ADA American Dental Association®

1111 14th Street, N.W. Suite 1200 Washington, DC 20005

June 6, 2018

The Honorable Orrin Hatch Chairman Senate Committee on Finance 219 Dirksen Senate Office Building Washington, DC 20510 The Honorable Ron Wyden Ranking Member Senate Committee on Finance 219 Dirksen Senate Office Building Washington, DC 20510

Dear Chairman Hatch and Ranking Member Wyden:

On behalf of our 161,000 dentist members, we would like to share our thoughts on the series of bills you will be marking up to combat the opioid crisis. A number of the proposals being considered would complement our ongoing efforts to keep prescription opioid pain medications from becoming a source of harm in our communities.

First, we urge you to include dentists on any advisory panels charged with developing recommendations to help reduce opioid prescribing in clinical settings. To date, the federal response to the opioid crisis has not sufficiently distinguished pain management in dentistry from pain management in medicine, specifically when it comes to managing acute pain versus chronic pain. A dental perspective would close both of these gaps.

Second, we applaud you for considering proposals that would strengthen the kinds of recovery support services that are so vital to those beginning their lifelong journey of recovery.

For more than twenty years, the ADA has been helping state dental societies develop peer assistance programs to get dentists into treatment before they have an alcohol- or drug-related incident. These programs leverage the confidentiality, trust, and understanding of a tightly knit profession to support dentists throughout their recovery, and help them establish some measure of long-term stability in their lives.

As you know, the ADA recently expressed support for mandatory continuing education for opioid prescribers, limits on the number of pills that can be prescribed for initial acute pain, and mandatory use of PDMPs. We believe our policy is the first of its kind among major healthcare professional organizations and a sign of how seriously we take this issue.

Our main criticism of the federal response to the opioid crisis is that it has not sufficiently distinguished pain management in dentistry from pain management in medicine, specifically when it comes to managing acute pain versus chronic pain. For that reason, the federal response to the opioid crisis has not been particularly helpful to dentists. We hope you will keep this in mind as these bills move forward.

We applaud the Committee's leadership in helping to alleviate the scourge of opioid abuse that has been devastating our families and communities. If you have any questions, please contact Ms. Natalie Hales at 202-898-2404 or halesn@ada.org. Information is also available at ADA.org/opioids.

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Sincerely,

/s/

/s/

Joseph P. Crowley, D.D.S. President

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Kathleen T. O'Loughlin, D.M.D., M.P.H. Executive Director