August 30, 2019

The Honorable Paul Tonko  
The Honorable David McKinley  
U.S. House of Representatives  
U.S. House of Representatives  
2369 Rayburn HOB  
2239 Rayburn HOB  
Washington, DC 20515  
Washington, DC 20515

Re: H.R. 3925 - Reducing Barriers to Substance Use Treatment Act

Dear Representative Tonko and Representative McKinley,

The undersigned organizations in the Coalition to Stop Opioid Overdose (CSOO) are writing today to voice our support for your bill – H.R. 3925, Reducing Barriers to Substance Use Treatment Act. CSOO is a coalition of diverse organizations united around common policy goals to reduce opioid overdose deaths. CSOO members aim to elevate the national conversation around opioid overdose and work to enact meaningful and comprehensive policy changes that support evidence-based prevention, treatment, harm reduction, and recovery support services.

The morbidity and mortality statistics related to addiction, and in particular addiction involving opioid use, are grim. In 2017, there were a record 70,237 drug overdose deaths in the United States, two-thirds of which have been linked to opioids. Moreover, for the third year in a row, life expectancy in the United States declined largely because of rising drug overdose deaths. Despite these alarming statistics, substantial barriers persist that prevent patients from accessing evidence-based treatment for opioid use disorder (OUD).

A robust body of research shows that medication-assisted treatment (MAT), including the use of medications such as buprenorphine, naltrexone, and methadone, is highly effective for the treatment of OUD; however, utilization management techniques, such as prior authorization, work to delay the prescription of this life-saving treatment. In fact, a recent survey of physicians found that 92% of them reported care delays due to prior authorization, with 64% reporting a delay of at least one business day. Delays in the provision of MAT significantly impact patient outcomes. A delay of just one day is enough time for a patient to relapse, overdose, or suffer a myriad of other experiences that can adversely affect their treatment outcome.

The undersigned members of CSOO strongly support your legislation, H.R. 3925, which would prohibit state Medicaid programs, beginning in October 1, 2020, and ending September 30, 2025, from imposing prior authorizations or other types of utilization control policies or procedures on medications approved to treat OUD, including, with respect to the provision of those medications, counseling services and behavioral therapy. Elimination of prior
authorization for MAT will help ensure that patients have timely access to MAT and is a critical step to curbing the mortality of the opioid overdose epidemic.

Thank you for introducing H.R. 3925. We look forward to working with you to secure its passage.

Sincerely,

AIDS United
American Association of Nurse Practitioners
American Psychological Association
American Society of Addiction Medicine
CADA of Northwest Louisiana
Central City Concern
Connecticut Certification Board
Faces and Voices of Recovery
National Alliance for Medication Assisted (NAMA) Recovery
National Council for Behavioral Health
National Safety Council
Illinois Association of Behavioral Health
National Association for Behavioral Healthcare
National Health Care for the Homeless Council
Partnership for Drug Free Kids + Center of Addiction
Shatterproof
SMART Recovery
The American Osteopathic Academy of Addiction Medicine
The Kennedy Forum
Treatment Communities of America
Young People in Recovery

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\(^1\) Substance Abuse and Mental Health Services Administration. "Key substance use and mental health indicators in the United States: Results from the 2017 National Survey on Drug Use and Health". September 2018.

\(^2\) Dyer Owen. US life expectancy falls for third year in a row BMJ 2018; 363 :k5118