October 24, 2017

Governor Chris Christie, Chair
President’s Commission on Combating Drug Addiction and the Opioid Crisis
The Office of National Drug Control Policy
The White House
1600 Pennsylvania Avenue, N.W.
Washington, D.C. 20500

Submitted electronically to: Chris.Christie@gov.state.nj.us

Dear Governor Christie:

On behalf of our members, we write to express our appreciation for the opportunity to meet with the President’s Commission on Combating Drug Addiction and the Opioid Crisis on October 20, 2017. We agree that the opioid epidemic is one of the most critical health issues facing Americans today. We reiterate our commitment to building on actions already taken, and to working alongside federal, state, community, and industry leaders to dramatically reduce the chronic condition of addiction.

Health insurance providers are engaged to reduce addiction

AHIP and its member plans will continue to support and promote the Centers for Disease Control and Prevention’s (CDC) Guidelines for Prescribing Opioids for Chronic Pain (Guideline). These Guidelines articulate when and how to prescribe opioids – which include prescribing non-opioid treatments first, limiting both the dosage and the duration of prescription opioids, and reviewing a patient’s medical history to look for risks of addiction.

AHIP’s new Safe, Transparent Opioid Prescribing (STOP) Initiative, launched last week, is an important industry-wide commitment to ensuring widespread adoption of these guidelines. The Initiative includes the introduction of the STOP Measure, which will enable health plans and providers to work together to more effectively improve adherence with the CDC Guidelines, significantly improving patient safety and reducing the risk of opioid misuse.

Health insurance providers will continue to study and promote alternative ways to treat pain, understand and influence prescribing patterns, and ensure patients struggling with addiction get the treatment and support they need. They will also continue to use checks and balances in their own systems to detect any potential prescribing issues, promote other evidence-based approaches to pain management, and limit dosage and duration of opioid prescriptions.

Health insurance providers are committed to mental health parity and substance abuse treatment

We fully agree that those who are struggling with an opioid use disorder need to have timely access to support for recovery and treatment. Health insurance providers offer services to members that include medication assisted treatment (MAT), cognitive behavioral health counseling, and recovery support.
Because individuals struggling with addiction often have other chronic medical and behavioral health conditions, we strongly believe that these services must be customized and coordinated to ensure the best possible opportunity for recovery.

We support the protections established by the federal Mental Health Parity and Addiction Equity Act (MHPAEA), and health insurance providers have been working diligently to implement them. However, mental health parity still faces many issues. For example, the mechanisms to measure quality in mental health are much less developed than those that exist for medical or surgical care. There are no validated standards, certifications or accreditation for behavioral health facilities. Federal rules limit providers’ ability to share substance use information, hindering efforts to support an individual through recovery. Laws and regulations that apply to mental health and substance use disorder treatment are subject to multiple jurisdictions and interpretations, making it difficult to comply with federal and state requirements.

**Modernizing federal guidelines will improve information sharing and mental health parity**

To help improve mental health parity and treatment for those with a substance use disorder, we recommend two actions to modernize federal laws and guidelines:

- The Commission can recommend modernization of 42 C.F.R. Part 2 to allow providers to confidentially share information about a patient’s substance use disorder diagnosis and treatment, for the purpose of improving access to treatment, enhancing treatment quality, and strengthening care coordination.

- The Commission can encourage the Department of Labor and the Department of Health and Human Services to provide guidance to states regarding mental health benefits and parity and to expand awareness regarding federal jurisdiction and state roles. This will help ensure clarity on which rules and guidelines govern, and also assure, that federal and state guidelines do not conflict regarding mental health parity.

**Working together for the health and well-being of Americans**

We are committed to helping America overcome the opioid addiction epidemic. But no one entity can overcome this crisis alone. If we are to succeed, we must all come together – including federal and state leaders, physicians and health care systems, health insurance providers and community organizations, employers, and pharmaceutical manufacturers and distributors. Each of us offers an important perspective into the health care system and the patient experience. We welcome opportunities to collaborate with other stakeholders to find solutions that provide patients with pathways to healing, without increasing their risk of addiction.

Sincerely,

Marilyn B. Tavenner
President and CEO