



May 31, 2016

Principal Deputy Administrator Kana Enomoto
Substance Abuse and Mental Health Services Administration
Department of Health and Human Services
5600 Fishers Lane
Rockville, Maryland 20857

Re: RIN 0930–AA22, Medication Assisted Treatment for Opioid Use Disorders

Dear Ms. Enomoto:

The American Society of Anesthesiologists (ASA) is pleased to comment on the proposed rule to increase the highest patient limit for qualified physicians to treat opioid use disorder. As the medical specialty representing the largest number of practicing pain medicine physicians, ASA has significant interest in reducing the misuse, abuse, and diversion of opioid medications that have led to unintended deaths. Below, ASA offers comments on the importance of expanding access to comprehensive addiction treatment as part of a multipronged solution to addressing the prescription opioid epidemic.

SAMSHA should encourage all physicians to utilize a comprehensive treatment approach for opioid use disorder, and particularly those who want to increase their patient limit for medication assisted treatment (MAT). Section 8.615 of the proposed rule states that a qualified practice setting, among other requirements, “provides access to case management services for patients including referral and follow-up services for programs that provide, or financially support, the provision of services such as medical, behavioral, social, housing, employment, educational, or other related services.” SAMSHA should strengthen this requirement so physicians provide the full spectrum of treatments for opioid use disorder, including MAT, individual or group therapy, and other evidence-based interventions. While MAT is necessary for some patients’ successful recovery, it is not a sufficient standalone treatment and CMS should strongly encourage physicians who provide MAT to also provide other comprehensive, evidence-based interventions.

While it is essential to expand access to addiction treatment, doing so does not address the root causes of the prescription opioid epidemic. To that end, ASA strongly encourages SAMSHA and other agencies within HHS to further support the use of multimodal, multidisciplinary pain management which may prevent opioid use or decrease reliance on opioids. It is also a health care safety and quality imperative to expand investment into basic and clinical research on the biopsychosocial mechanisms that produce and maintain chronic pain, to develop innovative non-

opioid therapies to treat acute and chronic pain, to develop improved treatments for acute pain that minimize the use of opioids, and to foster a greater understanding by physicians and the public on the rational and safe use of opioids.

ASA is pleased to comment on this matter and appreciates SAMSHA's efforts to improve access to treatments for opioid use disorder. We welcome the opportunity to work with SAMSHA and other federal stakeholders on efforts to address the root causes of the prescription opioid abuse epidemic and to expand access to addiction treatment for opioid use disorder.

Sincerely,

A handwritten signature in black ink that reads "Daniel Cole". The signature is written in a cursive, flowing style.

Daniel Cole, M.D.
President
American Society of Anesthesiologists