

The Honorable Barbara Mikulski,
Chairwoman
Committee on Appropriations
U.S. Senate
503 Hart Senate Office Building
Washington, DC 20510

The Honorable Richard Shelby, Ranking
Member
Committee on Appropriations
U.S. Senate
304 Russell Senate Office Building
Washington, DC 20510

The Honorable Hal Rogers, Chairman
Committee on Appropriations
U.S. House of Representatives
2406 Rayburn House Office Building
Washington, DC 20515

The Honorable Nita Lowey, Ranking
Member
Committee on Appropriations
U.S. House of Representatives
2365 Rayburn House Office Building
Washington, DC 20515

December 1, 2014

Dear Chairmen and Ranking Members:

As you know, prescription drug abuse is a growing public health crisis. Approximately 6.1 million Americans abuse or misuse prescription drugs, and more than 60 Americans die every day from a prescription drug overdose. Overdose deaths involving prescription painkillers have quadrupled since 1999 and now outnumber deaths from all illicit drugs, including heroin and cocaine, combined. We appreciate the work the Committee has done to address this epidemic.

As a diverse group of stakeholders interested in the manufacture, distribution and appropriate use of opioid medications, we are working toward a comprehensive and balanced policy strategy to reduce abuse and promote treatment options. The FY15 appropriations process presents a number of opportunities to build on work already underway. We urge you to include the below measures in the final FY15 appropriations agreement.

Labor-HHS-Education and Related Agencies Appropriations Act (LHHS)

Substance Abuse and Mental Health Services Administration (SAMHSA):

- **Substance Abuse Prevention and Treatment Block Grant:** The Substance Abuse Prevention and Treatment Block Grant Program (SABG) distributes funds to 60 eligible states, territories, the District of Columbia, and the Red Lake Band of Chippewa Indians of Minnesota to plan, carry out, and evaluate substance abuse prevention, treatment and recovery support services provided for individuals, families, and communities impacted by substance abuse and substance use disorders (SUD). The Senate FY15 LHHS bill includes \$1.8 billion for SABG, which reflects the president's budget request and is level funding. *We urge you to include at least \$1.8 billion in funding for SABG, to ensure access to treatment for those suffering from addiction.*
- **Expanding Access to Rescue Medication:** The Senate LHHS bill includes report language encouraging SAMHSA to continue to support initiatives that improve access to naloxone for public health and law enforcement professionals, captured in a letter sent in April to State agencies clarifying that block grant funds may be used for the purchase of naloxone, as well as for assembling and disseminating overdose kits. *We urge the*

Committee to include this language in the final report and continue working to expand access to lifesaving rescue medications.

- **Expanding Access to Medically Assisted Treatment:** The Senate LHHS bill includes report language specifying that \$12 million of the Center for Substance Abuse Treatment (CSAT) discretionary grants should be used to expand treatment services for patients with heroin or opioid dependence, and that medically assisted treatment is an acceptable use of CSAT grants. *We urge the Committee to include this language in the final report and to continue working to expand access to medically assisted treatment for opioid addiction.*
- **National All Schedules Prescription Drug Electronic Reporting Act (NASPER):** The NASPER program, which is intended to provide grants to states to establish prescription drug monitoring programs (PDMPs), has not been funded since FY 2010. PDMPs are the best monitoring tool that exists currently and can deter inappropriate use of opioids. However, much more can be done to improve the effectiveness and utilization of PDMPs and make them easier to use. Both NASPER and the Hal Rogers PDMP program (see below) are critical to ongoing efforts to strengthen PDMPs. *We recommend that the Congress provide \$2 million in funding for NASPER, the amount appropriated in FY10, although we note the dire need for funding and hope that next year the full authorized level of \$10 million will be appropriated.*

Centers for Disease Control and Prevention (CDC), Injury Center: The CDC Injury Center provides assistance with prevention efforts to states with high burdens of prescription drug overdose. The Senate FY 2015 LHHS bill directs \$15.6 million in new funding for prescription drug abuse activities at the Injury Center help implement programs to target high-use patients and inappropriate prescribing, implementing guidelines to improve prescribing behaviors, and enhancing insurance mechanisms to improve prevention.” *We urge you to include \$15.6 million for the CDC Injury Center to expand its work to prevent prescription drug abuse.*

Health Resources and Services Administration (HRSA): To increase access to rescue medications, the Senate FY15 LHHS bill included \$5.3 million for HRSA’s Rural Access to Emergency Devices Program, a program used to purchase automatic external defibrillators (AEDs). The report language specified that the nearly \$2 million increase is intended to be used for competitive grants for the purchase of Naloxone, and to train first responders and lay rescuers in their use. *We urge you to approve this \$5.3 million and the accompanying language, to expand access to lifesaving rescue medications.*

Commerce-Justice-Science Appropriations Act

Hal Rogers PDMP Grant Program: As noted above, PDMPs are a critical tool for addressing prescription drug abuse, yet PDMP capabilities vary widely by state. The Rogers PDMP Program is a discretionary, competitive grant program administered through the Justice Department, Bureau of Justice Assistance. The Rogers grants are intended to enhance the capacity of regulatory and law enforcement agencies and public health officials to collect and analyze controlled substance prescription data and other scheduled chemical products through a centralized database administered by an authorized state agency. The House-passed CJS bill

includes \$17 million for the Rogers PDMP program, a \$10 million increase from the FY14 level. *We strongly support the House passed funding level of \$17 million.*

Financial Services and General Government Appropriations Act

Drug-Free Communities Grant Program: The Drug-Free Communities Grant Program is administered jointly by SAMHSA and ONDCP and provides support to community-based coalitions formed to address youth substance abuse and its related consequences. The FY15 Senate Financial Services and General Government Appropriations bill included \$92 million (level funding compared to FY14) in funding for DFC, with the funding moving through ONDCP. This bill has not been considered by the full Senate. The House bill, which passed the House in July 2014, included \$95 million. *We urge you to include \$95 million for the Drug-Free Communities Grant Program in the final appropriations agreement.*

Together, the above programs will help expand prevention efforts to reduce prescription drug abuse and promote access to life saving addiction treatment services and rescue medications. This is an important start in our work to reverse the prescription drug epidemic. Thank you for your consideration.

Sincerely,

The Honorable Mary Bono
Trust for America's Health
Community Anti-Drug Coalitions of America
Kentucky Office of Drug Control Policy
National Association of State Alcohol and Drug Abuse Directors
Shatterproof
Mallinckrodt Pharmaceuticals
American College of Preventative Medicine
AIT Labs
Hazelden Betty Ford Foundation

cc: Sen. Tom Harkin, Chairman, Senate Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies

Sen. Jerry Moran, Ranking Member, Senate Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies

Sen. Tom Udall, Chairman, Senate Appropriations Subcommittee on Financial Services and General Government

Sen. Mike Johanns, Ranking Member, Senate Appropriations Subcommittee on Financial Services and General Government

Rep. Jack Kingston, Chairman, House Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies

Rep. Rosa DeLauro, Ranking Member, House Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies

Rep. Tom Wolf, Chairman, House Appropriations Subcommittee on Commerce, Justice, Science and Related Agencies

Rep. Chaka Fattah, Ranking Member, House Appropriations Subcommittee on Commerce, Justice, Science and Related Agencies

Rep. Ander Crenshaw, Chairman, House Appropriations Subcommittee on Financial Services and General Government

Rep. Jose Serrano, Ranking Member, House Appropriations Subcommittee on Financial Services and General Government