Dear Secretary Azar:

As the coronavirus disease of 2019 (COVID-19) pandemic continues to devastate the country, Congress and the Energy and Commerce Committee are focused on fighting this unprecedented public health crisis. With over 160,000 American lives lost, we must continue to work to ensure the federal government, states, local communities, and health care providers have the tools they need to respond effectively to this pandemic.

While we continue to combat the COVID-19 crisis, we cannot lose sight of another: the ongoing substance use disorder (SUD) and overdose crisis that our country has been battling for decades. Since 1999, over 750,000 Americans have died from drug overdoses,\(^1\) representing the worst drug crisis in American history, and we are concerned that overdose deaths are increasing while attention is focused on COVID-19.\(^2\)

In 2018, the number of fatal drug overdoses decreased for the first time in over two decades, but last year, overdose deaths increased to an all-time high.\(^3\) According to the National


\(^2\) *Cries for help*: Drug overdoses are soaring during the coronavirus pandemic, Washington Post (Jul. 1, 2020).

\(^3\) *Fatal overdoses climbed to record high in 2019, reversing historic progress*, Politico (Jul. 15, 2020); *U.S. life expectancy ticks up as drug fatalities and cancer deaths drop*, Washington Post (Jan. 30, 2020).
Center for Health Statistics, the reported number of drug overdose deaths occurring in the U.S. increased by 4.6 percent between 2018 and 2019, from 67,850 to 70,980.\(^4\)

Now, recently reported increases in overdose deaths during the COVID-19 pandemic threaten to exacerbate these trends.\(^5\) According to the Washington Post, data indicates that, compared to the year before, suspected overdoses nationwide increased 18 percent in March, 29 percent in April, and 42 percent in May.\(^6\) The New York Times recently reported that “[i]n New Jersey, where drug-related deaths had leveled off, overdose deaths in the first half of 2020 were 17 percent higher than in 2019. In Colorado, they were up by 30 percent through March.”\(^7\) Similarly, Kentucky experienced an estimated “25 percent increase in overdose deaths between January and March while other state data shows a rise in emergency department visits and [emergency medical service (EMS)] calls connected to overdoses increasing between March and June,” while West Virginia experienced approximately 50 percent more EMS calls related to overdoses in May as compared to earlier in the year.\(^8\)

Recent reports indicate that the COVID-19 pandemic is exacerbating the overdose crisis, as more Americans are isolated, suffering from depression and economic hardship, and hesitant or unable to seek treatment.\(^9\) Dr. Nora Volkow, Director of the National Institute on Drug Abuse (NIDA) at the National Institutes of Health (NIH), recently stated, “[t]he concerns we have are related to the big challenges people are facing right now with [COVID-19]: isolation and uncertainty resulting in very high levels of stress.”\(^10\) In addition, during a discussion between NIH Director Dr. Francis Collins and NIDA Director Dr. Nora Volkow on how the COVID-19 pandemic may be escalating the opioid crisis, Dr. Volkow noted that one of the first things they have heard from the communities and the families afflicted by addiction is “that the support systems that were there to actually help them achieve recovery are no longer present.

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\(^6\) See note 2.


\(^8\) Pandemic unleashes a spike in overdose deaths, Politico (Jun. 29, 2020).

\(^9\) Id.; see note 2.

\(^10\) See note 8.
same time, access to some of the treatment programs has become much harder to get by and that actually includes emergency departments.”

Further complicating matters are reports that some SUD treatment centers have closed, and the COVID-19 pandemic has “put on hold a billion-dollar research program focused on new forms of addiction treatment, as part of a broader freeze on non-[COVID-19] work at the National Institutes of Health.”

The Congress and this Committee have a long history of oversight and legislation focused on the nation’s SUD crisis, including providing billions of dollars for states and local communities to increase SUD services. Key examples of this Committee’s oversight work include extensive bipartisan oversight and investigations into the origins of the opioid epidemic, the rise of fentanyl in the U.S., patient brokering and the SUD treatment industry, and the distribution and manufacturing of opioids.

In addition to robust oversight, this Committee championed and passed numerous bills that became law. The Comprehensive Addiction and Recovery Act (CARA) was signed into law by President Obama on July 22, 2016, and addresses the full continuum of care from prevention to recovery support. Provisions spearheaded by the Committee and included in CARA included addressing prevention and education; treatment and recovery; addiction and treatment services; and incentives for state comprehensive initiatives to address prescription opioid abuse, among other things. CARA also authorized over $181 million to respond to the opioid epidemic.

This Committee also spearheaded the 21st Century Cures Act (CURES), which President Obama signed into law on December 13, 2016. While the law is broader than combatting the opioid crisis, CURES designated $1 billion in grants for states over two years to fight the opioid epidemic. The Committee also passed the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act, which President

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12 See note 2; Fatal overdoses climbed to record high in 2019, reversing historic progress, Politico (Jul. 15, 2020).

13 Pandemic unleashes a spike in overdose deaths, Politico (Jun. 29, 2020).


Trump signed into law on October 24, 2018. The SUPPORT Act reauthorized opioid-specific grant funding and expanded access to SUD treatment and resources, increased opioid abuse and overdose prevention training, improved care coordination to enhance the quality of SUD care, and contained provisions to strengthen the U.S. Food and Drug Administration’s and law enforcement’s ability to combat illicit opioids.

Now, as the rising use of stimulants such as cocaine and methamphetamine threaten to become the “fourth wave” of the SUD crisis, we must remain vigilant.

We wrote to you in January about increasing stimulant use in the U.S., and we appreciate the briefing provided to the Committee on those issues. We now request that you provide Committee staff an updated briefing on the latest trends in substance use and overdoses, how those trends are affected by the COVID-19 pandemic, and what more the federal government needs to do to address this growing crisis.

The world’s public health experts, governments, and industries are focused on the COVID-19 pandemic – and that work continues, but we must not become complacent about other threats that our country faces, nor allow the progress we have made to become undone.

Thank you for your assistance. If you have any questions about this request, please contact Kevin McAloon of the Majority staff at (202) 225-2927 or Alan Slobodin of the Minority staff at (202) 225-3641.

Sincerely,

Frank Pallone, Jr.
Chairman

Greg Walden
Ranking Member

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The Honorable Alex M. Azar II
August 10, 2020
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