Chairman Roy Blunt Opening Statement Senate Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies

Hearing Titled "Addressing the Opioid Epidemic in America: Prevention, Treatment, and Recovery at the State and Local Level"

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(As prepared for delivery)

Good morning. Thank you to our witnesses for being here today to talk about a critical issue that continues to impact thousands of lives across our nation – the opioid epidemic.

In 2017, over 49,000 lives were lost due to this crisis. That equates to one life every 11 minutes. It was the deadliest year on record, killing more people than at the peak of the AIDS crisis in the 1990s. These numbers are deeply troubling, but overdose deaths are only the tip of the iceberg. For every one person who died, 273 people misused prescription opioids in the past year.

Every state across the nation feels the impact of this crisis, and Missouri is no exception. St. Louis native and Navy veteran Derek was just two months shy of his 30th birthday when he lost his life to a twelve-year battle with addiction.

Derek graduated from college, earned an MBA, and proudly served our nation, but struggled with an addiction that began after he was prescribed powerful opioids for a football-related injury in high school. His mother, Kelly, is now a powerful voice in the fight against the opioid epidemic. I thank her for what she, and so many others are doing, to help prevent other families from suffering the same loss that she and her family have suffered.

Missouri has seen a steady increase in synthetic opioid use and the DEA in St. Louis recorded more than a 1,600 percent increase in fentanyl seizures from 2016 to 2017. Alarmingly, Missouri has seen a 40 percent increase in fentanyl related overdoses during that same period.

It is clear that the crisis is not behind us. However, as Chairman of the Appropriations Subcommittee that has provided over 80 percent of the U.S. government investment, or nearly \$9 billion in the last four years, to address the epidemic I am pleased that we are starting to see some positive signs of improvement. Early data suggests that the 12 month opioid mortality rate is leveling off for the first time since the 1980's. In my home state of Missouri, federal funding has provided over 4,000 people treatment, saved 2,000 lives through overdose reversals, and the rate of overdose deaths is dropping.

But we have more to do. As I hear from constituents back home and experts in the addiction field, I continue to believe that we need to focus on three major areas to address the crisis.

First, we must recognize that behavioral health issues should be treated like any other physical health issue. Mood and anxiety disorders double the risk of addiction. If we are going to effectively address opioid addiction, we need to ensure that those suffering can access effective treatment – and that should include mental health services.

Second, we need to reduce the number of individuals who become addicted in the first place. The Committee has provided resources to expand surveillance to every state, educate physicians through prescribing guidelines, and start an education campaign.

There is evidence that these efforts are working as the amount of morphine milligram equivalents prescribed in 2017 declined by nearly 30 percent. But we must remain vigilant by improving the speed of surveillance and revising guidelines to keep physicians up-to-date with the latest best practices.

Lastly, we need better pain management. Over 63 percent of opioid misuse stems from pain. Without reasonable access to non-addictive pain medications or alternative treatments, it will be difficult to truly get this crisis under control.

I am pleased to welcome today's panel of researchers and state and local experts to discuss how taxpayer dollars are allocated and prioritized at the state and local level. We all know there is no one-size-fits-all solution to solve this crisis, and we must remain committed to a comprehensive plan to get the opioid epidemic under control. As we move forward, I am interested to hear our witnesses' perspectives on what programs and proposals have made a difference, where we should focus future funding, and what strategies from states can be applied nation-wide.

Thank you.