



March 6, 2019

The Honorable Roy Blunt  
Chairman  
Subcommittee on Labor, HHS, Education &  
Related Agencies  
U.S. Senate Appropriations Committee  
136 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member  
Subcommittee on Labor, HHS, Education &  
Related Agencies  
U.S. Senate Appropriations Committee  
156 Dirksen Senate Office Building  
Washington, D.C. 20510

The Honorable Rosa DeLauro  
Chairwoman  
Subcommittee on Labor, HHS, Education &  
Related Agencies  
U.S. House Appropriations Committee  
2358 Rayburn House Office Building  
Washington, DC 20515

The Honorable Tom Cole  
Ranking Member  
Subcommittee on Labor, HHS, Education and  
Related Agencies  
U.S. House Appropriations Committee  
1016 Longworth House Office Building  
Washington, DC 20515

**Re: FY 2020 Appropriations Recommendations Related to Strengthening the Addiction Service Workforce**

Dear Chairman Blunt, Ranking Member Murray, Chairwoman DeLauro, and Ranking Member Cole,

The undersigned mental health, substance use disorder, and health care professional organizations in the Coalition to Stop Opioid Overdose (CSOO) are writing today to urge your support for the funding of important addiction prevention, treatment, harm reduction, and recovery support programs aimed at strengthening the addiction service workforce in Fiscal Year 2020. CSOO is a coalition of diverse organizations representing health care and social service professionals and advocates united around common policy goals that will lead to meaningful and comprehensive policies to reduce opioid overdose deaths.

An estimated 20.7 million Americans aged 12 or over needed treatment for substance use disorder (SUD) in 2017, but only about 4 million Americans aged 12 or over received any form of treatment for SUD.<sup>1,2</sup> Without certain strategic investments, this gap will never close and many more lives will be lost. While last year's landmark opioid legislation recognized the need for thoughtful solutions, critical funding is now needed to increase the ranks of a qualified, well-trained SUD workforce and increase equitable access to evidence-based prevention, treatment, harm reduction, and recovery support services.

Building a robust SUD workforce is critical and should be a cornerstone of any federal response to the opioid overdose epidemic. In its 2017 report, the President's Commission on Combating Drug Addiction and the Opioid Crisis stated: "Adequate resources are needed to recruit and increase the number of addiction-trained psychiatrists and other physicians, nurses, psychologists, social workers, physician assistants, and community health workers and facilitate

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deployment in needed regions and facilities.” In addition, the Commission reported that there are only about 4,400 actively practicing certified addiction specialist physicians in the United States – far below the 6,000 that were needed based on an estimate in 2009, long before the peak of the opioid overdose epidemic.<sup>3</sup> The 2019 National Drug Control Strategy echoes this workforce need citing “critical shortages in trained and professional addiction service providers” as a key factor contributing to the treatment gap.<sup>4</sup> Without a stronger SUD workforce, far too many patients seeking recovery from addiction will continue to lack access to care.

The programs detailed in our attached document of appropriations recommendations support CSOO’s mission to reduce opioid overdose deaths by increasing the addiction treatment workforce, bolstering prevention and harm reduction efforts that help reduce the negative health consequences of drug use, and increasing access to high-quality treatment and support services. By advancing sustainable, comprehensive public policies and expanding federal investment throughout our health care system for SUD, we will move closer to a future where all Americans living with addiction receive the high-quality care they need and deserve. To this end, as you consider how best to appropriate federal funding for FY20, the undersigned members of the Coalition to Stop Opioid Overdose respectfully request that you incorporate the attached recommendations related to strengthening the addiction service workforce into the FY20 Labor-HHS appropriations bill.

Sincerely,

American Academy of Pediatrics  
American Psychological Association  
American Society of Addiction Medicine  
A New PATH (Parents for Addiction Treatment & Healing)  
CADA of Northwest Louisiana  
California Consortium of Addiction Programs & Professionals  
Connecticut Certification Board  
HIV Medicine Association  
International Certification & Reciprocity Consortium  
National Alliance for Medication Assisted Recovery  
National Association for Behavioral Healthcare  
National Council for Behavioral Health  
National Safety Council  
Shatterproof  
Student Coalition on Addiction  
Treatment Communities of America  
Young People in Recovery

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<sup>1</sup> Substance Abuse and Mental Health Services Administration. (2018). Key substance use and mental health indicators in the United States: Results from the 2017 National Survey on Drug Use and Health (HHS Publication No. SMA 18-5068, NSDUH Series H-53). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/>

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<sup>2</sup> As used in this context, receipt of any form of treatment for SUD includes treatment received at any location (e.g., hospital, inpatient or outpatient rehabilitation facility, mental health center, emergency room, private doctor's office, prison, jail, or a self-help group).

<sup>3</sup> The President's Commission on Combating Drug Addiction and the Opioid Crisis. (2017).

<sup>4</sup> United States. Office of National Drug Control Policy. "National Drug Control Strategy." (2019)



**FY 2020 Appropriations Recommendations Related to  
Strengthening the Addiction Service Workforce**

<b>Program</b>	<b>Appropriations Bill</b>	<b>Agency</b>	<b>FY20 Recommendation</b>
Loan Repayment Program for Substance Use Disorder Treatment Workforce (authorized in Section 7071 of the SUPPORT Act)	Labor-HHS	Health Resources and Services Administration (HRSA)	\$25 million
Mental Health and Substance Use Disorder Workforce Training Program (authorized in Section 9022 of the 21 <sup>st</sup> Century CURES Act)	Labor-HHS	HRSA	\$10 million
HRSA's Public Health Workforce Development's "Public Health and Preventive Medicine" Line Item	Labor-HHS	HRSA	\$24 million
Program to Support Coordination and Continuation of Care for Drug Overdose Patients (authorized in Section 7081 of the SUPPORT Act)	Labor-HHS	Department of Health and Human Services (At-Large)	\$10 million
Emergency Department Alternatives to Opioids Demonstration Program (authorized in Section 7091 of the SUPPORT Act)	Labor-HHS	Department of Health and Human Services (At-Large)	\$10 million
Building Communities of Recovery (BCOR)	Labor-HHS	Substance Abuse and Mental Health Services Administration (SAMHSA)	\$10 million
Peer support technical assistance center (Section 7152 of the SUPPORT Act)	Labor-HHS	SAMHSA	\$1 million
Reducing Underage Drinking through Screening and Brief Intervention  <i>Grants to pediatric health care providers in accordance with the specifications outlined in section 9016 of the 21st Century Cures Act. Training grants should focus on screening for underage drinking, opioid use, and other drug use.</i>	Labor-HHS	SAMHSA	\$3 million
Certified Community Behavioral Health Clinics (CCBHCs) Expansion Grants	Labor-HHS	SAMHSA	\$150 million
Eliminating Opioid Related Infectious Diseases (reauthorized and expanded in Section 7141 of the SUPPORT Act)	Labor-HHS	Centers for Disease Control and Prevention (CDC)	\$40 million