

The Honorable Nancy Pelosi
Speaker of the House
United States Capitol
Washington, DC 20515

The Honorable Kevin McCarthy
Minority Leader
2421 Rayburn House Office Building
Washington, DC 20515

The Honorable Chuck Schumer
Senate Majority Leader
United States Capitol
Washington, DC 20510

The Honorable Mitch McConnell
Senate Minority Leader
317 Russell Senate Office Building
Washington, DC 20510

February 5, 2021

Dear Speaker Pelosi, Leaders McCarthy, Schumer, and McConnell,

We the undersigned organizations represent public health, behavioral health, law enforcement, and substance use disorder providers and advocates. We write to you on behalf of Americans who suffer from opioid use disorder (OUD).

Over the past year, the American people have courageously battled the COVID-19 pandemic. However, we must not forget that before COVID arrived on our shores, our nation was already in the midst of an opioid epidemic that continues to kill thousands of Americans each month. During the pandemic, our country's opioid crisis has worsened. A record-breaking 71,000 Americans died from a drug overdose in 2019 and preliminary data suggest the 2020 death toll will be far greater. The American Medical Association reports that more than 40 states have seen an increase in overdose deaths since the onset of COVID.¹

This devastating loss of life is even more tragic because it is preventable. Buprenorphine, one of three drugs approved by the Food and Drug Administration (FDA) to treat OUD, alleviates the painful symptoms associated with OUD and reduces mortality by up to 50 percent.² Yet despite the proven safety and efficacy of this medication, federal rules established by the DATA 2000 Act require health care practitioners to receive additional training and obtain a waiver (known as the X-waiver) from the DEA before prescribing buprenorphine to treat OUD. Counterintuitively, Federal law makes it easier to prescribe potent opioid painkillers that carry a risk of fatal overdose—such as hydrocodone, oxycodone, and fentanyl—than to treat someone with OUD.

During the pandemic, buprenorphine is the only FDA-approved medication for OUD that can be prescribed without an in-person visit to a health care provider or a treatment facility, making this medication even more critical for people experiencing self-isolation and quarantine due to COVID-19. Yet while the pandemic has increased the importance of buprenorphine for OUD treatment, X-waiver requirements continue to exacerbate the existing nationwide shortage in treatment providers. DEA data show that only about 6% of American doctors have chosen to obtain an X-waiver, and 2020 HHS Office of Inspector General report found that 40% of U.S. counties did not have a single waived provider who can prescribe buprenorphine.³ This lack of providers leaves millions of Americans, disproportionately in rural areas, without access to local health care providers who can prescribe this life-saving medication.

As you consider legislation to strengthen the nation’s pandemic response, we encourage Congress to remove undue restrictions on prescribing medications for OUD. In the 116th Congress, bipartisan and bicameral legislation, the Mainstreaming Addiction Treatment Act (the MAT Act, H.R 2482 and S. 2074), aimed to eliminate the X-waiver requirements. With approximately 1.6 million Americans suffering from OUD, this bill has the potential to exponentially increase the share of American health care providers who can treat the disease.

As COVID-19 pushes our health care system past its capacity, having regulations that further limits OUD treatment to a small minority of health care providers can no longer be justified. Including provisions in the next COVID package that eliminate the DATA 2000 Act requirements for buprenorphine prescribing is a commonsense step that will vastly expand access to addiction treatment and help save lives today.

Sincerely,

American Academy of Pediatrics
American College of Emergency Physicians
American Foundation for Suicide Prevention
American Pharmacists Association
Americans for Prosperity
Association for Behavioral Health and Wellness
Community Catalyst
Drug Policy Alliance
End SUD
National Association of Attorneys General
National Boards of Pharmacy
National Council for Behavioral Health
Shatterproof
Society for Hospital Medicine
Society of General Internal Medicine
The Pew Charitable Trusts

¹ American Medical Association, “Issue brief: Reports of increases in opioid- and other drug-related overdose and other concerns during COVID pandemic.” Available at: <https://www.ama-assn.org/system/files/2020-09/issue-brief-increases-in-opioid-related-overdose.pdf> (December 2020).

² National Academies of Sciences, Engineering, and Medicine. 2019. *Medications for opioid use disorder save lives*. Washington, DC: The National Academies Press. doi: <https://doi.org/10.17226/25310>.

³ Department of Health and Human Services Office of Inspector General, “Geographic Disparities Affect Access to Buprenorphine Services for Opioid Use Disorder” (2020).