

EMBARGOED UNTIL 12:00PM EST, Tuesday, February 2, 2016

THE WHITE HOUSE
Office of the Press Secretary

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FACT SHEET: President Obama Proposes \$1.1 Billion in New Funding to Address the Prescription Opioid Abuse and Heroin Use Epidemic

President's Budget includes new mandatory funding to help ensure that all Americans who want treatment can get the help they need

Prescription drug abuse and heroin use have taken a heartbreaking toll on too many Americans and their families, while straining resources of law enforcement and treatment programs. More Americans now die every year from drug overdoses than they do in motor vehicle crashes. New data from the Centers for Disease Control and Prevention (CDC) show that opioids—a class of drugs that include prescription pain medications and heroin—were involved in 28,648 deaths in 2014. In particular, CDC found a continued sharp increase in heroin-involved deaths and an emerging increase in deaths involving synthetic opioids, such as fentanyl.

The President has made clear that addressing the opioid overdose epidemic is a priority for his Administration and has highlighted tools that are effective in reducing drug use and overdose, like evidence-based prevention programs, prescription drug monitoring, prescription drug take-back events, medication-assisted treatment and the overdose reversal drug naloxone. Under the Affordable Care Act, substance use disorder services are essential health benefits that are required to be covered by health plans in the Health Insurance Marketplace. The law also required that covered substance use disorder benefits are comparable to medical and surgical benefits.

The President's FY 2017 Budget takes a two-pronged approach to address this epidemic. First, it includes \$1 billion in new mandatory funding over two years to expand access to treatment for prescription drug abuse and heroin use. This funding will boost efforts to help individuals with an opioid use disorder seek treatment, successfully complete treatment, and sustain recovery. This funding includes:

- \$920 million to support cooperative agreements with States to expand access to medication-assisted treatment for opioid use disorders. States will receive funds based on the severity of the epidemic and on the strength of their strategy to respond to it. States can use these funds to expand treatment capacity and make services more affordable.
- \$50 million in National Health Service Corps funding to expand access to substance use treatment providers. This funding will help support approximately 700 providers able to provide substance use disorder treatment services, including medication-assisted treatment, in areas across the country most in need of behavioral health providers.
- \$30 million to evaluate the effectiveness of treatment programs employing medication-assisted treatment under real-world conditions and help identify opportunities to improve treatment for patients with opioid use disorders.

This investment, combined with other efforts underway to reduce barriers to treatment for substance use disorders, will help ensure that every American who wants treatment can access it and get the help they need.

Second, the President's Budget includes approximately \$500 million -- an increase of more than \$90 million -- to continue and build on current efforts across the Departments of Justice (DOJ) and Health and Human Services (HHS) to expand state-level prescription drug overdose prevention strategies, increase the availability of medication-assisted treatment programs, improve access to the overdose-reversal drug naloxone, and support targeted enforcement activities. A portion of this funding is directed specifically to rural areas, where rates of overdose and opioid use are particularly high. To help further expand access to treatment, the Budget includes an HHS pilot project for nurse practitioners and physician assistants to prescribe buprenorphine for opioid use disorder treatment, where allowed by state law.

Building on Actions to Address the Opioid Epidemic

In October 2015, the President [announced a number of new public and private sector actions](#) to address this issue, including a Presidential Memorandum on prescriber training and opioid use disorder treatment. He also announced a commitment by more than 40 provider groups that more than 540,000 health care providers will complete training on appropriate opioid prescribing in the next two years. After just over three months, these groups reported that more than 66,000 providers have completed prescriber training to date, putting them on target to meet their goal.

In December, the President signed a bipartisan budget agreement with more than \$400 million in funding specifically to address the opioid epidemic, an increase of more than \$100 million over the previous year. The agreement also [revised a longstanding ban](#) on using federal funds to support syringe service programs, which can help reduce the transmission of HIV and viral hepatitis by confronting one major source of the outbreaks: injection drug use, including opioids.

