to administer life-saving medications, such as Naloxone, to those experiencing overdoses. Additionally, we support efforts to increase access to medication-assisted treatment (MAT), which has been proven effective in treatment and recovery, including increasing the number of patients that physicians can treat annually.

We would note that hospitals and health systems play a distinct role in helping to address the opioid epidemic – a role that others cannot fulfill. Hospitals treat patients for pain, physicians and other practitioners employed by and affiliated with hospitals prescribe opioids, and individuals present at emergency departments every day seeking opioids. Research has demonstrated that more than 60 percent of emergency department visits are for acute or chronic pain, and, as a result, emergency department physicians are among the top prescribing physician specialties of opioids. For these reasons, we urge you to amend H.R. 4641, legislation by Reps. Susan Brooks (R-IN) and Joseph P. Kennedy, III (D-MA) providing for the establishment of an interagency task force on best practices for pain management, to include a representative from the hospital field in Section 1(c).



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The AHA is pleased to support H.R. 4982, the Examining Opioid Treatment Infrastructure Act of 2016, authored by Rep. Bill Foster (D-IL) and Ranking Member Frank Pallone (D-NJ), which would require the Government Accountability Office (GAO) to evaluate and report on the capacity, availability and need for inpatient and outpatient treatment for opioid use disorders in the United States.

Additionally, the AHA supports H.R. 3680, the Co-Prescribing to Reduce Overdoses Act of 2015, authored by Reps. John Sarbanes (D-MD) and Larry Bucshon (R-IN). This bill would establish federal grants to carry out co-prescribing of overdose reversal drugs in areas experiencing significant numbers of opioid overdoses and deaths. We are encouraged by the initial success of nascent co-prescribing programs in some jurisdictions and this legislation would provide much-needed federal support so that additional communities devastated by opioid overdoses might establish similar programs.

Research has shown the incidence of infants born dependent on opioids has increased at least 300 percent during the past 15 years, jeopardizing the early development of newborns. For that reason, we strongly support H.R. 3691, the Improving Treatment for Pregnant and Postpartum Women Act of 2015, introduced by Reps. Ben Ray Lujan (D-NM) and Paul Tonko (D-NY). H.R. 3691 would reauthorize essential residential treatment programs for pregnant and postpartum women and provide grants to states to address the growing epidemic of infants suffering from opioid dependency. This legislation is a positive step toward addressing this critical public health issue. We also urge the Committee to approve H.R. 4978, the Nurturing and Supporting Healthy Babies Act, sponsored by Reps. Evan Jenkins (R-WV) and Cheri Bustos (D-IL), which would require a GAO evaluation of neonatal abstinence syndrome and the availability of treatment for this condition in the nation's Medicaid programs.

Because opioids are now the most-prescribed class of medications in the United States and unused medications that are not properly disposed of can lead to opioid abuse and dependency, the AHA strongly supports H.R. 4599, the Reducing Unused Medications Act of 2016, introduced by Reps. Katherine Clark (D-MA) and Steve Stivers (R-OH) to permit partial filling of schedule II prescriptions under specific circumstances.

We also urge the Committee to approve H.R. 4976, the Opioid Review Modernization Act of 2016, introduced by Reps. Sean Patrick Maloney (D-NY) and Leonard Lance (R-NJ), which would provide for more stringent Food and Drug Administration review of new opioids without abuse-deterrent properties, recommendations for labeling of pediatric opioids, and recommendations for prescriber education.

In conclusion, the AHA appreciates the efforts of the Committee to tackle this issue, and we look forward to continuing to work with you on multifaceted efforts to stem the opioid abuse epidemic.

Sincerely,

Thomas P. Nickels
Executive Vice President