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Media Contact

Sarah Shelson 301-547-4110 sshelson@ASAM.org

ASAM Testifies at Congressional Hearing in Support of Expanding Addiction Treatment to End the Opioid Crisis

Dr. Malik Burnett urges Congress to act and make lifesaving, evidence-based addiction treatment more accessible to Americans with opioid use disorder

WASHINGTON – Today, Malik Burnett, MD, MBA, MPH, Vice Chair of the American Society of Addiction Medicine's (ASAM) Public Policy Committee, testified before the U.S. Senate Special Committee on Aging during a hearing titled, "Combating the Opioid Epidemic." In his testimony, Dr. Burnett acknowledged Congress' efforts to curtail the supply of illicit fentanyl into the country but urged lawmakers to also focus on strengthening demand-side interventions. Such interventions include growing a robust addiction specialist workforce and reducing barriers to evidence-based addiction treatments.

"Unfortunately, the people who need these treatments the most are not getting the lifesaving care they need, when they need it," testified Dr. Burnett. "In fact, this treatment gap has barely budged over the last decade. We will not end this opioid epidemic until evidence-based addiction treatment is easier to get than illicit opioids."

Dr. Burnett noted that while evidence-based treatments for opioid use disorder (OUD) are highly effective, tens of thousands of Americans continue to die each year from illicit opioids. This is due to several challenges and shortcomings in the healthcare system, including a shortage of addiction specialist physicians who are uniquely equipped to treat the complex nature of addiction.

Furthermore, federal law has limited the dispensing of methadone, considered a gold-standard of care for OUD, to just 2,000 clinics. 80% of U.S. counties do not have one of these designated clinics, creating a significant access barrier for patients with OUD.

Affordability of care also remains a challenge. Currently, not all patients enrolled in Medicare receive insurance coverage for the full continuum of addiction care. Despite drug overdose death rates quadrupling among seniors between 2002 and 2021, Medicare does not cover non-hospital-based residential addiction treatment programs, which may be well suited for some older adults with OUD. Dr. Burnett indicated that these barriers to care, among several others, are likely to contribute to America's persistently high rate of OUD and drug related overdose deaths.

To overcome these challenges and save more lives, Dr. Burnett urged the Special Committee to act on the following priorities:

- Increase federal funding for addiction medicine and addiction psychiatry fellowships to ensure all communities have access to specialized addiction care;
- Remove bureaucratic "red tape" and amend federal law to allow addiction specialists to prescribe methadone for OUD that can be picked up from a pharmacy;
- Close the Medicare coverage gap for residential addiction treatment;
- Expand evidence-based addiction care for those involved in the criminal legal system;
- Enforce existing mental health and addiction parity laws; and
- Avoid harmful Medicaid cuts.

To read Dr. Burnett's full testimony and view the video from the hearing, CLICK <u>HERE</u>.

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About the American Society of Addiction Medicine

The American Society of Addiction Medicine (ASAM), founded in 1954, is a professional medical society representing over 8,000 physicians, clinicians, and associated professionals in the field of addiction medicine. ASAM is dedicated to increasing access and improving the quality of addiction treatment, educating physicians and the public, supporting research and prevention, and promoting the appropriate role of physicians in the care of patients with addiction. For more information, visit www.ASAM.org.