

April 24, 2018

The Honorable Michael Burgess
Chairman
Committee on Energy and Commerce
Health Subcommittee
2123 Rayburn House Office Building
Washington, DC 20515

The Honorable Gene Green
Ranking Member
Committee on Energy and Commerce
Health Subcommittee
2123 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Burgess and Ranking Member Green:

On behalf of over 350,000 Advanced Practice Registered Nurses (APRNs), the undersigned organizations urge you to consider the important role our members play in addressing the opioid crisis. APRNs know firsthand the importance of ensuring access to vital substance use disorder (SUD) treatments. With that in mind, we respectfully urge the Subcommittee to make permanent the authorization for nurse practitioners (NPs) to prescribe medication-assisted treatments (MATs) and to fully include the other APRNs roles into that authorization.

The APRN community is comprised of stakeholders from research, education, and practice, including organizations representing Certified Nurse-Midwives (CNMs), experts in primary care, maternal and women's health; Clinical Nurse Specialists, (CNSs) offering acute, chronic, specialty and community healthcare services; Certified Registered Nurse Anesthetists (CRNAs), providing the full range of anesthesia services as well as chronic pain management; and Nurse Practitioners (NPs), delivering primary, acute, chronic, specialty, and community healthcare with over a billion patient visits per year.

The *Comprehensive Addiction and Recovery Act* (CARA) ([P.L. 114-198](#)) took important steps to expand access to these lifesaving treatments by authorizing NPs and physician assistants (PAs) to provide MATs for five years. In just over one year, more than 6,000 NPs and PAs have received a MAT waiver, which equates to thousands of your constituents receiving treatment and overcoming their SUD. However, CARA did not include the other qualified APRNs into that authorization. Opioid overdoses cause one death every 20 minutes.¹ Medication-assisted treatment (MAT)—a combination of psychosocial therapy and U.S. Food and Drug Administration-approved medication—is the most effective intervention to treat opioid use disorder (OUD) and is more effective than either behavioral interventions or medication alone.²

¹ Rose A. Rudd et al., "Increases in Drug and Opioid Overdose Deaths—United States, 2000-2014," *Morbidity and Mortality Weekly Report* 64, no. 50 (2016): 1378–82, http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6450a3.htm?s_cid=mm6450a3_w.

² American Society of Addiction Medicine, *The ASAM National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use* (2015), <http://www.asam.org/docs/default-source/practice-support/guidelines-and-consensus-docs/asam-national-practice-guideline-supplement.pdf?sfvrsn=24>; and U.S. Department of Health and Human Services, *Addressing Prescription Drug Abuse in the United States: Current Activities and Future Opportunities* (2013), https://www.cdc.gov/drugoverdose/pdf/hhs_prescription_drug_abuse_report_09.2013.pdf.

With that in mind, we call on the Subcommittee to seize this important opportunity. We thank the Subcommittee for including the *Addiction Treatment Access Improvement Act* (H.R. 3692) in the opioid package being considered. This important legislation will make permanent the nurse practitioner and physician assistant authorization to prescribe MATs and increase access by expanding the qualifying practitioners to include clinical nurse specialists, certified registered nurse anesthetists, and certified nurse-midwives.

We appreciate the opportunity to continue to work with you on this critical issue to ensure that patients have access to medication-assisted treatments. If the APRN Community can be of any assistance, please do not hesitate to contact Ralph Kohl, at 202-741-9080 or rkohl@aanadc.com.

Sincerely,

American Academy of Nursing
American Association of Colleges of Nursing
American Association of Nurse Anesthetists
American Association of Nurse Practitioners
American College of Nurse-Midwives
American Nurses Association
American Organization of Nurse Executives
Gerontological Advanced Practice Nurses Association
National Association of Clinical Nurse Specialists
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National League for Nursing
National Organization of Nurse Practitioner Faculties

A similar letter was transmitted to the Senate Committee on Health, Education, Labor and Pensions on April 20, 2018.