

November 18, 2020

Dear President-elect Biden,

We the undersigned organizations represent law enforcement, behavioral health, public health, and substance use disorder treatment providers and advocates, and we thank you for prioritizing removing undue restrictions on prescribing medications for substance use disorder in your plan to combat the opioid crisis. Congratulations on your election, and we look forward to working with your Administration.

The United States needs expanded access to treatment for opioid use disorder (OUD) now more than ever. During the COVID-19 global 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.<sup>i</sup>

In your first 100 days in office, we ask that your Administration work with Congress to pass the Mainstreaming Addiction Treatment Act (the MAT Act, H.R. 2482 and S. 2074). This bipartisan legislation would remove the federal rules established by the DATA 2000 Act that require health care practitioners to obtain a waiver from the DEA before prescribing buprenorphine to treat opioid use disorder (OUD). For the roughly 1.6 million Americans who met criteria for OUD in the past year,<sup>ii</sup> this legislation will help expand access to life-saving care in the safety of their homes.

More than 20 years ago, you introduced the DATA 2000 Act, landmark legislation that made buprenorphine, one of three FDA-approved medications to treat OUD, accessible in a primary care setting. Buprenorphine alleviates the painful symptoms associated with OUD and reduces mortality by up to 50 percent. Despite the proven safety and efficacy of this medication, prior to the passage of DATA 2000, buprenorphine was restricted to DEA-regulated opioid treatment programs. By allowing physicians to prescribe this medication in a primary care setting, DATA 2000 greatly expanded the availability of treatment and helped to reduce the stigma of addiction by allowing OUD to be treated in an office-based setting, not unlike any other chronic, manageable medical condition.

The intent of DATA 2000 was to make OUD treatment universally available, yet one provision of this law has created a barrier to accessing buprenorphine. DATA 2000 requires health care practitioners to receive additional training and obtain a waiver (known as an Xwaiver) from the DEA before prescribing buprenorphine to treat OUD. This provision creates a system in which health care practitioners can "opt-in" to treating the disease. Any health care provider with a license to prescribe controlled substances can write prescriptions for codeine, morphine, hydrocodone, oxycodone or fentanyl — drugs with significantly higher risk of fatal overdose. Therefore, federal law makes it easier to prescribe potentially addictive opioids than to treat someone with opioid use disorder.

Despite significant efforts to increase the number of waived physicians in recent years, DEA data show that only about 6% of American doctors have chosen to obtain an X-waiver. An HHS Office of Inspector General report released earlier this year found that 40% of U.S. counties did not have a single waived provider who can prescribe buprenorphine.<sup>iii</sup>

The MAT Act would eliminate an outdated regulation that inserts the DEA into the doctor-patient relationship. With approximately 1.6 million Americans suffering from OUD, this bill has the potential to exponentially increase the share of American physicians who can treat the disease. Passing the MAT Act is a commonsense step that will vastly expand access to addiction treatment and help save lives today.

Sincerely,

American Foundation for Suicide Prevention  
Community Catalyst  
Drug Policy Alliance  
EndSUD  
Mental Health America  
National Association of Attorneys General  
National Council for Behavioral Health  
Shatterproof  
Society of General Internal Medicine  
The Pew Charitable Trusts

<sup>i</sup> 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/2020-11/issue-briefincreases-in-opioid-related-overdose.pdf> (October 2020).

<sup>ii</sup> Substance Abuse and Mental Health Services Administration. (2020). Key substance use and mental health indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (HHS Publication No. PEP20-07-01-001, NSDUH Series H-55). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/>

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