

National Association for Behavioral Healthcare



Access. Care. Recovery.

The Honorable Bill Nelson
U.S. Senate
716 Hart Senate Office Building
Washington, D.C. 20510

29 June 2018

Dear Senator Nelson:

On behalf of the National Association for Behavioral Healthcare, thank you for introducing S.2843 *Opioid Workforce Act of 2018* to expand and enhance addiction medicine, addiction psychiatry, or pain management residency positions to address the nation's opioid crisis.

The opioid crisis is exacting devastating consequences across America. Reports have shown that about 63,000 people, or about 174 people every day, died from a drug overdose in 2016—and that opioids were responsible for two-thirds of those deaths. We believe that number is higher and estimate the range of opioid overdoses to be another 15 to 25 percent of drug overdose deaths.

This has led to a five-fold increase in the incidence of infants born with neonatal abstinence syndrome (NAS) due to maternal opioid use during pregnancy; a doubling of opioid-related emergency department (ED) visits; and the removal of about 90,000 children from their homes because of parental substance use. Individuals who misuse prescription opioids are at a 40 to 60-percent increased risk of suicidal ideation, and suicide is on the rise. According to one estimate, the opioid crisis has drained workers from the labor force by a little more than 900,000 prime-age workers and has slowed economic growth by \$700 billion.

A major driver of this increase in deaths is an inadequate number of professionals and paraprofessionals who are trained in substance use and addictions. Federal estimates project a *workforce deficit of up to 250,000 workers by the year 2025*. The *Opioid Workforce Act of 2018* will add 1,000 residency positions in addiction medicine, addiction psychiatry or pain management. This legislation will not only expand the workforce in numbers of addiction-trained physicians; it will also infuse the entire medical system with improved knowledge of addictions through physician-to-physician consultation

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and collaboration with multi-disciplinary teams providing medical and substance use disorder prevention, treatment, and recovery services throughout the continuum of care.

Through your legislation, physicians will assure increased use of evidence-based practices, including medication-assisted treatment (MAT) for opioid use disorder (OUD). Medications reduce overdoses and death; a recent study (Larochelle et al., 2018) found addiction medication can *reduce mortality by almost 60 percent*. Using medication *doubles a person's chance of recovery* from OUD. A better-educated, increased addiction workforce will also benefit individuals with other types of substance use disorders, such as alcohol, cannabis, and stimulant (such as cocaine and methamphetamine) use disorders. Above all, it will strengthen the entire substance use treatment system for years to come.

Thank you for your concern and action on this critical issue.

Sincerely,

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President and CEO

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