

March 5, 2020



D.C. Update: Rob Morrison testifies before congress, Bipartisan Task Force releases 2020 legislative agenda, and more

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### Meet the Member

#### Kirk Lane, NASADAD Member

Arkansas State Director Kirk Lane was appointed by Governor Asa Hutchinson on August 7<sup>th</sup>, 2017. Prior to this, Director Lane served as the Chief of Police for the City of Benton, Arkansas until his retirement in August of 2017. He attended the University of Virginia and University of Arkansas-Little Rock and is a graduate of the Arkansas Law Enforcement Academy, the Drug Enforcement Administration's (DEA) Drug Commander's Academy, FBI LEEDA and the FBI National Academy 197<sup>th</sup> session. Director Lane currently serves as the Chairperson of the Arkansas Alcohol and Drug Coordinating Council and is on the Board of Directors for the Arkansas Prescription Monitoring Program Advisory Board and the National Community Anti-Drug Coalitions of America (CADCA). Director Lane is an active member of the Arkansas State Working Group for Prescription Drug Abuse Prevention and received the 2012 Marie Interfaith Leadership Award for his work in this area.



News from NASADAD  
Robert Morrison testifies before the  
Health Subcommittee within the  
House Energy & Commerce  
Committee



On Tuesday, March 3, Robert Morrison, Executive Director/Director of Legislative Affairs, testified before the Health Subcommittee within the House Energy & Commerce Committee. The Subcommittee, which is led by Chairwoman Anna Eschoo (D-CA) and Ranking Member Michael Burgess (R-TX), held a hearing titled, "[Combating an Epidemic: Legislation to Help Patients with Substance Use Disorders.](#)" This was a legislative hearing focused on several bills that aim to address substance use disorders (SUDs). The goal of this type

of legislative hearing is to help lawmakers gather information about the subject matter of particular measures in anticipation that the subcommittee/committee will eventually mark up and vote on the legislation in the future.

### Legislation that was discussed:

The specific legislation covered during the hearing included:

- H.R. 2466, the "State Opioid Response Grant Authorization Act"—Would authorize SOR grant program for 5 years.
- H.R. 5572, the "Family Support Services for Addiction Act of 2020"—A bill to establish a grant program for family community organizations that provide support for individuals struggling with substance use disorder and their families.
- H.R. 1329, the "Medicaid Reentry Act"—This bill allows Medicaid payment for medical services furnished to an incarcerated individual during the 30-day period preceding the individual's release.
- H.R. 2281, the "Easy MAT for Opioid Addiction Act"—This bill requires the DEA to revise regulations to allow a practitioner to administer up to a three-day supply of narcotic drugs to an individual at one time for purposes of relieving acute withdrawal symptoms while the individual awaits arrangements for opioid use disorder treatment.
- H.R. 2482, the "Mainstreaming Addiction Treatment Act of 2019"—Would remove the DATA-2000 waiver requirement for health care providers to prescribe buprenorphine. The bill also requires the Secretary of HHS to conduct a national campaign to educate practitioners about the changes and to encourage providers to integrate substance use treatment into their practices.
- H.R. 2922, the "Respond to the Needs in the Opioid War Act" or the "Respond NOW Act"—Would create a \$25 billion Opioid Epidemic Response Fund to provide \$5 billion annually over five years targeted to numerous key federal agencies (SAMHSA, CDC, HRSA, NIH).
- H.R. 3414, the "Opioid Workforce Act of 2019"—Would fund additional Medicare-supported graduate medical education positions in hospitals that have or are in the process of establishing approved residency programs in addiction medicine, addiction psychiatry or pain management.
- H.R. 3878, the "Block, Report, And Suspend Suspicious Shipments Act of 2019"— Would create additional requirements for drug manufacturers and distributors who discover a suspicious order for controlled substances.
- H.R. 4141, the "Humane Correctional Health Care Act"—This bill allows States to cover inmates of public institutions under Medicaid.
- H.R. 4793, the "Budgeting for Opioid Addiction Treatment Act"—This bill imposes a one cent per milligram fee on the sale of active opioids by the manufacturer, producer, or importer. Any resulting revenues would be invested in the SAPT Block Grant.
- H.R. 4812, the "Ensuring Compliance Against Drug Diversion Act of 2019"—

Would amend the Controlled Substances Act to provide for the modification, transfer, and termination of a registration to manufacture, distribute, or dispense controlled substances or list I chemicals.

