

December 6, 2023

The Honorable Bernie Sanders Chairman Committee on Health, Education, Labor and Pensions **United States Senate** 428 Dirksen Senate Office Building Washington, D.C. 20510

The Honorable Bill Cassidy Ranking Member Committee on Health, Education, Labor and **Pensions United States Senate** 428 Dirksen Senate Office Building Washington, D.C. 20510

Dear Chairman Sanders and Ranking Member Cassidy:

On behalf of the American Academy of Family Physicians (AAFP), representing more than 129,600 family physicians and medical students across the country, I write to express our strong support for the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Reauthorization Act (S. 3393), which includes a technical fix to ensure trained family physicians can continue to provide necessary care, including substance use disorder (SUD) treatment.

The Medication Access and Training Expansion (MATE) Act was passed as part of the Consolidated Appropriations Act (CAA) of 2023. This law requires prescribers of controlled substances in schedules II, III, IV, and V to complete a one-time eight-hour training before registering or renewing their registration with the Drug Enforcement Agency (DEA). As detailed in the law, the training must focus on "treatment and management of patients with opioid or other substance use disorders, or the safe pharmacological management of dental pain and screening, brief intervention, and referral for appropriate treatment of patients with or at risk of developing opioid or other substance use disorders."

The AAFP accredits other organizations' trainings, including many that are closely aligned with the Substance Abuse and Mental Health Services Administration's (SAMHSA) guidance for MATEcompliant trainings, that are specifically tailored for primary care, family medicine, and non-physicians who work with family physicians. Unfortunately, due to interpretation of the statute by SAMHSA and DEA and their decision to not proceed with statutorily authorized rulemaking, AAFP accredited trainings were not deemed compliant.

As a result, thousands of family physicians will be required to retake CME courses that are either duplicative of past trainings or not pertinent to their practice, patient population, and specialty. They will need to take time away from their patients or risk losing the ability to prescribe medications for their patients — both of which are contrary to the MATE Act's original goal of improving SUD screening and treatment. This result is an unnecessary and significant time and administrative burden on family physicians and is not aligned with Congressional intent of the statute.

The AAFP Credit System has certified individual CME activities since 1948. AAFP-accredited CME activities account for 68,050 current AAFP members that have already completed 8 hours/credits or more of education on management of patients with OUD/SUD and safe prescribing since 2017.

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Additionally, the AAFP has approved over 4,000 educational sessions with over 9 million credits in these topic areas since 2020.

Family physicians provide comprehensive mental health services and are a major source for mental health care in the U.S. They play a crucial role in safe pain management prescribing practices, screening patients for opioid use disorder (OUD), and prescribing and maintaining treatment of medications for OUD (MOUD). Primary care physicians are often the first point of care for patients and can provide necessary referrals or coordinate care with psychiatric and other mental health professionals when needed.

Section 403 makes a critical technical fix that ensures more than 129,000 family physicians have access to appropriate training for their specialty and patient population each year and gain access to large professional communities of family and osteopathic physicians who do not participate in many of the CME activities offered by Accreditation Council for Continuing Medical Education (ACCME) accredited providers. It also helps ensure that many patients do not experience potential disruptions in their access to ongoing or new care.

We are sincerely grateful for your bipartisan leadership on these issues and we look forward to passage of the *SUPPORT Reauthorization Act* to ensure that trained family physicians can continue to provide timely, undisrupted treatment to their patients, including those with SUD. Should you have any questions, please contact Natalie Williams, Senior Manager of Legislative Affairs at <a href="mailto:nwilliams2@aafp.org">nwilliams2@aafp.org</a>.

Sincerely,

Tochi Iroku-Malize, MD, MPH, MBA, FAAFP

American Academy of Family Physicians, Board Chair