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April 7, 2020

Rep. Connie Bernardy  
563 State Office Building  
100 Dr. Rev. Martin Luther King Jr. Blvd  
St. Paul, MN 55155

Dear Chair Bernardy:

As the Chief of Addiction Medicine at Hennepin Healthcare (HCMC), I am writing today to thank you for including House File 1283 into your omnibus bill. The bill, authored by Rep. Erin Koegel, provides funding for the only addiction medicine fellowship in Minnesota which is housed between the University of Minnesota's Department of Psychiatry and HCMC's addiction medicine division.

There are 23 million Americans that have a substance use disorder. However, nationwide there are less than 3,000 physicians specially trained to treat them. Our addiction fellowship trains three physicians per year on caring for people with substance use disorder and other addictive disorders. The goal of the fellowship is to train physicians to become experts in the prevention, clinical evaluation, treatment, and ongoing care of those with addiction.

With the lack of addiction medicine physicians, only 11% of people nationally are being treated for their addiction. There are 32 rural Minnesota counties that do not have any providers that have obtained the necessary federal approval to prescribe the drug buprenorphine, a medication for addiction treatment. This shortage of specialists is threatening to stall a national movement to bring the prevention and treatment of SUD into the mainstream of American medicine at a time when millions of people with addictions have a greater ability to pay for treatment thanks to insurance.

**Coming from a safety-net hospital, we understand budget constraints which is why we are so thankful to be included within your budget this year. However, we think we could make a case for using American Rescue Plan (ARP) dollars to fund additional years. National and state data shows that consequences of the pandemic, including stress, grief, isolation and economic insecurity, have had a detrimental impact on mental health and increased reliance on substance use and overdose deaths are up significantly in the last year. Further, people with substance use disorders are at increased risk of acquiring covid-19 disease and suffering its consequences.**

Unlike the federal Cares Act funding which restricted state spending to pandemic-related expenses, states can use ARP dollars to respond to the public health emergency and we believe the increase of overdoses would meet the definition of public health emergency. Here is some data to prove it:

- [The CDC provisional drug overdose death count](#), shows a 30% increase in overdose deaths in Minnesota since the pandemic.
- The [Overdose Detection Mapping Application Program \(ODMAP\)](#) data, a surveillance system that provides near real time suspected overdose data nationally, shows a 17.59% increase in suspected overdoses following the enactment of stay-at home orders

- A retrospective study of the National Emergency Medical Services Information System (NEMSIS), a large registry of more than 10,000 EMS agencies in 47 states, which showed an increase in the initial months of the pandemic in overdose deaths. The highest rates were in May 2020 and were more than double the baseline from 2018 and 2019. So far, the overall 2020 values were elevated by approximately 50%.

Additional funding for the only Addiction Medicine Fellowship program in our state will strengthen the health care workforce and incentivize specialists to train and stay in Minnesota. If the state could train an additional 15 addiction specialists over the next five years, it would be a wise use of those federal funds.

Again, thank you for your support and please reach out to HCMC's contract lobbyist, Tara Erickson, at [Tara@TGEconsultingmn.com](mailto:Tara@TGEconsultingmn.com) if you have any questions.

Sincerely,

**Gavin Bart,** Digitally signed by  
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