

**Senate Finance Committee**  
**Bipartisan Initiative:**  
**Addressing Substance Use Disorder and the Opioid Epidemic**

The Finance Committee is undertaking a bipartisan effort to make improvements for individuals, families, and communities impacted by opioid and substance use disorders through policy changes in Medicare, Medicaid, and human services programs. Millions of Americans in Medicare and Medicaid suffer from pain and/or substance use disorder (SUD), including opioid use disorder (OUD). Significant spending occurs within these programs to provide services and treatment to these individuals. The process outlined below will enable the Senate Finance Committee to evaluate how these programs have adapted to the changing needs of this population to ensure the most appropriate care is being provided at the right time.

Based on the stakeholder feedback received, the Committee will focus on identifying changes in the policy categories below.

**Policy Categories within Medicare, Medicaid and Human Services under Consideration:**

1. Improve efforts to prevent opioid misuse and abuse by evaluating and considering tools such as:
  - a. Facilitating prescriber and patient education on appropriate use of opioids;
  - b. Enhancing drug management protocols; and
  - c. Evaluating access to and utilization of evidence-based non-pharmaceutical and/or non-opioid treatment options for managing pain.
2. Evaluate and improve access to and utilization of evidence-based care for patients to reduce and address the prevalence of SUD and OUD, including:
  - a. Screening;
  - b. Assessment; and
  - c. Treatments and services.
3. Improve services and systemic responses for families confronting SUD and OUD, including extended family supports. Efforts could include:
  - a. Serving parents and their children concurrently;
  - b. Testing services to preserve and reunify families; and
  - c. Supporting kin who assist families.
4. Enhance data-sharing to promote appropriate health care interventions and strengthen program integrity. Such efforts could include:
  - a. Enhancing the interaction between Prescription Drug Monitoring Program utility and Medicare and Medicaid;
  - b. Improving program data and information to better address issues such as SUD and OUD; and
  - c. Increasing effective oversight of issues related to SUD and OUD.

Throughout policy consideration and development into legislation, it will be necessary to keep the following criteria in mind that will be used to determine whether legislation can be cleared by the Committee.

### **Policy Guidance Criteria**

A policy should:

- Be in the Finance Committee's jurisdiction and involve changes that pertain to Medicare, Medicaid, and human services programs;
- Have a reasonable connection to addressing opioid and substance use disorders;
- Have bipartisan Finance member support;
- Have HHS/CMS technical assistance and a CBO cost estimate; and
- Have little or no cost, or have an identified bipartisan offset acceptable to the Chair and Ranking Member.

In order to move forward expeditiously with this process, we request that Committee Health LAs provide initial feedback on potential policies under the categories identified above by Friday, April 6, 2018. Committee staff will work with interested offices toward developing legislation that can move through the Committee discharge process this spring.