



Durbin applauds passage of bipartisan opioid legislation

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WASHINGTON – U.S. Senator Dick Durbin (D-IL) today applauded the final Senate passage of a major bipartisan legislative package aimed at addressing the opioid crisis. The bill, named the *SUPPORT for Patients and Families Act*, includes several key initiatives Durbin included to help address both causes and effects of the nation’s worst-ever drug overdose epidemic.

“Our nation is in the midst of the worst drug overdose epidemic in its history—there is no town too small, and no suburb too wealthy to be spared from the grip of opioid addiction. From Chicago to Carbondale, too many families and communities across Illinois are grappling with the deadly and costly consequences of this crisis, and I’m pleased Congress is finally coming together to provide support for those on the front lines,” Durbin said. “There’s much more work to be done to hold the pharmaceutical industry accountable and improve the way we treat addiction in this country, but I’m encouraged that this legislation includes my bills to make historic investments in supporting children who experience trauma, lifting a decades-old restriction on drug treatment, and limiting the flood of 13 billion opioid doses put onto the market each year.”

The legislative package, which passed the House last week, now heads to the President’s desk to be signed into law. The sweeping bipartisan opioid package includes important provisions to address many aspects of the opioid crisis, including new tools for prevention, treatment, recovery, and enforcement. Notably, the legislation broadens the type of practitioners that can offer medication-assisted treatment for opioid addiction, expands tele-health services for opioid treatment, encourages responsible opioid prescribing in Medicare for seniors, supports research into non-addictive pain medication, improves screening at the border and in mail packages for illicit fentanyl, improves state prescription drug monitoring programs, and creates several new grant

programs that provide state funding for naloxone training for first responders, safe disposal of prescription painkillers, recovery housing, and care for mothers and babies born with drug withdrawal.

The legislation includes major provisions authored by Durbin, including:

[The Improving Coverage for Addiction Recovery Expansion \(Improving CARE\) Act](#)

The *Improving CARE Act* is a bipartisan bill Durbin introduced with Senators Rob Portman (R-OH), Sherrod Brown (D-OH), and Ben Cardin (D-MD). The Medicaid Institutions for Mental Disease (IMD) exclusion is an arcane, policy dating back to 1965 that prohibits states from using federal Medicaid dollars to pay for treatment at residential mental health or substance abuse facilities with more than 16 beds. This outdated policy limits access to treatment, hampers behavioral health parity, and prevents many Americans from getting the help they need. Durbin's bipartisan bill lifts this outdated cap, covering all substance-use disorders, so more Americans can access treatment services at these residential facilities. In Illinois, there are several hundred drug treatment beds that fall under this arbitrary restriction, and could now be eligible for expanded access for patients struggling with addiction. The legislation builds off Durbin's efforts over the past several years to lift the IMD Exclusion and expand access to addiction treatment, including the *Medicaid CARE Act*.

[The Opioid Quota Reform Act](#)

The *Opioid Quota Reform Act* is a bipartisan bill Durbin introduced with Senators John Kennedy (R-LA), Dianne Feinstein (D-CA), and Chuck Grassley (R-IA). The legislation will enhance the Drug Enforcement Administration's (DEA) existing opioid quota-setting authority by allowing the DEA to consider addiction, overdose, and public health effects when setting opioid production quota levels. This legislation will preserve access for legitimate medical use while strengthening DEA's ability to sensibly and proactively adjust quotas on the front end to prevent over-supply by the pharmaceutical industry. For too many years, DEA allowed legal opioid production in the United States to skyrocket. Between 1993 and 2015, DEA allowed production of oxycodone to increase 39-fold, hydrocodone to increase 12-fold, and fentanyl to increase 25-fold. As a result, 13 billion opioid doses are now put on the market annually—enough for every adult American to have a three-week supply of painkillers. This sheer volume of available opioids heightens the risk for misuse, as four in five new heroin users first began their addiction with prescription painkillers.

[The Trauma Informed Care for Children and Families Act](#)

The *Trauma Informed Care for Children and Families Act* is a bill Durbin introduced with Senator Heidi Heitkamp (D-ND), and a companion version of which was introduced in the House by U.S. Representative Danny Davis (D-IL), to support children who have been exposed to Adverse Childhood Experiences (“ACE,” such as witnessing violence or parental drug addiction). Decades of research have shown that exposure to violence and other traumatic experiences can over-activate the brain’s stress-response system, inflicting neurological and behavioral harm. Left unaddressed, experiencing trauma in childhood can impact healthy development, leading to chronic disease, mental health challenges, and even fueling the cycle of violence and drug addiction as a way to cope with such emotional scars.

Durbin’s bill includes major reforms to better identify and support children who have experienced trauma by:

- Creating a federal task force to coordinate federal efforts, establish a national strategy, and recommend best practices for identify, referring, and supporting children that have experienced trauma;
- Promoting trauma-informed care in dozens of additional federal grant programs, and improving data collection from states on exposure to Adverse Childhood Experiences by authorizing funding for the Centers for Disease Control and Prevention;
- Creating a new \$50 million mental health in schools pilot program to integrate services, and increase student access to care;
- Increasing the funding authorization by \$17 million (up to \$64 million, the highest-ever funding level) for the National Child Traumatic Stress Network, which provides grants to community organizations and universities to improve trauma-informed care; and
- Investing in the mental health workforce by expanding the National Health Service Corps loan repayment program, and enhancing masters-level graduate school education for behavioral health and social work professionals.

Every day, more than 115 Americans die from an opioid overdose. Since 2013, there has been a 75 percent spike in drug overdose deaths in Illinois, with more than 2,760 lives lost in 2017.