

May XX, 2021

The Honorable Patty Murray
Chairwoman
Subcommittee on Labor, Health and Human
Services, Education and Related Agencies
Senate Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Roy Blunt
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education and Related Agencies
Senate Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Rosa DeLauro
Chairwoman
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
House Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Tom Cole
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
House Committee on Appropriations
United States House of Representatives
Washington, DC 20515

Subject: FY22 CDC Infectious Diseases and the Opioid Epidemic Program Funding Request

Dear Chairwoman Murray, Chairwoman DeLauro, and Ranking Members Blunt and Cole:

The undersigned **XXX** public health, harm reduction, HIV, hepatitis, criminal justice reform, and community-based organizations urge you to increase critical funding to respond to the dramatic and ongoing overdose crisis by providing **\$120 million for the Infectious Diseases and the Opioid Epidemic program at the Centers for Disease Control and Prevention (CDC) in the Department of Health and Human Services (HHS) in the Labor, HHS appropriations bill**. Funding increases would support and expand access to overdose prevention and syringe services programs (SSPs) to help stem the dramatically increasing number of overdose deaths. Additionally, we urge you to end the ban on the use of federal funding for syringes.

The United States is experiencing an ongoing drug overdose crisis, with more than 100,000 overdose deaths expected to be counted in 2020 and potentially that many in calendar year 2021. Overdose deaths recorded during 2020 are expected to have increased by more than 40% over the previous record year of 2019. SSPs effectively help prevent drug overdoses. They have the knowledge, contacts, and ability to reach people who use drugs; they provide naloxone and other overdose prevention resources; and they connect people to medical care and support, including Substance Use Disorder treatment. Congress must provide essential funding to support and expand access to syringe services programs at this critical time when their services are desperately needed to save lives. Approximately half of SSPs are experiencing reduced resources now and/or expect budget cuts as a result of the economic pressures of COVID-19. Additionally, Congress should remove federal restrictions on the use of syringes, which are critical to the functioning of SSPs and effectively help to prevent the spread of infectious diseases.

Overdose deaths have increased more dramatically among Black people and communities of color. From 2015 to 2018, overdose deaths among African Americans more than doubled (by 2.2 times) and among Hispanic people increased by 1.7 times while increasing among white, non-Hispanic people by 1.3 times. SSPs are effective at distributing naloxone - a drug which can prevent overdose deaths - both to people at risk of overdose as well as to other community members. A study from Massachusetts found a 46% reduction in opioid overdose mortality rates with substantially increased access to naloxone. With

additional resources, SSPs could increase ready access to naloxone and its use, which would help reduce the overdose deaths.

Currently, the nation has insufficient access to SSPs and most people at risk from overdose need significantly increased access to services. According to the North American Syringe Exchange Network (NASEN), there are approximately 400 SSPs operating nationwide. Experts estimate that to sufficiently expand access to SSP programs, *the U.S. would require approximately 2,000 programs - 5 times the number in existence now.* The requested funding increase could provide a 10% increase to currently operating SSPs to help address funding cuts and shortfalls as well as expand the number of SSPs nationwide by approximately 50 programs. These additional resources are urgently needed to reduce overdose deaths and the spread of costly infectious diseases.

Finally, expanding access to SSPs will reduce health care costs, including for infectious diseases treatment. The rise in injection drug use associated with opioid use disorder over the past decade is largely responsible for the 380% increase in hepatitis C cases and has been the cause of HIV outbreaks in communities across the nation. Hepatitis C treatment can cost more than \$30,000 per person, while HIV treatment can cost upwards of \$560,000 per person. Averting even a small number of cases has the potential to save millions in treatment costs in a single year.

To help the nation respond to this urgent overdose crisis, we urge Congress to provide \$120 million in funding for the Infectious Diseases and the Opioid Epidemic program at CDC/HHS in the LHHS appropriations bill and to remove language banning the use of federal funding for syringes.

Thank you for your time and consideration of this critical request. If you have questions or need additional information, please do not hesitate to contact William McColl, senior consultant with Collier Collective at bmccoll@colliercollective.org. Thank you.

Sincerely,
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