



800 Maine Avenue, S.W.
Suite 900
Washington, D.C. 20024

June 11, 2018

The Honorable Paul Ryan
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Nancy Pelosi
Minority Leader
U.S. House of Representatives
Washington, DC 20515

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Saul Levin, M.D., M.P.A.
CEO and Medical Director

Dear Speaker Ryan and Leader Pelosi,

On behalf of the American Psychiatric Association (APA), the national medical specialty association representing more than 37,800 psychiatric physicians, thank you for your ongoing efforts to advance solutions to the current opioid crisis. As an organization representing physicians who treat patients with substance use disorders (SUDs), we are deeply concerned with the impact the opioid crisis is having on patients, families, and communities. As such, **the APA supports the following legislative proposals slated for consideration on the House floor:**

H.R. 5795, the Overdose Prevention and Patient Safety Act

If enacted, H.R. 5795 would align current medical record regulations for substance use disorder (SUD) under 42 CFR Part 2 with the Health Insurance Portability and Accountability Act (HIPAA) for the purposes of health care treatment, payment, and operations (TPO). The legislation would simultaneously ensure strong patient privacy protections by forbidding the use of these records in civil, criminal, and administrative proceedings and investigations, and protect against discrimination of individuals seeking and receiving SUD treatment. The provision of high-quality and efficient healthcare services requires robust collaboration among various providers. Passage of H.R. 5795 will allow for the appropriate sharing of substance use disorder records, among covered entities, to ensure persons with opioid use disorder and other substance use disorders receive the integrated care they need.

H.R. 5102, the Substance Use Disorder Workforce Loan Repayment Act

This critical legislation would create a new loan repayment program for mental health and SUD providers who treat patients in underserved areas that are disproportionately affected by the opioid crisis. Ensuring an extensive mental and behavioral health workforce is a critical component to addressing the opioid crisis. Passage of H.R. 5102 would represent an important step towards ensuring a pipeline of highly-skilled mental health providers is available to meet the needs of vulnerable populations.

H.R. 1925, the At-Risk Youth Medicaid Protection Act

To support at-risk youth, H.R. 1925 would forbid state Medicaid plans from terminating the Medicaid eligibility of a juvenile due to incarceration and require state Medicaid agencies to reinstate eligibility upon the juvenile’s release. The APA strongly supports efforts to help juveniles receive prompt mental health care and substance use disorder treatment, as well as increased access to such programs designed to facilitate early identification, prevention, and recovery from substance use disorders, and/or ease their re-introduction into society.

H.R. 4005, the Medicaid Re-Entry Act

Similarly, H.R. 4005 would convene a group of stakeholders to develop best practices for transitioning inmates suffering from SUD from correctional facilities to community-based treatment services. Research indicates that individuals are roughly eight times more likely to overdose in the first two weeks post-release. The APA strongly encourages passage of H.R. 4005 to ensure inmates are able to receive continuation of mental and/or SUD-related services once they return to their families and communities.

H.R. 5483, the Special Registration for Telemedicine Clarification Act

To further broaden access to mental health and/or SUD-related services, H.R. 5483 would establish a one-year deadline for the Attorney General to issue regulations specifying how providers can obtain a special telemedicine certificate that would exempt them from the provisions of the Ryan Haight Act. Telepsychiatry can help to mitigate the stigma often associated with seeking treatment for substance use disorders and improve access to psychiatric services in a variety of treatment settings, particularly in rural and underserved communities. The APA supports this legislation as a means to appropriately broaden access to telepsychiatry services.

H.R. 3192, the CHIP Mental Health Parity Act

Finally, H.R. 3192 would require all CHIP plans to cover treatment of mental illness and substance use disorders and clarifies that all CHIP plans are required to comply with federal mental health parity laws. Access to mental health services for children and women receiving prenatal care can help prevent the onset of mental illness and addiction for at-risk youth later in life. The APA broadly supports efforts to enforce or enhance mental health and SUD parity laws. Accordingly, APA supports H.R. 3192 as a means of ensuring CHIP enrollees have access to these critical services.

H.R. 5002, the Advancing Cutting-Edge (ACE) Research Act would provide the National Institutes of Health (NIH) with the additional tools and flexibility to support innovative medical research to combat the opioid crisis. The APA supports research on alternatives to opioid analgesics as an important strategy to stem the rates of opioid addiction.

Again, thank you for your commitment to addressing the opioid crisis. Passage of the aforementioned bills, coupled with an ongoing dialogue related to the impacts of substance use disorders is an important step toward turning the tide on this devastating public health epidemic. We look forward to continued collaboration with Congress on these and other issues. If you have any questions, please contact Megan Marcinko at mmarcinko@psych.org / 202.559.3839 or Mike Troubh at mtroubh@psych.org / 202.559.3571.

Sincerely,



Saul Levin
M.D., M.P.A.
CEO and Medical Director