

HOUSE JOINT RESOLUTION 399

By DeBerry

A RESOLUTION to recognize recovery houses in Tennessee that use the Medication Assisted Treatment (MAT) for Opioid Use Disorder.

WHEREAS, the opioid epidemic is one of America's most debilitating crises, resulting in loss of life, productivity, and increased healthcare expenditure; and

WHEREAS, in 2017, Tennessee suffered 1,300 opioid overdose deaths and 8,000 hospitalizations from opioid misuse, with a rate of 19.4 opioid deaths per 100,000 citizens compared to the national average of 14.6; and

WHEREAS, Medication Assisted Treatment (MAT) remains the medical gold standard of care to reduce long-term opioid use and prevent relapse; and

WHEREAS, MAT using buprenorphine/naloxone or methadone has been proven to significantly reduce illicit drug use, increase productivity, and reduce healthcare costs in patients with substance use disorders; and

WHEREAS, the ideal treatment for opioid addiction targets medical problems as well as social barriers to recovery; and

WHEREAS, TennCare targets medical and social barriers to recovery by covering MAT, inpatient hospital addiction treatment, and long-term stays at recovery houses; and

WHEREAS, recovery houses have historically prohibited medication for opioid use disorder; and

WHEREAS, internally collected survey data show that 14/16 (88 percent) of Tennessee recovery houses require either complete abstinence or enforced mandatory tapering of the patients' MAT during their stay; and

WHEREAS, patients discharged from a hospital without MAT are more than twice as likely to be readmitted within thirty days; the average length of inpatient stay for opioid addiction treatment is seven days, and the cost of each inpatient day at a Tennessee hospital is \$1,984, making the cost of each readmission \$13,888; and

WHEREAS, the American Medical Association endorses the elimination of barriers to MAT and increasing awareness of MAT as first line treatment for substance abuse disorder; and

WHEREAS, the American Medical Association endorses MAT as an effective therapy in treating opiate-addicted incarcerated patients and encourages correctional facilities to increase access to evidence-based treatment of opioid use disorder; now, therefore,

BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE ONE HUNDRED ELEVENTH GENERAL ASSEMBLY OF THE STATE OF TENNESSEE, THE SENATE CONCURRING, that we honor and commend those recovery houses in Tennessee that allow patients to remain on medication-assisted treatment as prescribed by a provider, including buprenorphine/naloxone combinations, without restrictions or mandatory tapering of doses.

BE IT FURTHER RESOLVED, that an appropriate copy of this resolution be prepared for presentation with this final clause omitted from such copy.