Congress of the United States Washington, DC 20515

October 19, 2022

The Honorable Chiquita Brooks-LaSure Administrator Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, MD 21244

Dear Administrator Brooks-LaSure,

We write to express serious concerns with rising rates of substance use disorders among older Americans and to urge the Centers for Medicare and Medicaid Services (CMS) to take every possible action to address this growing crisis for Illinoisans and the approximately 1.7 million Medicare beneficiaries with a substance use disorder.¹

In recent conversations with people in our communities, we have heard heartbreaking stories about families who have lost older relatives to opioid addictions—particularly heroin. Tragically, their experiences are not unique: the most recently available data from the National Institute on Drug Abuse found that between 2013 and 2015, the proportion of older adults using heroin more than doubled.² While the U.S. population of adults 55 and older increased by approximately 6 percent during that timeframe, the proportion of people age 55 and older seeking treatment for opioid use disorder increased nearly 54 percent.³ In Illinois specifically, the overall number of drug overdose deaths increased 60 percent between 2013 and 2018, but the overdose death rate for those 65 and older increased by more than 86 percent.⁴

In addition to the risk of overdose deaths, older adults face other severe health consequences associated with substance use disorders, including increased risk for suicide. One study found that the rate of Medicare beneficiaries over the age of 65 with a substance use disorder who considered suicide in the past year was 3.5 times higher than the rate for beneficiaries in that age group who do not have a substance use disorder. Other research shows that drug use among older adults can exacerbate mood disorders, lung and heart problems, and memory issues.

These trends underscore the need for expanded access to mental and behavioral health care. However, a 2022 study found that only 11 percent of Medicare beneficiaries with a past-year

¹ William J. Parish, Tami L. Mark, Ellen M. Weber, & Deborah G. Steinberg: *Substance Use Disorders Among Medicare Beneficiaries: Prevalence, Mental and Physical Comorbidities, and Treatment Barriers*. August 2022.

² National Institute on Drug Abuse: Substance Use in Older Adults DrugFacts. Accessed September 7, 2022.

³ Ibid.

⁴ Illinois Department of Public Health: *Drug Overdose Deaths by Sex, Age Group, Race/Ethnicity and County, Illinois Residents, 2013-2018.* February 6, 2019.

⁵ William J. Parish, Tami L. Mark, Ellen M. Weber, & Deborah G. Steinberg: Substance Use Disorders Among Medicare Beneficiaries: Prevalence, Mental and Physical Comorbidities, and Treatment Barriers. August 2022.

⁶ National Institute on Drug Abuse: Substance Use in Older Adults DrugFacts. Accessed September 7, 2022.

substance use disorder received treatment for their condition.⁷ Financial barriers were one of the most commonly cited reasons for Medicare beneficiaries not receiving treatment, underscoring the need for policy action to expand access to care.⁸

In Congress, we have taken important steps to address this issue, including by providing \$6.5 billion for the Substance Abuse and Mental Health Services Administration in the Fiscal Year 2022 government funding package. The legislation also included a \$50 million increase in funding for CMS specifically, providing your agency with the resources needed to combat emerging health challenges. We urge you to use your existing authorities and the funding you have received from Congress to strengthen initiatives that will help prevent and treat substance use disorders among Medicare beneficiaries.

It is essential that CMS acts swiftly and comprehensively to ensure older adults in our communities have access to the substance use disorder treatments they need and deserve. In particular, many Medicare beneficiaries with substance use disorders require inpatient addiction services. However, without Medicare coverage of residential treatment centers, these individuals cannot afford to receive the level of care they need. We urge your agency to explore pathways to expand access to residential substance use disorder services provided by treatment programs that offer evidence-based care at levels 3.1-3.7 of the American Society of Addiction Medicine's Level of Care Certification Program. These programs offer high-quality substance use disorder treatments that are appropriately matched to a patient's individual needs.¹¹

We look forward to working with you to advance this urgent cause on behalf of older adults in Illinois and across the country. Please contact Jack DiMatteo with Congresswoman Underwood's office at Jack.DiMatteo@mail.house.gov or Jessica McNiece with Senator Durbin's office at Jessica_McNiece@durbin.senate.gov with any questions.

Sincerely,

Lauren Underwood Member of Congress

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Richard J. Durbin United States Senator

⁷ William J. Parish, Tami L. Mark, Ellen M. Weber, & Deborah G. Steinberg: *Substance Use Disorders Among Medicare Beneficiaries: Prevalence, Mental and Physical Comorbidities, and Treatment Barriers*. August 2022. ⁸ Ibid.

⁹ House Appropriations Committee: Labor, Health and Human Services, Education, and Related Agencies FY2022 Omnibus Summary. Accessed September 20, 2022.
¹⁰ Ibid

¹¹ American Society of Addiction Medicine: Level of Care Certification Program. Accessed September 20, 2022.