## United States Senate

## WASHINGTON, DC 20510

May 25, 2022

The Honorable Patty Murray Chair Subcommittee on Labor, Health and Human Services, Education and Related Agencies Committee on Appropriations Washington, D.C. 20510 The Honorable Roy Blunt Ranking Member Subcommittee on Labor, Health and Human Services, Education and Related Agencies Committee on Appropriations Washington, D.C. 20510

Dear Chair Murray and Ranking Member Blunt:

Thank you for your leadership of the Senate Labor, Health and Human Services, Education, and related Agencies (L-HHS) Appropriations Subcommittee and for your commitment to addressing the devastating substance use disorder (SUD) crisis affecting our country. We appreciate your dedication to strengthening overdose surveillance and monitoring in the Fiscal Year (FY) 2022 funding bill, and we urge you to again provide robust funding in FY23 for evidence-based drug overdose prevention and surveillance and ensure this funding may be used to track and prevent all drug-related overdoses, including opioids, stimulants, benzodiazepines, and poly-substance related overdoses.

Robust funding for the Overdose Data to Action program at the Centers for Disease Control and Prevention (CDC) that is not limited to initiatives focused on opioids or stimulants will strengthen overdose surveillance and prevention activities and continue to provide critical support to communities and states across the country as the addiction crisis continues to evolve and overdose deaths surge. We commend the Subcommittee for directing the CDC to expand its prevention and surveillance efforts under the CDC's Overdose Data to Action program to stimulants in its FY22 mark, and we encourage you to build on this program by providing the CDC with additional flexibility to extend prevention and surveillance efforts to address emerging substances, such as synthetic opioids and cannabinoids. Providing the CDC with the flexibility to respond to emerging substances contributing to overdose harm will allow the agency to meet the needs of states and communities working to address substances causing the most harm.

As the Committee is aware, the addiction crisis continues to take a devastating toll on our nation. According to the CDC, drug overdoses caused 91,799 deaths in 2020, a 31 percent increase from 2019 and by far the highest annual total on record. Deaths from drug overdoses affect the entire United States population – spanning race, gender, and age, but disproportionately affect communities of color and rural counties. Timely and accurate data are vital for making important policy decisions by helping to identify trends and prioritize resources.

The CDC's Overdose Data to Action program currently provides funding for extensive overdose surveillance activities to 47 states, two territories, 16 localities, and 11 tribal centers. This funding helps improve the tracking of drug-involved overdoses, both fatal and nonfatal, and helps capture comprehensive information on toxicology, death scene investigations, route of administration, and other risk factors associated with fatal overdoses. It also supports syndromic

surveillance of emergency department and emergency medical services data to identify patterns in nonfatal overdoses, and identify and address emerging drug threats, such as the uptick in methamphetamine and cocaine related deaths. Furthermore, the program is a pioneer in tracking the linkage to care continuum, so that we can better understand the barriers that people face in accessing treatment and successfully completing treatment after a nonfatal overdose. Surveillance findings are disseminated to key stakeholders in a timely manner to inform effective, evidence-based overdose prevention and response efforts. Finally, the CDC's Overdose Data to Action program helps build harm reduction strategies and strengthen resiliency in communities – an aspect of the program that has been especially important during the COVID-19 pandemic when individuals are more isolated.

Furthermore, portions of this surveillance funding directly support medical examiners and coroners, including comprehensive toxicology testing. The program also partners with labs to conduct more testing for nonfatal cases. The addiction crisis has not only besieged the health of our nation but also overwhelmed the capacity of our forensic medicine community. By allocating funding to forensic medicine services, the overdose surveillance program provides valuable support for all of our public health professions working on the grave frontlines of the drug addiction crisis.

Robust funding for the CDC's Overdose Data to Action Program will strengthen surveillance systems, including integration with state Prescription Drug Monitoring Programs for identification and overdose prevention. The program has developed innovative harm-reduction strategies that focus on increasing access to vital medications such as naloxone and ensuring that these medications are being used effectively. Expanding and strengthening these surveillance programs will ensure we have the data necessary to engage in effective prevention efforts and turn the tide against the fast-moving epidemic of overdoses.

We recognize your commitment to careful consideration of the many domestic health, labor, and education programs that require assistance in FY23, and thank you for your continued leadership. We urge you to make the collection of timely and accurate overdose data in the U.S. a top priority by providing robust funding in FY23 for the CDC's Overdose Data to Action surveillance and prevention programs, and ensuring the funding made available can be used to address the full spectrum of the addiction epidemic, including opioids, stimulants, benzodiazepines, new synthetics, and poly-substance use.

Sincerely,

Sherrod Brown

**United States Senator** 

Jeanne Shaheen

United States Senator

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