These actions build on efforts that began in 2010 when the President released his first National Drug Control Strategy, which emphasized the need for action to address opioid use disorders and overdose while ensuring that individuals with pain receive safe, effective treatment. In 2011, the White House released its national [Prescription Drug Abuse Prevention Plan](#), which outlined goals for addressing prescription drug abuse and overdose.

Since then, the Administration has supported and expanded efforts to prevent drug use, pursue "smart on crime" approaches to drug enforcement, improve prescribing practices for pain medication, increase access to treatment, work to reduce overdose deaths, and support the millions of Americans in recovery:

Community Prevention and Overdose Response

- The Office of National Drug Control Policy (ONDCP), in collaboration with the Substance Abuse and Mental Health Services Administration (SAMHSA), supports local Drug-Free Communities coalitions to reduce youth substance use through evidence-based prevention. In recent years, hundreds of these coalitions have specifically focused on prescription drug misuse issues in their areas.
- With support from the Administration, prescriber education programs have been developed to teach medical professionals skills such as how to start a conversation with patients about their substance use; managing pain appropriately; and treating patients

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using opioids more safely. In response to a Presidential Memorandum, federal agencies are leading the way by making certain that their workforce is properly trained. In addition, ten states have passed legislation requiring training for prescribers.

- In FY 2016, HHS will implement the \$10 million Strategic Prevention Framework for Prescription Drugs to raise awareness about the dangers of misusing prescribed medications and to work with pharmacy and medical communities to address the risks of overprescribing to young adults. The FY 2017 Budget continues this effort.
- With support from the Department of Justice (DOJ) and other funders, 49 states have established Prescription Drug Monitoring Programs to help prescribers identify potential opioid misuse issues—up from 30 states at the start of the Administration.
- The federal government is expanding access to prescription drug monitoring program data throughout federal agencies. The Department of Defense's (DoD) Pharmacy Data Transaction Service automatically screens all new medication orders against a patient's computerized medication history and permits DoD physicians to monitor for concerning drug usage patterns. The Indian Health Service has successfully piloted integrating this data into their electronic systems, and a pilot to integrate data into the workflow of physicians in the DoD health system is slated to launch in 2016.
- Through the National Take Back Days to remove unused prescription drugs from communities, the Drug Enforcement Administration (DEA) has collected more than 5.5 million pounds of medication. DEA also finalized a new rule making it easier for communities to establish ongoing drug take-back programs.
- ONDCP has worked with federal, state, and local government agencies and other stakeholders to expand access to the lifesaving opioid overdose reversal drug naloxone, including equipping first responders. Today, hundreds of law enforcement agencies across the country carry and are trained to administer naloxone. Additionally, prior to 2012, just six states had any laws that expanded access to naloxone or limited criminal liability for persons who took steps to assist an overdose victim. Today, 46 states and the District of Columbia have enacted statutes that expand access to naloxone or provide "Good Samaritan" protections for possession of a controlled substance if emergency assistance is sought for a victim of an opioid overdose.
- The Department of Veteran Affairs (VA) supports the Opioid Overdose Education and Naloxone distribution program to help Veterans at risk of an opioid overdose. This program is a key objective of VA's safety initiatives. In the less than two years since the program was implemented, over 12,000 Veterans have received a naloxone kit, and there have been 141 reported reversals as of December 2015.
- In September 2015, CDC launched a \$20 million Prescription Drug Overdose: Prevention for States initiative in 16 states to expand their capacity to put prevention into action in communities nationwide and encourage education of providers and patients about the risk of prescription drug overdose. In 2016, the initiative received a further increase of \$50 million dollars to expand these state prevention activities to a national scale.
- The DOJ Bureau of Justice Assistance released a Law Enforcement Naloxone Toolkit to support law enforcement agencies in establishing naloxone programs. The toolkit has been downloaded more than 2,200 times in the last year.
- DOD is ensuring that opioid overdose reversal kits and training are available to every first responder on military bases or other areas under its control.

