March 10, 2020

The Honorable Roy Blunt  
Chair  
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  
Chair  
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 2021 Appropriations Recommendations Related to Strengthening the Addiction Service Workforce

Dear Chair Blunt, Ranking Member Murray, Chair 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 increased funding of important addiction prevention, treatment, harm reduction, and recovery support programs aimed at strengthening the addiction service workforce in Fiscal Year 2021. 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 21.2 million Americans aged 12 or over needed treatment for substance use disorder (SUD) in 2018, but only about 3.7 million Americans aged 12 or over received any form of treatment for SUD. Without certain strategic investments, this gap will never close and many more lives will be lost. 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 deployment in needed regions and facilities.” The 2020 National Drug Control Strategy echoes this workforce need citing “[a]dditional efforts must be made to build an addiction medicine
infrastructure and expand the addiction profession and peer recovery support services workforces.” Without a stronger SUD workforce, far too many people seeking remission and 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 FY21, 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 FY21 Labor-HHS appropriations bill.

Sincerely,

Addiction Professionals of North Carolina
American College of Emergency Physicians
American Osteopathic Academy of Addiction Medicine
American Psychiatric Association
American Society of Addiction Medicine
CADA of Northwest Louisiana
California Consortium of Addiction Programs & Providers
Center on Addiction
Connecticut Certification Board
Faces & Voices of Recovery
International Certification & Reciprocity Consortium
National Alliance of State & Territorial AIDS Directors (NASTAD)
National Association for Behavioral Healthcare
National Council for Behavioral Health
National Safety Council
SMART Recovery
Shatterproof
The Kennedy Forum
Young People in Recovery

## FY 2021 Appropriations Recommendations Related to Strengthening the Addiction Service Workforce

<table>
<thead>
<tr>
<th>Program</th>
<th>Agency</th>
<th>FY20 Enacted</th>
<th>FY21 Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loan Repayment Program for Substance Use Disorder Treatment Workforce <em>(authorized in Section 7071 of the SUPPORT Act)</em></td>
<td>Health Resources and Services Administration (HRSA)</td>
<td>$12 million</td>
<td>$25 million</td>
</tr>
<tr>
<td>Mental Health and Substance Use Disorder Workforce Training Program <em>(authorized in Section 9022 of the 21st Century CURES Act)</em></td>
<td>HRSA</td>
<td>$26.7 million</td>
<td>$30 million</td>
</tr>
<tr>
<td>Certified Community Behavioral Health Clinics (CCBHCs) Expansion Grants</td>
<td>Substance Abuse and Mental Health Services Administration (SAMHSA)</td>
<td>$200 million</td>
<td>$250 million</td>
</tr>
<tr>
<td>Building Communities of Recovery (BCOR)</td>
<td>SAMHSA</td>
<td>$8 million</td>
<td>$10 million</td>
</tr>
<tr>
<td>Program to Support Coordination and Continuation of Care for Drug Overdose Patients <em>(authorized in Section 7081 of the SUPPORT Act)</em></td>
<td>SAMHSA</td>
<td>$4 million</td>
<td>$10 million</td>
</tr>
<tr>
<td>Emergency Department Alternatives to Opioids Demonstration Program <em>(authorized in Section 7091 of the SUPPORT Act)</em></td>
<td>SAMHSA</td>
<td>$5 million</td>
<td>$10 million</td>
</tr>
<tr>
<td>Support for enforcement of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008</td>
<td>Employee Benefits Security Administration (EBSA)</td>
<td>N/A</td>
<td>$15 million</td>
</tr>
</tbody>
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