A MEMORIAL

REQUESTING THE DEPARTMENT OF HEALTH TO CREATE A TASK FORCE TO IDENTIFY THE NEED FOR AND BARRIERS TO ACCESS TO MEDICATION-ASSISTED TREATMENT FOR NEW MEXICANS WITH OPIOID ADDICTIONS AND TO DEVELOP A PLAN TO INCREASE THE AVAILABILITY OF THIS TREATMENT STATEWIDE.

WHEREAS, according to a recent report conducted by the federal substance abuse and mental health services administration, an estimated fifty-five thousand New Mexicans need, but are not receiving, treatment for an illicit drug use problem; and

WHEREAS, a national survey on drug use and health demonstrated that between 2004 and 2007, people who were unsuccessful in their attempt to obtain substance abuse treatment cited lack of insurance as the most common reason for not receiving treatment; and

WHEREAS, according to the department of health, New Mexico's prescription opioid and heroin-related drug overdose rates are significantly higher than the national average; and

WHEREAS, numerous scientific studies have demonstrated that medication-assisted treatment using methadone or a combination of buprenorphine and naloxone is the most effective treatment for individuals addicted to heroin and other opioids, including such prescription drugs as

hydrocodone, oxycodone, morphine, hydromorphone and fentanyl; and

WHEREAS, methadone is a long-acting, synthetic drug that has been successfully used in the maintenance treatment of drug addiction in the United States and other countries for more than four decades; and

WHEREAS, in 2002, the food and drug administration approved the combination of buprenorphine and naloxone as an oral medication that can be prescribed for people who are dependent on or addicted to opioids, such as pain medication or heroin; and

WHEREAS, any practicing physician can be licensed to prescribe the combination of buprenorphine and naloxone after completion of an eight-hour training course; and

WHEREAS, according to the Rand corporation, every one dollar (\$1.00) invested in substance abuse treatment results in a savings to taxpayers of more than seven dollars (\$7.00) through reduced societal costs of crime, violence and loss of productivity; and

WHEREAS, according to a report published by the justice policy institute, appropriate substance abuse treatment significantly reduces criminal activity both during and after treatment; and

WHEREAS, people dependent on street opioids who receive methadone or the combination of buprenorphine and naloxone

treatment live longer, are hospitalized less, are less often infected with human immunodeficiency virus, commit fewer crimes and spend less time in jail; and

WHEREAS, access to medication-assisted treatment in New Mexico is mediated by limited funding for indigent patients, limited insurance coverage for substance abuse treatment, a shortage of health care providers in some locations and a lack of transportation; and

WHEREAS, expanding access to and the availability of medication-assisted treatment in New Mexico will require coordination of existing resources and long-range planning to overcome barriers to this treatment; and

WHEREAS, enhanced access to medication-assisted treatment in New Mexico can improve the public health and safety of New Mexicans and is a critical step to reduce the drug overdose rate in the state;

NOW, THEREFORE, BE IT RESOLVED BY THE HOUSE OF
REPRESENTATIVES OF THE STATE OF NEW MEXICO that the department
of health be requested to create a task force to identify the
need for and barriers to access to medication-assisted
treatment for New Mexicans with opioid addictions and to
develop a plan to increase the availability of this treatment
statewide; and

BE IT FURTHER RESOLVED that the task force include representation from the governor's office, the lieutenant

governor's office, the department of health, the human services department, the children, youth and families department, the aging and long-term services department, the public education department, the corrections department, county detention facilities, the administrative office of the courts, the behavioral health purchasing collaborative, the single statewide entity for behavioral health services, the New Mexico association of counties, the drug policy alliance, the women's justice project, at least three methadone service providers, at least three providers eligible to prescribe a combination of buprenorphine and naloxone and at least two people currently receiving medication-assisted treatment; and

BE IT FURTHER RESOLVED that the task force identify opportunities to increase collaboration among state agencies serving people with opioid addictions and coordinate existing resources to improve access to medication-assisted treatment; and

BE IT FURTHER RESOLVED that the plan to increase access to medication-assisted treatment consider and address ways to provide access to services for people in the community, jail, prison and reentry populations, people who are uninsured or underinsured, people enrolled in drug court or community custody programs, people with co-morbid conditions of mental illness and substance abuse, people needing temporary assistance with medication costs and people in both rural and

urban areas of the state; and

BE IT FURTHER RESOLVED that the task force identify and prioritize short- and long-term goals, an implementation time line and specific agencies or persons responsible for accomplishing the goals and time line; and

BE IT FURTHER RESOLVED that the task force's findings, recommendations and plan be presented to the interim legislative health and human services committee by November 1, 2009; and

BE IT FURTHER RESOLVED that copies of this memorial be transmitted to the secretary of health and to each of the parties identified to be represented on the task force.