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September 19, 2017

The Honorable Donald Trump President of the United States The White House 1600 Pennsylvania Avenue, NW Washington, DC 20500

Dear Mr. President:

On behalf of America's physicians and medical students, the American Medical Association (AMA) commends the interim report issued by your Commission on Combating Drug Addiction and the Opioid Crisis. We also greatly appreciate your public comments that this epidemic has become a national emergency, which is why the AMA urges you to take the necessary steps for an emergency declaration. There are many elements of the interim report that the AMA supports; in particular, we believe swift action in three key areas is essential to reverse our nation's opioid epidemic.

First, waive Medicaid's 16-bed federal limit to treat patients with a substance use disorder. The AMA strongly supports the recommendation to "rapidly increase treatment capacity" and to "grant waiver approvals for all 50 states to quickly eliminate barriers to treatment resulting from the federal Institutes for Mental Diseases (IMD) exclusion within the Medicaid program." Given that only about 10 percent of the nearly two million patients with a substance use disorder can access treatment, it is essential that treatment capacity be increased as expeditiously as possible. Removing the 16-bed IMD exclusion is an important first step to increasing physicians' ability to care for patients with an opioid use disorder.

Second, suspend federal regulatory and other barriers to providing buprenorphine. The AMA supports eliminating the requirement for obtaining a special federal waiver to prescribe buprenorphine for the treatment of opioid use disorder. Even though the regulatory approach has eased somewhat over the past year, there still are considerable barriers in place. Removing the federal waiver requirement will give many more patients new access to treatment from physicians and other qualified health care professionals. The safety and effectiveness of medication assisted treatment (MAT) is well-established, and we need to do all we can to encourage more qualified clinicians to care for patients with an opioid use disorder.

Third, direct the Attorney General to enforce existing substance use disorder parity laws. We strongly agree with the recommendation to "enforce the Mental Health Parity and Addiction Equity Act." This can be done at both the state and federal levels, but America's patients also need your leadership to encourage health insurance companies and pharmacy benefit managers to end the type of prior authorization, step therapy, and fail first protocols that only serve as barriers to MAT and multimodal pain care. We acknowledge that physicians must continue to educate ourselves and use tools like prescription drug monitoring programs, but when our patients have care delayed or denied due to insurance company policies, it could mean further harm or even death. Some payers already have taken positive steps to remove some barriers, but this epidemic requires all payers to work with us to ensure access to care.

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We appreciate that, although these actions could potentially be accomplished by other means, a declaration of national emergency would lend new urgency to increasing access to care for America's patients, and we stand ready to work with the Administration to accomplish these goals.

Sincerely,

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