House Panel Debates Bills to Boost Docs' Capacity to Combat Addiction

One bill would create 1,000 new residency positions for physicians going into addiction treatment medicine.

March 17, 2020 By Benjamin Ryan

A recent U.S. House Energy & Commerce Health Subcommittee hearing debated a battery of 14 proposed bills that would buttress the health care system's capacity for combating the twin crises of opioid and methamphetamine addiction, MedPage Today reports.

Amid calls from medical experts to expand the clinical workforce that specializes in substance use disorders, the panel discussed HR 3414, known as the Opioid Workforce Act of 2019. The bill would use Medicare funding to back 1,000 new residency positions in addiction or pain medicine programs over five years.

HR 2281, the Easy MAT for Opioid Addiction Act, named for medication-assisted treatment to treat opioid use disorder (OUD), would extend prescribers' ability to dole out buprenorphine, one of the three forms of MAT. Currently, health care providers may prescribe only one day's worth of the treatment at a time for up to three consecutive days as a patient transitions to long-term treatment for OUD. The bill would allow prescribers to write a three-day prescription at one time.

The Mainstreaming Addiction Treatment Act of 2019, or HR 2482, would further ease access to buprenorphine by ending the requirement that physicians obtain a Drug Enforcement Agency waiver before prescribing the treatment long term.

Then there's the Human Correctional Health Care Act, which would end a federal rule that forbids incarcerated individuals from being Medicaid eligible. This shift would help enable inmates to obtain mental health and substance abuse treatment.

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