Midwives Support Legislation to Expand Access to Medication-Assisted Treatment to Help Treat Opioid Use Disorders

The American College of Nurse-Midwives (ACNM) strongly supports the *Addiction Treatment Access Improvement Act* (H.R. 3692, S. 2317), introduced in the U.S. House of Representatives by Representatives Paul Tonko (D-NY) and Ben Ray Lujan (D-NM) and by Senators Ed Markey (D-MA), Rand Paul (R-KY), Maggie Hassan (D-NH) and Susan Collins (R-ME). This important legislation builds upon gains made under the *Comprehensive Addiction and Recovery Act* (Public Law 114-198) by increasing patient access to buprenorphine medication-assisted treatment (MAT). Passage of H.R. 3692/S. 2317 would help people suffering from opioid use disorder (OUD), including pregnant women and postpartum mothers struggling with addiction, reduce or quit their use of heroin or other opiates.

Specifically, H.R. 3692/S. 2317 would:

- Allow Certified Nurse-Midwives, Certified Registered Nurse Anesthetists and Clinical Nurse Specialists to train and apply to become DATA-waiver practitioners who can prescribe MAT in states where they have prescriptive authority for schedule II drugs;
- Codify the 2016 Substance Abuse and Mental Health Services Administration (SAMHSA) regulations that expanded the number of patients qualified physicians could treat to 275; and
- Make permanent the MAT program that allows nurse practitioners and physician assistants to prescribe buprenorphine and would expand this prescribing privilege to Certified-Nurse Midwives, Certified Registered Nurse Anesthetists and Clinical Nurse Specialists

**Background:**

In 2017, the epidemic use of opioids was declared a national emergency. The crisis has had a particular impact on women of childbearing age. Data from SAMHSA indicates that misuse of prescription and illicit opioid drugs has been increasing among women of childbearing age over the last two decades. Prescription opioid overdose deaths, which have risen steadily in the U.S. over the past decade and a half, have increased more among women than among men: 400% versus 237% between 1999 and 2010. Opioid dependence during pregnancy is associated with risks for low birthweight neonatal abstinence/neonatal opioid withdrawal syndrome, neonatal mortality, and poor maternal outcomes. One of the recommended treatments for pregnant women with an opioid use disorder is buprenorphine MAT. This treatment has been shown to improve pregnancy outcomes and can potentially reduce risky behavior associated with illicit drug use in the mother. However, a gap exists when it comes to access to qualified maternal health providers authorized to effectively treat and prescribe MAT. Certified Nurse-Midwives were not included as one of the authorized providers authorized to prescribe MAT under the *Comprehensive Addiction and Recovery Act*. 
It is essential that midwives be part of the nation’s system of detecting and treating opioid use in women. Midwives provide primary and maternity care services to help women of all ages and their newborns attain, regain, and maintain health. Furthermore, midwives provide prenatal care and attend a large proportion of births in areas disproportionately impacted by the nation’s opioid crisis.

ACNM encourages Congress to pass the *Addiction Treatment Access Improvement Act* (H.R. 3692/S. 2317). Expanding access to MAT is a critical step in helping combat the nationwide opioid epidemic. Providing authorization for Certified Nurse-Midwives to treat, prescribe and refer for MAT services are all within the midwifery scope of practice. This legislation removes a barrier to MAT for women who are who are pregnant and facing the challenge of an opioid addiction.

To cosponsor the House bill, please contact Kimberly Espinosa at Kimberly.Espinosa@mail.house.gov or Nikki Hurt at Nikki.Hurt@markey.senate.gov. You may also contact ACNM’s Director of Government Affairs, Amy Kohl at (240) 485-1806 or via email at akohl@acnm.org for additional information on the role of midwives in our nation’s healthcare system or if you have questions regarding this issue.