

THE PRESIDENT’S COMMISSION
ON COMBATING DRUG ADDICTION AND THE OPIOID CRISIS
NOVEMBER 1, 2017
MEETING MINUTES

I. Introduction

The final meeting of the President’s Commission on Combating Drug Addiction and the Opioid Crisis was convened by the Chair of the Commission, New Jersey Governor Chris Christie, at 1:55 PM on November 1, 2017 at the Eisenhower Executive Office Building in Washington, DC, with Michael Passante, Deputy General Counsel of the White House Office of National Drug Control Policy (ONDCP), as the Designated Federal Officer.

Michael Passante stated that the purpose of this meeting was for the Commission to hear from members of the public to show the effect of the opioid crisis on their families and lives, and to discuss and vote on the Commission’s Final Report. Interested parties may contact ONDCP at commission@ondcp.eop.gov with any questions, comments, or concerns regarding these meeting minutes or the Commission more generally, and may find Commission related materials on the Commission page of ONDCP’s website. Michael Passante thanked the Commission, ONDCP, other federal agency representatives, and the witnesses and public for all of the hard work that has been put into the report.

II. Meeting Participants

The following is a list of participants in the November 1, 2017 meeting.

A. Commission Members in Attendance:

- Governor Chris Christie [Commission Chair]
- Governor Charlie Baker (via phone conference)
- Florida Attorney General Pam Bondi
- Governor Roy Cooper (via phone conference)
- Congressman Patrick J. Kennedy
- Professor Bertha Madras, Ph.D.

B. Witnesses:

- Congresswoman Mary Bono, U.S. House of Representatives
- Judge Linda Davis, 41B District Court, Michigan
- Roxanne Schwartz, Lebanon, NJ
- Deni Carise, Ph.D., Chief Clinical Officer, Recovery Centers of America
- Doug Griffin, Newton, NH
- Jim Freund, Ashburn, VA
- Terry Allebaugh, Community Impact Coordinator, North Carolina Coalition to End Homelessness
- Justin Phillips, Founder and Executive Director, Overdose Lifeline
- Vanessa Vitolo, Outreach Coordinator, Victory Bay Recovery Center

C. Others in Attendance:

- R. Alexander Acosta, Secretary, United States Department of Labor
- Rod Rosenstein, Deputy Attorney General, United States Department of Justice
- Kellyanne Conway, Counselor to the President
- David Shulkin, Secretary, United States Department of Veterans Affairs
- Benjamin Carson, Secretary, United States Department of Housing and Urban Development
- Jerome M. Adams, Surgeon General, United States Public Health Service Commissioned Corps
- Richard Baum, Acting Director of ONDCP and Executive Director of the Commission
- Jason Botel, Principal Deputy Assistant Secretary, United States Department of Education
- Greg Nevano, Deputy Assistant Director, United States Department of Homeland Security
- Other staff from White House and Federal agencies

III. Opening Remarks

New Jersey Governor Chris Christie declined to offer remarks, on account of schedule concerns of members of the Federal agencies.

Secretary Acosta said that the President has made the opioid crisis a national emergency. After speaking with members of private industry and labor; they stated that they are seeing the opioid crisis affect their personal organizations. One person wanted Secretary Acosta to convey that first responders combat the crisis within their organization as well as outside. They stated that they should not be ashamed and should be willing to speak out. In two weeks, every organization that he has spoken to has said that it is important, needs to be addressed, should not be stigmatized, and we should support individuals to come forward so they could receive the treatment they need. Gov. Christie stated that based on the report and executive summary, that there is a recommendation to expand the Department of Labor's authority and ability to investigate. Gov. Christie referenced the October 20th Commission meeting, where the Commission invited executives of the insurance industry to testified. He said that there clearly was a disconnect in the insurance industry's understanding how to properly respond to the crisis considering each said how well their corporation is treating policyholders. He said that Secretary Acosta will use the recommended expanded authority wisely and aggressively.

Deputy Attorney General Rosenstein thanked the family members of the victims. The DOJ is acting with great urgency and vigilance in response to the President's Public Health Emergency Declaration. The DOJ is relentlessly pursuing illegal opioid drugs on the streets. They are focusing on dismantling illegal drug distribution networks. On October 17, the DOJ brought formal charges against Chinese fentanyl suppliers for the first time. They also brought six new enforcement teams in the areas hardest hit by the epidemic. In August, they developed an opioid fraud and detection unit to stop providers who are prescribing outside the norm. The DOJ's response is not limited to prosecution. The DEA revokes hundreds of registrations a year from rogue doctors and business that are exacerbating the crisis. These are just some ways that the department combats the crisis. The report today will change the tide. Gov. Christie thanked DAG Rosenstein for the DOJ's support on this crisis and noted a number of recommendations in the report focused on the DOJ, including getting a drug court in all of the 93 federal districts.

Secretary Shulkin said that it has been a true honor to have participated in this. He feels as if this report is going to make a real impact. This is making us all look internally. The VA has been focusing on the opioid issue since 2010. They are refocusing their guidelines, relooking at the naloxone kit approach, and making more efforts to reach more people's lives.