- H.R. 4814, the "Suspicious Order Identifying Act of 2019"—Would require DEA registrants to electronically report on every sale, delivery, or disposal (other than dispensing by a practitioner) by registrants of any controlled substance within 30 days.
- H.R. 4974, the "Medication Access and Training Expansion Act of 2019" or the "MATE Act of 2019"—Would standardize substance use disorder training to ensure that all prescribers of controlled medications possess baseline knowledge in evidence-based addiction prevention and treatment.
- H.R. 5631, the "Solutions Not Stigmas Act of 2019"—Would authorize the Secretary of HHS to provide grants to medical and other health profession schools to expand or develop education and training programs for substance use prevention and treatment, and for other purposes.

#### **Witnesses:**

The hearing was split into two panels: one panel with witnesses from the federal government and a second panel featuring non-federal witnesses. In addition to Mr. Morrison, witnesses on the second panel included:

- Michael P. Botticelli, Executive Director, Grayken Center for Addiction, Boston Medical Center; former Director of the Office of National Drug Control Policy (ONDCP); former NASADAD Member for State of Massachusetts
- Smita Das, MD, PhD, MPH, Addiction Psychiatrist, Dual Diagnosis Clinic; Clinical Assistant Professor, Psychiatry and Behavioral Sciences, Stanford University School of Medicine
- Patty McCarthy, Chief Executive Officer, Faces & Voices of Recovery
- Margaret B. Rizzo, Executive Director, JSAS HealthCare, Inc.
- Shawn A. Ryan, MD, MBA, Chair, Legislative Advocacy Committee, American Society of Addiction Medicine (ASAM)

The witnesses on the first panel included:

- ADM Brett P. Giroir, M.D., Assistant Secretary for Health and Senior Advisor to the Secretary on Opioid Policy, U. S. Department of Health and Human Services (HHS)
- Kimberly Brandt, Principal Deputy Administrator for Policy & Operations, Centers for Medicare & Medicaid Services (CMS)
- Thomas W. Prevoznik, Deputy Assistant Administrator, Diversion Control Division, Drug Enforcement Administration (DEA)

#### **NASADAD's testimony:**

Mr. Morrison's testimony focused on the critical role of the State alcohol and drug agencies and the Association's overarching principles as they relate to federal legislative efforts. Key points included:

- Ensure that provisions work through, and coordinate with, State alcohol and drug agencies to promote efficiency and avoid creating parallel or duplicative systems of care.
- Ensure consistent, predictable and sustained federal resources to avoid creating a fiscal cliff with longer 3-5 year grant cycles.
- Continue to work to address the opioid crisis but elevate efforts to address all substance use disorders by gradually transitioning funds from the State Opioid Response (SOR) grant program to the Substance Abuse Prevention and Treatment (SAPT) Block Grant.
- Maintain investments in SAMHSA as the lead agency within HHS focused on substance use disorders program and service delivery.
- Work to ensure that any new legislation complements and builds from the current system.

Mr. Morrison also expressed appreciation for the Subcommittee's work to pass the Comprehensive Addiction and Recovery Act (CARA) of 2016, the 21st Century Cures Act of 2016, and the SUPPORT for Patients and Communities Act of 2018. In

particular, he thanked lawmakers for the State Opioid Response (SOR) grant program and noted the importance of the program for States.

Some of the specific questions that members of the Health Subcommittee asked Mr. Morrison included:

- Rep. Matsui (D-CA) asked Mr. Morrison the extent to which methamphetamine is a problem in States.
- Rep. Welch (D-VT) asked Mr. Morrison the extent to which workforce issues remain a challenge in States.

A recording of the hearing and witnesses' written testimonies can be accessed [here](#).



### Around the Agencies

#### [Bipartisan Opioid Task Force releases 2020 legislative agenda](#)

Leaders of the Bipartisan Opioid Task Force, Rep. Anne Kuster (D-NH), Rep. Brian Fitzpatrick (R-PA), Rep. Donald Norcross (D-VA), and Rep. Martha Roby (R-AL), recently released their 2020 [legislative agenda](#). The set of 27 bills, all with bipartisan support, covers issues related to the opioid crisis including prevention, treatment, rural communities and workforce development, law enforcement, criminal justice reform, global interdiction, children and families, veterans, and prescriptions. The agenda includes a brief overview of the bill, sponsors and cosponsors, and the status of the bill.

#### [Bureau of Justice Assistance now accepting applications for the Adult Drug Court and Veterans Treatment Court grant program](#)

The Department of Justice's Bureau of Justice Assistance recently released a funding opportunity announcement (FOA) for the fiscal year (FY) 2020 Adult Drug Court and Veterans Treatment Court Discretionary Grant Program. As described in the announcement, the program provides financial and technical assistance to States, State courts, local courts, units of local government, and federally recognized Indian tribal governments to enhance drug courts or implement new veteran's treatment courts. These courts work to integrate substance use treatment, random drug testing, sanctions and incentives, and transitional services to individuals involved with the criminal justice system. A webinar specific to tribal populations will be held on March 6, 2020 and a general webinar will be held on March 16, 2020. Applications for the grant program are due on May 14, 2020 and more information, including the FOA, can be found [here](#).

