

May 27, 2021

The Honorable Ann McLane Kuster United States House of Representatives Washington, DC 20515

The Honorable Tammy Baldwin United States Senate Washington, D.C. 20510

The Honorable Elizabeth Warren United States Senate Washington, DC 20510

The Honorable Cory Booker United States Senate Office Building Washington, DC 20510 The Honorable Lisa Blunt Rochester United States House of Representatives Washington, DC 20515

The Honorable Ed Markey United States Senate Washington, DC 20510

The Honorable Sheldon Whitehouse United States Senate Washington, DC 20510

Dear Representatives Kuster and Blunt Rochester and Senators Markey, Baldwin, Whitehouse, Booker, and Warren:

The undersigned mental health, substance use disorder, and health care professional organizations in the Coalition to Stop Opioid Overdose (CSOO) are writing today to support your introduction of the **Support, Treatment, and Overdose Prevention of (S.T.O.P) Fentanyl Act of 2021 (H.R. 2366 / S. 1457)**. This important legislation would expand fentanyl research and education, enhance overdose prevention and access to substance use disorder (SUD) treatment, and provide critical public health data and additional training support for various stakeholders. Given recent data from the Centers for Disease Control and Prevention showing drug overdose deaths in the U.S. at their highest level ever, soaring to more than 88,000 in the 12-month period to August 2020, there is a clear need for decisive, legislative action. In short, swift passage of the STOP Fentanyl Act is critical to addressing this nation's addiction and overdose crisis.

Here, in the United States, we know that fentanyl and other synthetic opioid-related deaths are surging. Rapidly expanding fentanyl research and education must be part of any comprehensive response to this crisis. To that end, the STOP Fentanyl Act would enhance fentanyl surveillance and detection, as well as improve the collection of overdose data. Importantly, it would also provide grant dollars to the U.S. Department of Health and Human Services for the purpose of creating a new contingency management program to address the rise of synthetic opioid-related deaths among people who use stimulants, such as methamphetamine and



cocaine. In contrast to opioid use disorder (OUD), there are no FDA-approved medications to treat stimulant use disorder, and contingency management is one of the most effective evidence-based treatments for it. ⁱⁱ

In addition, your legislation would enhance overdose prevention efforts and expand access to effective SUD treatments - interventions that will also help curb the nation's drug overdose crisis. In this regard, the STOP Fentanyl Act contains key provisions that not only would improve access to opioid overdose reversal medications and establish federal Good Samaritan immunity protections, but also access to medications for addiction treatment (MAT), including in federal prisons and via telehealth. Access to MAT in federal prisons is desperately needed, as it is estimated that 65% of people incarcerated in prisons in the United States have an active SUD, while only 5% of those who are incarcerated with OUD receive treatment for it. In addition, by making permanent a new, audio-video, telehealth evaluation exception to the Ryan Haight Act's in-person exam requirement, for purposes of prescribing Schedule III and IV medications, your legislation would greatly increase access to an important medication for the treatment of OUD within the criminal legal system and beyond. Further, by eliminating the current federal requirement that a person must be addicted at least one year before admission to an opioid treatment program, your legislation would remove a major barrier to accessing opioid treatment programs for many patients with OUD across this country. Finally, the STOP Fentanyl Act would also provide sorely needed public health data, as well as additional training support for law enforcement and forensic laboratories.

Together, these policy initiatives will help our country end the fentanyl-related overdose epidemic. Swift enactment of the STOP Fentanyl Act and its implementation are needed now more than ever. Thank you for your ongoing commitment to stop overdose deaths and ensure Americans with substance use disorder can access the care they need.

Sincerely,

SMART Recovery

Addiction Professionals of North Carolina AIDS United American College of Medical Toxicology American Osteopathic Academy of Addiction Medicine American Psychological Association American Society of Addiction Medicine A New PATH (Parents for Addiction Treatment & Healing) Association for Behavioral Health and Wellness CADA of Northwest Louisiana California Consortium of Addiction Programs & Professionals Live4Lali National Alliance for Medication Assisted Recovery National Association for Behavioral Healthcare National Association of Addiction Treatment Providers National Association of Clinical Nurse Specialists Partnership to End Addiction San Francisco AIDS Foundation



Suncoast Harm Reduction Project Treatment Communities of America Well Being Trust Young People in Recovery

¹ Ahmad FB, Rossen LM, Sutton P. Provisional drug overdose death counts. National Center for Health Statistics. 2021

^{II} McPherson, S. M., Burduli, E., Smith, C. L., Herron, J., Oluwoye, O., Hirchak, K., Orr, M. F., McDonell, M. G., & Roll, J. M. (2018). A review of contingency management for the treatment of substance-use disorders: adaptation for underserved populations, use of experimental technologies, and personalized optimization strategies. Substance abuse and rehabilitation, 9, 43–57. https://doi.org/10.2147/SAR.S138439

iii Criminal Justice DrugFacts. https://www.drugabuse.gov/publications/drugfacts/criminal-justice