

Testimony of Mark R. Herring
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Field Hearing: “Fighting Against a Growing Epidemic: Opioid Misuse
and Abuse Among Older Americans”
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United States Senate Special Committee on Aging

Senator Kaine and members of the United States Senate Special Committee on Aging, thank you for shining a light on issues of addiction among older Virginians, an affected population that too often goes unnoticed.

To help set the stage for today’s discussion, I’d like to share some information about the scale of the problem in Virginia, efforts underway at the state level, including from my office, to combat the problem, and some senior-specific strategies we are employing, and other opportunities to do even more to protect this potentially vulnerable population.

During my time as attorney general I have seen firsthand the impacts of a heroin and prescription drug crisis that is claiming the lives of hundreds of Virginians every single year and touching families in every corner of the Commonwealth.

In 2014, heroin and prescription drug overdoses claimed the lives of 728 Virginians. That’s more than car crashes. That number is shocking and it is heartbreaking.

Over the last five years, more than three thousand Virginians have lost their lives. This is a problem that is cutting across all social and demographic lines.

After speaking with so many mothers and fathers who have buried a child after a fatal overdose, or friends and family who are trying to carry on after the loss of a loved one, I have also learned that what is often described as a “heroin” epidemic, is really an opioid addiction epidemic. Something as common as a sports injury, car accident, or minor surgery can expose a person to opioids, leading to abuse, dependency, and in the worst cases, leading to the cheaper, more available, more potent, and deadlier heroin that can be found on the streets.

The Centers for Disease Control estimates that 1 in 15 persons who take prescription painkillers for nonmedical purposes will try heroin within 10 years.

That is a fast and frightening slide.

So to properly address what’s often called the “heroin epidemic,” we must acknowledge that this is a “heroin **and** prescription drug abuse epidemic” that has its roots not in the streets, but in our medicine cabinets.

And given the amount of opioids prescribed to older Virginians, we should begin accounting for their needs and risk factors as we work to address addiction.

According to preliminary numbers from the Virginia Office of the Chief Medical Examiner, through September of 2015, 120 Virginians age 45-54 died of a heroin or prescription drug overdose. That is the third highest age cohort, and fourth highest is age 55-64.

More Virginians age 55-64 died of heroin and prescription drug overdose than age 15-24.

It’s almost unimaginable to think about someone becoming dependent on a drug for the first time at that age, but that is the power of these

drugs, and it is a reality that more and more of our friends, neighbors, and parents are confronting.

These are the Virginians who are about to age into certain medical assistance programs and whose struggle with addiction is likely to place an even greater strain on limited public budgets.

For example, in 2014, Virginia's Medicaid program spent approximately \$27 million on prescription painkillers. That is up about 30% from 2011.

I think it would be safe to assume that the federal government is noticing similar increases, and will continue to, especially as our population ages.

In Virginia, I feel somewhat fortunate because it seems like we have recognized and responded to this problem somewhat faster than other states.

In my office, we are coming at the problem with a multifaceted strategy that includes prosecutions and enforcement, as well as legislative solutions, prevention, and education.

In the last year and a half we have worked with our local and federal partners to prosecute more than 28 cases against dealers and traffickers involving more than 95 kilograms of heroin with an estimated street value of more than \$19 million. That's about 238,500 daily doses.

We have also launched a number of prevention and education initiatives to make sure everyone—young people, parents, adults, even seniors—understand just how dangerous these drugs can be.

One of the centerpieces of our prevention efforts is a documentary film called "Heroin: The Hardest Hit," which really puts a face on addiction in Virginia. It features Virginians sharing their own stories of addiction, even overdose, and thankfully recovery. It also tells the story of some

wonderful young people who unfortunately lost their lives to these drugs, and the parents and families left to carry on without them.

We also worked with the General Assembly in 2015 to enact three lifesaving overdose prevention laws with bipartisan support.

One created a “good Samaritan” provision to encourage people witnessing an overdose to call 911 and get help.

Another expanded the availability of naloxone, a life-saving overdose antidote, so that all law enforcement and first responders can carry it, and more families can get it without a prescription.

And finally, we expanded access to the prescription monitoring program to make sure that probation officers can monitor their probationers to make sure they are not getting drugs they are not allowed to have.

Those last two bills I think offer some lessons that could be particularly applicable to senior populations and to our efforts to address addiction among older Virginians. I look forward to discussing them further throughout today’s hearing.

To conclude my remarks this morning, I will just again say thank you to this committee and thank you to Senator Kaine for keeping the issue of addiction in the forefront, and for giving particular attention to seniors and older Virginians who may be struggling with addiction.

I join you in sounding the alarm about the heroin and prescription drug crisis, and I want every family in Virginia talking about it now.

Not once there is already a problem, and God-forbid not after a loved one is lost.

We have to start now, because I’ve heard from so many heartbroken parents who have lost a child, and so many devastated families who have

lost a loved one, and they all say "I never thought this could happen to my family."

Thank you for allowing me to join you today, and I look forward to discussing these issues and answering any questions the committee many have.