#### [Coronavirus resources at CDC](#)

The Centers for Disease Control and Prevention (CDC) has posted [documents](#) related to the coronavirus on its web page. The documents target different audiences – including schools/communities, healthcare professionals, health departments, long-term care facilities, and others. There are also print resources (flyers, posters) designed to share with your stakeholders that include "Share Facts about COVID-19" and "What you need to know." The web page includes an optional sign-up for a weekly newsletter focused exclusively on the coronavirus.

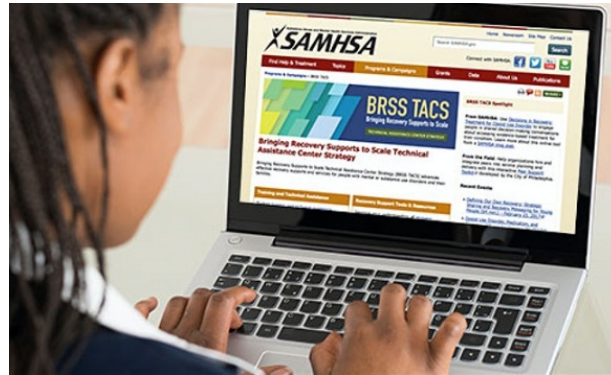
#### [SAMHSA accepting applications for Tribal Opioid Response Grants](#)

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently released a funding opportunity announcement (FOA) for the fiscal year (FY) 2020 Tribal Opioid Response (TOR) Grants. This program addresses the opioid

crisis in tribal communities by increasing access to culturally appropriate and evidence-based treatment, including medication-assisted treatment (MAT). Additionally, stimulants have been added as an allowable use of funds. The anticipated total available funding is \$50 million over 2 years and will be awarded to approximately 200 tribes or tribal organizations. Applications are due May 4, 2020 and more information can be found [here](#).

### **SAMHSA announces virtual event focused on treatment and recovery services for older adults**

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) announced a Recovery LIVE! virtual event that will focus on treatment and recovery services for



older adults. In light of the growing population of older adults in the United States, mental health and substance use disorder (SUD) providers will need to adapt their services to meet the needs of this population. As described by BRSS TACS, older adults often face barriers to care, including misdiagnosis, lack of knowledge, and challenges in accessing services. Presenters will discuss the need for treatment and recovery services for older adults, highlight best practices, and share how recovery support services can improve outcomes. The virtual event will be held on March 26, 2020 from 2:00pm-3:00pm and registration can be found [here](#).

### **Bureau of Justice Assistance accepting applications for Improving Reentry for Adults with Substance Use Disorders Program**

The Department of Justice's (DOJ) Bureau of Justice Assistance (BJA) is now accepting applications for the fiscal year (FY) 2020 Improving Reentry for Adults with Substance Use Disorders Program. The program aims to establish, expand, and improve treatment for individuals with substance use disorders, including medication-assisted treatment (MAT), during incarceration and upon reentry into the community. Funding can also be used to establish prison-based family treatment programs for incarcerated parents of minor children or pregnant women. States, units of local government, federally recognized Indian tribal governments, and nonprofit organizations are all eligible to apply. Additionally, all applicants are required to certify that any treatment program proposed in their application coordinates and consults with the Single State Authority (SSA) for Substance Abuse. Applications are due April 27, 2020 and the funding opportunity announcement (FOA) can be found [here](#).

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### **Research Roundup**

#### **Study examines opioid prescriptions by dentists and recommends future steps**

A new [study](#) funded by the Agency for Healthcare Research and Quality (AHRQ) examined the opioid prescribing habits of dentists. The study assessed the appropriate prescribing of opioids based on the Centers for Disease Control and Preventions (CDC) guidelines for pain management. Researchers found that, between 2011 and 2015, 29% of prescribed opioids exceeded the recommended guidelines for the appropriate management of acute dental pain. Additionally, 53% of dentists exceeded the recommended days' supply and the proportion of opioids that exceeded the recommended dosage increased over the study period. The study concluded that interventions specific to dentists, such as pharmacist-delivered audits and mandatory searches of the State prescription drug monitoring programs (PDMPs), could be helpful in reducing inappropriate prescriptions for opioids.

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