## Congress of the United States

## House of Representatives

COMMITTEE ON OVERSIGHT AND REFORM 2157 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515–6143 MAJORITY (202) 225–5051 MAJORITY (202) 225–5074

Http://oversight.house.gov Hearing on "The Trump Administration's Response to the Drug Crisis: Part II" House Committee on Oversight and Reform 10:00 AM, Thursday, May 9, 2019 2154 Rayburn House Office Building Opening Statement

## Rep. Gerald E. Connolly (D-VA)

Good morning. Earlier today, Members of our Committee had the opportunity to meet with four extraordinary individuals who lost loved ones to our nation's crippling substance use crisis.

We heard from Mr. Kevin Simmers, Ms. Shauntia White, Mr. Bill Sternberg, and Mr. Mike Cannon. They told us about the challenges their families endured while trying to get help for their loved ones in their hours of greatest need. They turned their unbearable pain into inspiring passion to help save lives.

They are here with us now, and I would like to ask them to stand and be recognized. On behalf of the entire Committee, we thank you for sharing your stories and for bringing your commitment and dedication to this battle. I know your determination and urgency are shared by countless other families who are struggling to save their loved ones. Thank you again for everything you have done and continue to do.

Today, the Committee is holding our second hearing on the Trump Administration's response to the opioid crisis. At our first hearing in March, we heard testimony about the Trump Administration's failure to issue a National Drug Control Strategy for two years while tens of thousands of people died.

We also examined the unsatisfactory strategy that the Administration finally issued earlier this year in January. And we heard the Government Accountability Office (GAO) testify that this strategy is deficient and does not comply with basic legal requirements. The strategy lacked enough detail for the Committee or GAO to exercise even minimal oversight or ensure accountability for the tens of billions of dollars we spend annually on drug control efforts.

For these reasons, we told the Office of National Drug Control Policy (ONDCP) that they had to do better. And we told them that we would have them back today to gauge their progress.

The good news is that there have been some improvements. In response to the Committee, ONDCP has now provided several supplements to the strategy it issued earlier this

year. These materials are certainly more useful than what we saw in January, and I thank Director Carroll and the dedicated public servants at ONDCP for the progress they have made.

Unfortunately, the goals in these documents are-to use the most charitable description-

nodest.

For example, there were approximately 70,000 overdoses deaths in 2017. But the pace, more than 200,000 Americans will die between 2019 and 2022 even if ONDCP meets all of their goals. This is a frightening projection.

Here is another one. Right now, only about 10% of people who need addiction treatment can get access to it across the country. The Administration does have some ideas here—their plan says: "Evidence-based addiction treatment, including Medication-Assisted Treatment for opioid addiction, is more accessible nationwide." But when you look at the details, the Administration's plan is to have only 20% of Specialty Treatment Facilities provide this type of Medication-Assisted Treatment by 2022.

We have to do better. We have to fight harder. The opioid crisis is the most devastating health emergency our nation has faced in a generation. And we need a bold strategy to meet this challenge head on.

That is why every Democratic Member of this Committee joined together yesterday to introduce the CARE Act, which stands for the Comprehensive Addiction Resources Emergency Act. This landmark legislation would finally provide stable and sustained resources to expand treatment to those who so desperately need it.

The CARE Act has now been endorsed by more than 200 organizations, including the United, the National Association of Counties, the March of Dimes, the American College of Physicians, and the AFL-CIO. It is supported by doctors, nurses, mental health experts, organized labor, local governments, public health experts, and tribal organizations.

The CARE Act will finally start treating the opioid epidemic like the public health emergency it is. And it will help people in red states, blue states, and purple states who are suffering without adequate access to treatment. These include people just like the loved ones and the family members who were lost by Mr. Simmers, Ms. White, Mr. Sternberg, and Mr. Cannon.

Thank you all again for being here, and I look forward to a productive discussion.

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