



AMERICAN BENEFITS COUNCIL

September 27, 2018

The Honorable Mitch McConnell
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Paul Ryan
Speaker
United States House of Representatives
Washington, DC 20515

The Honorable Chuck Schumer
Minority Leader
United States Senate
Washington, DC 20510

The Honorable Nancy Pelosi
Minority Leader
United States House of Representatives
Washington, DC 20515

Dear Leader McConnell, Leader Schumer, Speaker Ryan and Leader Pelosi:

The American Benefits Council (the Council) supports the Substance Use–Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (H.R. 6). We urge Congress to approve this measure as an important step toward addressing the nation’s opioid addiction crisis.

The Council is a public policy organization representing principally Fortune 500 companies and other organizations that assist employers of all sizes in providing employee benefits. Collectively, the Council’s members sponsor directly or provide services to retirement and health plans covering over 100 million Americans.

The opioid epidemic has touched workers and families across the country and employers have been on the front lines of this battle, striving to stem the tide of prescription drug abuse through innovative plan design and outreach. A Kaiser Family Foundation analysis found that the use of prescription opioids among people with employer-based health coverage declined in 2016 to its lowest levels in over a decade.

Nevertheless, the annual cost of treating addiction and overdoses has increased more than eight-fold since 2004, from \$0.3 billion dollars to \$2.6 billion in 2016,¹ and pain-related conditions have resulted in up to \$635 billion in medical costs and lost productivity for employers.²

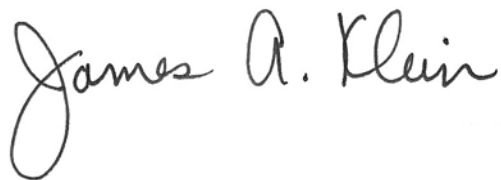
H.R. 6 makes a number of important improvements to current law by reducing the use and supply of opioids, encouraging recovery, supporting caregivers and families and driving innovation and long-term solutions to the opioid addiction epidemic. The bill also imposes tighter control on opioid prescription and treatment under the Medicare and Medicaid programs while also clarifying FDA regulation of non-addictive pain and addiction therapies and allowing for more flexibility with respect to medication-assisted treatment.

We are particularly pleased that the conference committee wisely excluded from the bill a harmful, unrelated provision that would have that revised the Medicare secondary payer rules to require private insurers – including employer plans – to pay for an additional three months of care for end-stage renal disease (ESRD) patients before Medicare assumes responsibility for the payments.

The Council strongly opposed this provision, as employers already shoulder significant costs for workers and family members and should not be required to bear unrelated additional costs by expanding the length of time plans must cover ESRD.

We applaud Congress for developing legislation that will make America healthier, including many of the 181 million people covered by employer-provided health plans.

Sincerely,

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

President

cc: All members, U.S. Senate and House of Representatives

¹ Kaiser Family Foundation, Analysis: Cost of Treating Opioid Addiction Rose Rapidly for Large Employers as the Number of Prescriptions Has Declined, April 5, 2018

² Institute of Medicine, Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education, and Research, The National Academies Press, 2011