



## September Federal Opioids Update

Policymakers in Washington D.C. continue to push ahead with legislation and policies aimed at addressing the opioid epidemic. The President declared this week, September 16-22, as [Prescription Opioid and Heroin Epidemic Awareness Week](#). The focus of the presidential declaration is on increasing awareness and encouraging individuals to support their fellow citizens in overcoming addiction and removing the stigma surrounding substance use disorder.

On Capitol Hill, the Senate passed the [Opioid Crisis Response Act](#), their [opioid package](#), by a vote of 99-1 on Monday, September 17th. The package of 70 Senate bills costs an estimated \$8.4 billion and creates, expands and renews programs across several agencies. While the Senate package contained many provisions to leverage technology in the fight against the opioid epidemic that CHIME has supported, unlike the House bill ([H.R. 6](#)) passed earlier this summer, it did not include language to align patient consent policies for sharing behavioral health and substance abuse records (referred to as 42 CFR Part 2) with the Health Insurance Portability and Accountability Act (HIPAA) rules, a needed change [strongly endorsed](#) by CHIME.

### Telemedicine – MAT for OUD

In recognition of [Prescription Opioid and Heroin Epidemic Awareness Week](#), the Department of Health and Human Services (HHS) announced forthcoming materials (not yet posted as of the release of this document) regarding how clinicians can use telemedicine to expand buprenorphine-based Medication Assisted Treatment (MAT) for opioid use disorder (OUD) treatment under current Drug Enforcement Administration (DEA) regulations. The [blog post](#) announcing this initiative was penned by Assistant Secretary for Health, and HHS' top official on opioids, Adm. Brett Giroir, M.D. Specifically, the clarification is focused on increasing availability of the opioid treatment drug, buprenorphine, which not all physicians are able to prescribe due to the strict DEA waiver process. Buprenorphine is a partial opioid agonist that can reduce cravings for opioids. Using telemedicine, patients in underserved areas will be able to get in touch with a provider at a telemedicine site who has the waiver necessary to treat OUD through buprenorphine. However, the patient must already be receiving treatment from another DEA prescriber, be located within the same state as the waived physician and be obtaining the treatment outside of the Medicare program.

### The Center for Open Data Enterprise Update (CODE)

In July HHS, with the Center for Open Data Enterprise (CODE), hosted an event focused on data sharing and data-driven solutions as a path to address the opioid epidemic via technology. [A report](#) was released as a result of this effort and had a number of issues and solutions identified by the group of over 70 experts representing a diverse collection of stakeholders. Several barriers were identified and classified into legal, cultural and technical barriers that must be addressed in order for the sharing and use of data to be an impactful tool in addressing the crisis. The group identified the ability of clinicians to view the whole picture of a patient's substance abuse history due to constraints around sharing sensitive health information (42 CFR Part 2 issues) as a legal barrier to effective treatment and recommended repealing it in favor of protecting substance abuse information under HIPAA requirements. In addition to a slew of other recommended solutions, the group addressed the need to "generate a unique patient identified for health data" on p. 13 of the report.



### **Food and Drug Administration (FDA)**

On Tuesday, September 18<sup>th</sup>, the Food and Drug Administration (FDA) finalized a guidance regarding the addition of immediate release (IR) opioid painkillers to the [Opioid Analgesic Risk Evaluation and Mitigation Strategy \(REMS\)](#). The new additions to the REMS raise the total opioid analgesic products on the list from 62 to 347 products and cover close to 90% of all outpatient opioid prescriptions. The FDA also released a new [education blueprint](#) for providers that is designed to cut prescriptions through teaching proper pain treatment and raise awareness of the risks of certain opioid-based painkillers.

### **Grants**

This week, HHS also issued a [press release](#) summarizing grants that have been released by different agencies in the Department. However, contained in the release is a funding announcement by the National Institute of Health (NIH) for, “communities hardest-hit by the epidemic to test a comprehensive strategy supported by NIH and other agencies across the federal government.” NIH’s announcement is for six research grants totaling \$9.4 million to, “study the impact of behavioral interventions for primary or secondary prevention of opioid use disorder (OUD), or as a complement to medication-assisted treatment (MAT) of OUD.