



February 26, 2016

The Honorable Mitch McConnell
Majority Leader
United States Senate
U.S. Capitol Building, Room S-230
Washington, DC 20510

The Honorable Harry Reid
Minority Leader
United States Senate
U.S. Capitol Building, Room S-221
Washington, DC 20510

Dear Leaders McConnell and Reid:

On behalf of the American College of Physicians (ACP), I am writing to express our strong support of the goals and the key provisions of S. 524, the Comprehensive Addiction and Recovery Act of 2015 as well our concern about one provision in the bill. This legislation would provide an across-the-board plan to combat the epidemic of opioid and heroin abuse in the United States by providing additional resources to improve prevention, treatment, education, and recovery efforts of individuals who suffer from pain related conditions. ACP applauds the leadership of Senators Whitehouse, Portman, Ayotte, Klobuchar, Coons, and Kirk, for introducing this comprehensive legislation to address this crisis.

The ACP is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 143,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

The ACP recognizes that the inappropriate use and abuse of prescription painkillers is a serious health problem. Our physician members are on the front lines of treating patients to manage pain; and we recognize that physicians must play a vital role in helping to ensure safe and effective use of opioid prescriptions and the deterrence of their abuse. ACP recently provided comments to assist the Centers for Disease Control (CDC) in the development of guidelines for the use of opioids to treat chronic pain.

https://www.acponline.org/acp_policy/letters/acp_comments_draft_guidelines_opioids_2016.pdf

We support the policies of S. 524 to implement a task force, with physician participation; to develop evidence-based best practices for pain management and prescribing pain medication. The task force shall take into consideration existing pain management research, recommendations from relevant conferences, and ongoing efforts at the state and local levels by medical professional organizations to develop improved pain management treatment options for patients who use opioids. We believe that this task force will encourage physicians,

medical students, and residents to become well informed about the appropriate use and dangers of prescription drugs, particularly concerning controlled substances, and provide relevant training and learning opportunities to our physicians wherever they may practice.

ACP has concerns regarding a provision in this legislation that would require the task force (described above) to submit a report to Congress that would provide the results of a feasibility study on linking best practices to receiving and renewing registrations for prescribing medications regulated under the Controlled Substances Act. We believe that best practices developed by this legislation should serve as recommendations for physicians but should not be prescriptive in nature or linked to prescribing authority under the Controlled Substances Act. The College has the position that physicians should have discretion to provide the best treatment option based on the uniqueness of each patient's clinical situation and circumstances related to their care.

ACP supports the sections of S. 524 that would provide funding for a national education campaign to educate the public on the harmful impact of the abuse of prescription pain medication and heroin. The bill would provide grant funding to enable state substance abuse agencies, local governments, non-profit organizations, and educational institutions: to expand education efforts to prevent abuse of opioids, heroin, and other substances of abuse; to understand addiction as a chronic disease; and promote treatment and recovery efforts of individuals addicted to these drugs. We believe that this campaign is a necessary step to increase awareness of this growing epidemic and support efforts to educate physicians, patients, and the public on the appropriate medical uses of controlled drugs and the dangers of both medical and nonmedical use of prescription drugs.

S. 524 would grant the Attorney General the authority to provide funds for law enforcement agencies to develop, implement, or expand a treatment alternative to incarceration for individuals with substance abuse disorders. ACP is supportive of this policy as we believe that substance use disorders are medical conditions that can be successfully treated with alternatives to incarceration. These alternatives should include working with insurers to expand the full range of psychological, rehabilitative, pharmacologic, interventional, and complementary alternative treatments that may be needed to promote a healthy productive life.

This legislation would also provide grants to law enforcement agencies to create demonstration programs that would allow police officers to carry and administer naloxone for the prevention of opioid and heroin overdose. We support this effort to expand access to naloxone in the community and encourage additional advocacy efforts to educate physicians on the best practices for prescribing this medication. ACP also supports funding to increase access to naloxone through state block grant programs and other state based initiatives.

S. 524 would make grants available to eligible entities to expand or make available disposal sites for unwanted prescription medications. ACP applauds this effort as we support a national policy on the proper disposal of prescription drugs. We encourage the education of health

professionals, parents, youth, and patients on ways to appropriately dispense, store, and dispose of controlled substance medications.

We also support a section of this legislation that would provide grants to states to establish a comprehensive prescription drug monitoring program to track dispensing of schedule II, III, or IV controlled substances. Until such a program is implemented, ACP supports efforts to standardize state Prescription Drug Monitoring Programs through the federal National All Schedules Prescription Electronic Reporting Program. Prescribers and dispensers should check prescription drug monitoring programs in their own neighboring states prior to writing and filling prescriptions for medications containing controlled substances.

Although there has been some debate concerning how Congress will provide funds for the grant programs established in this legislation, we urge you to adopt legislation that is expected to be offered by Senator Shaheen as an amendment to S. 524, that will provide \$600 million in emergency funding to combat this epidemic. These supplemental appropriations would be allocated through already existing Department of Justice and Health and Human Services programs. Additionally, these funds are designated as an emergency appropriation, which means that they will be exempted from discretionary spending limits and other budget cap rules.

We appreciate your leadership on this issue and urge the immediate consideration of this legislation in the Senate. We respectfully request that you amend the legislation to eliminate the provision in the bill that would link any best practice guidelines to prescribing authority under the Controlled Substance Act. If you have any questions regarding this letter, please do not hesitate to contact Brian Buckley at 202-261-4543 or by email at bbuckley@acponline.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Wayne Riley", followed by a stylized flourish or second signature.

Wayne Riley, MD, MPH, MBA, MACP
President