



**Statement for the Record  
Submitted to  
U.S. Senate Committee on Health, Education, Labor, and Pensions  
October 16, 2017  
On Behalf of the American Academy of PAs**

On behalf of more than 115,000 nationally-certified PAs (physician assistants), the American Academy of PAs (AAPA) welcomes the opportunity to submit a statement for the record regarding the October 5, 2017 hearing held by the U.S. Senate Committee on Health, Education, Labor, and Pensions on “The Federal Response to the Opioid Crisis.”

AAPA would like to thank Chairman Alexander and Ranking Member Murray for holding this vitally important hearing, and for continuing to shine a spotlight on an issue that impacts so many individuals in the United States. AAPA would also like to thank the witnesses for both their testimony and their work in combatting this crisis.

AAPA appreciates the work being done by Congress and the relevant federal agencies to combat the abuse, diversion, morbidity and mortality associated with the misuse of opioids that is devastating families and communities across our nation. According to the Centers for Disease Control and Prevention (CDC), the most recent data estimates that 142 Americans die every day from a drug overdose, with the overall number of opioid overdoses in America having quadrupled since 1999. The current epidemic will not improve without enlisting the help of additional providers to treat those who are already addicted, and in light of the current shortage of providers specializing in addiction medicine, AAPA believes PAs are an important part of the solution to this problem.

PAs are one of three healthcare professionals, including physicians and nurse practitioners, who provide primary medical care in the United States. As such, PAs frequently work with patients who struggle with opioid dependency. While many PAs specialize in addiction medicine, there are also approximately 30,000 PAs practicing as primary care providers on the “front lines” of patient care in hospitals, private practices, community health centers, rural health clinics, non-federally qualified public or community health clinics, prisons, behavioral healthcare facilities, and free clinics, where they commonly encounter patients who present with or are at risk of opioid addiction. This care is especially critical in rural and medically-underserved areas, where PAs frequently serve as the only primary care clinician.

AAPA supports initiatives to stop opioid addiction before it occurs through the use of safe prescribing practices, patient monitoring, and screening for potential abuse. AAPA recommends addressing this issue by encouraging all providers who commonly prescribe opioids to obtain continuing medical education (CME) designed to prevent and treat prescription drug abuse among their patients with chronic pain. AAPA has been proactive in ensuring PAs have access to CME and other coursework related to safely prescribing opioid medications, as well as the screening, prevention, and management of prescription drug misuse, and supports initiatives that will provide access to more education opportunities to providers in these areas. This support includes providing several programs, including 24 hours of training for PAs to receive a waiver to prescribe treatment for opioid use disorder and The Opioid Use Disorder Education Program, free of charge to any PAs interested in furthering their education and training in this field.

During this hearing Senator Hassan raised the issue of the addiction treatment workforce, and how 90% of this workforce is currently composed of non-physician providers such as PAs. AAPA believes the current epidemic will not improve without enlisting the help of all qualified providers to treat those who are already addicted, and as such strongly endorses the removal of barriers to treatment that are not based in science or evidence.

AAPA supports initiatives to increase access to treatment for opioid addiction using both traditional therapy and medication-assisted treatment (MAT). Both the Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Institute of Drug Abuse (NIDA) have found that individuals who are addicted to opioids often fare better if they have access to MAT, as well as traditional therapies. MAT patients have greater overall survival rates and treatment retention, and they show decreased criminal activity, allowing them to become and stay employed. AAPA strongly supports initiatives to expand access to MAT programs for patients who need treatment for opioid addiction.

As such, AAPA would like to endorse Commissioner Gottlieb's comments regarding the Food and Drug Administration's efforts to enable more opportunities for those currently addicted to opioids to access MAT in order to recover. AAPA supports removing non-evidence based restrictions on the type of providers who can provide MAT for opioid-addicted patients.

AAPA is also heartened by the enactment and implementation of the Comprehensive Addiction and Recovery Act of 2016. As a result of this law, PAs now have additional tools for helping their patients fight opioid addiction. As of September 19, 2017, per Health and Human Services (HHS) Administration Assistant Secretary McCance-Katz's testimony at this hearing, 1606 PAs nationwide have registered for training to receive their waiver for prescribing buprenorphine, and 773 PAs have completed this training and received their waiver.

Finally, AAPA also agrees with HHS Assistant Secretary McCance-Katz that increasing the availability and use of naloxone in order to reduce overdose deaths will have a significant positive impact on public health.

AAPA is committed to working with Congress and all relevant federal agencies to combat opioid use disorder in the U.S. with a strong, all-hands-on-deck approach in order to help the millions of Americans currently struggling with opioid addiction. Thank you for the opportunity to submit a statement for the record on this important issue, and please do not hesitate to contact Tate Heuer, AAPA Vice President, Federal Advocacy, at 571-319-4338 or [theuer@aapa.org](mailto:theuer@aapa.org) with any questions.