

THE OVERDOSE CRISIS

The United States is currently in the midst of an overdose crisis. In the year-period ending in April 2021, over 100,000 people died from preventable overdoses - the worst year in recorded history. No matter what we look like or where we come from, the overdose crisis reminds us that we are all human. Our ability to get and stay well depends on everyone having what we need to prevent, treat, and recover from illness.

The War on Drugs created the overdose crisis, by criminalizing and punishing people who use drugs instead of offering them public health solutions like treatment. Pharmaceutical and insurance corporations have shamelessly profited by overprescribing addictive drugs like oxycontin, creating a full-blown public health catastrophe to line their own pockets.

Yet we still punish people who use drugs instead of offering them treatments that save lives. The Drug Enforcement Agency's X-Waiver requirement stops doctors, nurses and physicians' assistants from prescribing buprenorphine, a highly effective form of Medication Assisted Treatment (MAT), to patients. Based on three decades of evidence, public health experts now widely agree MAT, which reduces withdrawal symptoms and prevents relapse, is the most effective way to save the lives of those with opioid use disorder. MAT is the gold standard for treatment of opioid use disorder, and buprenorphine is considered especially effective.¹

The overdose crisis is ravaging our communities, and the redundant, outdated and stigmatizing X-Waiver requirement stops people from getting care that can save their lives. It most deeply harms Black, brown and rural communities. Black individuals who seek treatment are far less likely to be offered life-saving MAT than white individuals.² To effectively respond to the urgency of the overdose epidemic, we need to eliminate barriers like the X-Waiver that prevent healthcare practitioners from providing evidence-based treatments like buprenorphine for substance use disorders.

The MAT Act will remove this barrier to treatment and save lives, which is why we need it now.

WHAT IS THE MAT ACT?

MAT Act: The Mainstreaming Addiction Treatment Act eliminates the redundant, outdated and stigmatizing requirement that practitioners apply for a separate waiver through the Drug Enforcement Administration (DEA) to prescribe buprenorphine for the treatment of opioid use disorder. (H.R.1384 / S.445)

Now is the time to stand up and demand proven solutions like the Mainstreaming Addiction Treatment (MAT) Act of 2021 (H.R.1384 / S.445). The MAT Act would eliminate the DATA 2000 WAIVER requirement

¹ National Academies of Sciences, Engineering, and Medicine. 2019. [Medications for Opioid Use Disorder Save Lives](#). Washington, DC: The National Academies Press.

² William C Goedel, BA; Aaron Shapiro, MD, MPH; Magdalena Cerda, DrPH; et al. [Association of Racial/Ethnic Segregation with Treatment Capacity for Opioid Use Disorder in Counties in the United States](#). April 22, 2020.

that discourages practitioners from integrating treatment in their practices and perpetuates stigma in the medical community against patients who would benefit from buprenorphine treatment.

These compassionate approaches to treatment and recovery services can help reduce overdose mortality, as well as help some people sustain recovery. With record breaking overdose rates in 2020, we need to immediately invest in measures that save lives. We can pull through this crisis by pulling together and supporting evidence-based solutions like the MAT Act.

The MAT Act has bipartisan support in both the House and Senate with over 100 co-sponsors representing both parties.

House Lead Sponsors (H.R. 1384): Paul Tonko (D-NY), Mike Turner (R-OH), Antonio Delgado (D-NY), Anthony Gonzalez (R-OH)

Senate Lead Sponsors (S. 445): Maggie Hassan (D-NH), Lisa Murkowski (R-AK)

A coalition of 420 organizations have signed on in support of the MAT Act as of February 2022.

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For more information about People's Action and/or the Overdose Crisis Cohort, please contact:

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