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- In 2016, SAMHSA will provide a total of \$12 million specifically to increase use of the overdose reversal drug naloxone. States can use these funds to purchase naloxone, equip first responders with naloxone, and provide training on other overdose death prevention strategies. The FY 2017 Budget will continue these investments and includes an additional \$10 million to address opioid overdose in rural areas, including through expanding access to naloxone.
- In November 2015, the President signed bipartisan legislation, the [Protecting Our Infants Act](#), to help identify evidence-based approaches to care for mothers and their newborns affected by the opioid epidemic.
- In December 2015, the Indian Health Service (IHS) and the Bureau of Indian Affairs announced a new partnership to reduce opioid-related overdoses among American Indians and Alaska Natives. In 2016, the more than 90 IHS pharmacies will dispense naloxone to as many as 500 BIA Office of Justice Services officers and will train these first responders to administer emergency treatment to people experiencing an opioid overdose.
- Using the most recent scientific evidence, the CDC has been working with clinical experts and other stakeholders to develop guidelines on prescribing opioids for chronic pain. The guidelines will be used to help improve the way opioids are prescribed and help providers offer safer, more effective chronic pain treatment, while reducing opioid misuse, abuse and overdose.
- Using its fast-track and priority review systems, FDA recently approved for the first time a nasal spray version of naloxone hydrochloride, providing an easy to administer way to deliver this lifesaving drug. The National Institute on Drug Abuse helped develop this product through a partnership to apply new technology towards developing interventions for opioid overdose.

Treatment

- In FY 2016, SAMHSA will support grants to 22 States to support medication-assisted treatment for opioid use disorders in high need communities. The FY 2017 Budget will expand the number of States that will receive funding to 45.
- In 2016, the Health Resources and Services Administration will award up to \$100 million to Health Centers across the country to improve and expand the delivery of substance use disorder services, with a focus on medication-assisted treatment for opioid use disorders.
- HHS Secretary Burwell announced that the Department will engage in rulemaking related to the prescribing of buprenorphine-containing products approved by the FDA for treatment of opioid dependence to expand access to medication-assisted treatment for opioid use disorders. HHS will take a strategic approach in order to minimize diversion and ensure evidence-based treatment.
- In conjunction with the Budget rollout, HHS also will release Medicaid guidance to States on best practices for addressing the opioid epidemic focused on Medicaid pharmacy benefit management strategies to manage and monitor prescription opioid prescribing, cover medication-assisted treatment, and increase the use of the overdose reversal drug naloxone.

Enforcement and Supply Reduction

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- The White House Office of National Drug Control Policy's High Intensity Drug Trafficking Areas program is funding an unprecedented network of public health and law enforcement partnerships to address the heroin threat across 15 states.
- DEA has deployed a [360 Strategy](#) targeting the opioid epidemic through coordinated law enforcement operations, diversion control and partnerships with community organizations following enforcement operations.
- DOJ's enforcement efforts include targeting the illegal opioid supply chain, thwarting doctor-shopping attempts, and disrupting so-called "pill mills."
- DOJ has cracked down on those who use the Internet to illegally buy and sell controlled substances.
- DEA agents and investigators are integrating with other federal, state, and local law enforcement officers in 66 Tactical Diversion Squads stationed across 41 states, Puerto Rico, and the District of Columbia. Outcomes of this effort include the largest pharmaceutical-related takedown in the DEA's history in an operation that resulted in 280 arrests.
- Since 2007, through the Merida Initiative, the Department of State has been working with the Government of Mexico to help build the capacity of Mexico's law enforcement and justice sector institutions to disrupt drug trafficking organizations and to stop the flow of illicit drugs including heroin from Mexico to the United States.

To learn more about the opioid epidemic or to find treatment options for patients, family or friends, visit www.hhs.gov/opioids

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