December 19, 2017

The Honorable Roy Blunt Chairman Senate Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies Washington, DC 20510 The Honorable Patty Murray Ranking Member Senate Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

As you consider the need to provide additional resources aimed at combating the nation's opioid overdose epidemic, the undersigned members of the Injury and Violence Prevention Network (<u>www.safestates.org/?IVPN</u>) ask that you support a comprehensive response by allocating funds for both opioid overdose treatment *and* prevention efforts. While the *21st Century Cures Act* provided an initial down payment of \$500 million in FY 2017 and FY 2018 for opioid treatment and prevention efforts, none of the funds were appropriated to the Centers for Disease Control and Prevention (CDC), our nation's lead federal agency for public health and prevention efforts.

The opioid overdose epidemic is one of the biggest public health threats in our nation's history as it claims the lives of more than 90 Americans every day. The economic burden of this epidemic stands at more than \$504 billion, an estimate calculated by the Council of Economic Advisers based on 2015 data. This alarming loss of life and economic benefit to society must be addressed using evidence-based approaches that expand access and utilization of *both* treatment and prevention strategies. One strategy alone will not suffice to arrest this epidemic.

Thanks to congressional action, agencies such as the CDC have used funds from annual appropriations to help us better understand and target the factors that lead to opioid overdose deaths. According to the CDC, for every 1 prescription or illicit opioid overdose death in 2015, there were:

- 18 people who had a substance use disorder involving heroin;
- 62 people who had a substance use disorder involving prescription opioids;
- 377 people who misused prescription opioids in the past year; and,
- 2,946 people who used prescription opioids in the past year.

Clearly the data support an aggressive and comprehensive approach to this epidemic. Congress must inject greater resources into programs that address opioid overdose treatment and prevention efforts.

In fact, prevention-focused programs are already being administered by the CDC's National Center for Injury Prevention and Control. Programs such as the *Opioid Prevention in States* (comprised of *Prevention for States, Data-Driven Prevention Initiative,* and *Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality*) and the *Core State Violence and Injury Prevention Program (Core SVIPP)* are well positioned to build on current efforts in order to broaden and strengthen our initial opioid overdose prevention efforts. These programs provide direct support to states and in many cases are designed to assist with the design and implementation of targeted community-level responses to this epidemic.

But as you know, more must be done. Today lawmakers have joined in a bipartisan fashion to call for greater investments in the opioid overdose epidemic, so we are hopeful more will be done. As you

consider such additional investments, we urge that you recognize the need to provide support for both opioid overdose treatment and prevention efforts. Please feel free to contact Paul Bonta, Director of Government Relations for the Safe States Alliance, at Paul.Bonta@SafeState.org should you have any questions or wish to discuss this further.

Sincerely,

Afterschool Alliance

American Academy of Pediatrics American Foundation for Suicide Prevention American Public Health Association American Psychological Association Association of Maternal & Child Health Programs Brain Injury Association of America **Child Injury Prevention Alliance** Child Welfare League of America Council of State and Territorial Epidemiologists General Federation of Women's Clubs National Association of County and City Health Officials National Association of State Emergency Medical Services Officials National Association of State Head Injury Administrators National Center for Domestic and Sexual Violence National Prevention Science Coalition National Recreation and Park Association National Safety Council **Prevention Institute** Safe States Alliance Society for Advancement of Violence and Injury Research (SAVIR) Society for Public Health Education Trust for America's Health

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