Secretary Ben Carson thanked the President for the opportunity and the work that has been done for a lost member of society. He discussed the impact the crisis has had on his life. He was very pleased that the President declared this a public health emergency. Secretary Carson asked do many people know what 65,000 lost lives a year look like; noting that it is more than the number of American deaths in the Vietnam War. From a neuro-science view point, the effect drugs have on the brain is significant. He mentioned that often addiction begins with something that is seemingly harmless such as marijuana use. He emphasized the nexus between addiction and homelessness explaining that we have to take care of our homeless and provide a mechanism to get them off of the street. We need to diagnose why they are out on the street and fix it. He laid out HUD's three part plan for homelessness: housing first, getting the person off the streets; housing second, finding out why that person was homeless; and housing third, fix the problem.

Counselor Conway thanked the Commission and made the following remarks: I'm really here today to say thank you once and for all to this Commission. It's been a huge priority for the President really from the very beginning. And as witnessed last week in his very powerful Address to the Nation, he intends this to be a coordinated effort among federal, state, and local governments, non-government organizations, and individuals. And I think much of the behind the scenes work that this Commission has done has gone unrecognized and unappreciated by the general public because it's been such a quiet effort most times. The President took historic steps to address this issue and also did so in a very specific policy laid out with his wife our great First Lady Melania Trump. Recognizing that the problem does affect each of us in some way, some of us more deeply than others that the solution also has to include each of us. And in that regard, I wanted to say we obviously have received the attention of many people in Congress. But in addition to that I think most importantly the very next day the Department of Health and Human Services released a clarification of the HIPPA laws, guidance to healthcare providers so they may be able to share with family members if a loved one is already suffering from misuse and disorder. And I think that's incredibly important because we have heard many stories here in the White House and all around this country as you all have of families who say we're so sorry Mr. and Mrs. Jones that your son has passed away today. We resuscitated him, we helped him six times this calendar year, but the seventh time he was too far gone, and Mr. and Mrs. Jones say who, what, when? They have no idea. And so, to the extent that the HHS has made some clarifications and that can bring some relief it's a positive step forward. Today, the Centers for Medicare and Medicaid services will announce an IMD waiver for each of two states, New Jersey and Utah and the President addressed the waivers last week in his remarks as well. Our position is that the number of beds in a facility should never negatively impact the number of patients who can be treated. And when the public hears about that regulation is just strikes them as one of many that seems unfair and unseemly, and unnecessary. So, we're very happy to be taking steps in that regard as well. A marked improvement on all these fronts really needs something else the President has made a priority which is a massive, education, information, small city campaign across the country. So, that everyone knows how best to meet these challenges. We must engage and maybe even enrage the public so that folks who have ever tried these drugs don't start in the first place. We certainly want to help those who are already suffering, and we want to remove the stigma of addiction and help these individuals to access treatment and begin the process of recovery. This is a complex issue with no easy answer. Yet it is a worthwhile undertaking.

Surgeon General Jerome Adams, on behalf of Acting Secretary Harkin, said that he has personally been affected by the opioid crisis, including his brother's opioid addiction. These numbers may be big, but they represent individuals. The only way to end the opioid crisis is through coordinated efforts throughout the entirety of our communities. While he was the public health commissioner of the state of Indiana, his organization was able to stop the spread of HIV outbreak, but they collaborated with all

sectors of government. The President's discussion of his personal experiences with the impacts from the opioid crisis is powerful. HHS reports it has made progress in the implementation of each of the Commission's interim recommendations that related to the department. The President's memorandum and Acting Secretary Harkin's declaration of the public health emergency made him go to the substance abuse facility Phoenix House to discuss the issue. The people there stated that they were incredibly excited and thankful for the declaration. HHS looks forward to the recommendations in the report and is eager to continue this very important work.

IV. Testimony of Invited Organizations

A. Mary Bono, U.S. House of Representatives

Representative Mary Bono made the following comments:

- Recalled Gov. Christie's discussion two years ago at a town hall meeting where he discussed the death of a law school friend who was unable to overcome an addiction.
- Spoke about her son coming to her about addiction to pain medication. Her and her son spoke to people about the consequences for the addiction. There is no way to prepare a family for opioid use disorder.
- If anything good is going to happen in need for help, it can only happen in treatment not when they fall to the bottom.
- The goal should be to move that person at the right time and should never be turned away for treatment. She wants people to beat addiction like her son did, through the constant support of their family, friends, co-workers and communities.
- The past failures in policy combined to create this problem. The President has taken notice of this, but we cannot lose sight and create new failures.
- The President's Commission is facing a serious challenge straight on, and hopefully the report gets turned into law and policy.

B. Judge Linda Davis, 41B District Court, Michigan

Judge Linda Davis made the following comments:

- Her journey with this started almost 13 years ago. She has a young daughter who was addicted to opiates.
- It was amazing to her how little she knew about how to get somebody help when they really needed it.
- She would like to focus mainly on the brokenness of the system. It's horrible when a parent is watching on a day to day basis their child die and there's absolutely no resources.
- It reminded her of how broken the system is and how much we need to look at almost every facet of it to make sure that we are looking at this comprehensively.
- The journey has made her and her daughter a better person and a better member of the community
- They started an organization very soon after finding out her daughter was addicted, called Families Against Narcotics (FAN). She started in the basement of a small church and now they are here in Washington D.C. being part of a very important discussion.
- They went from a very small community effort into having over 20 chapters in the state of Michigan, 27 meetings that are held monthly.
- They work with four major hospitals, have partnered with Blue Cross Blue Shield, have partnered with the University of Michigan research team in developing new educational protocols that can

be used in our schools that will bring a different approach to teaching kids about drug use and abuse.

- The biggest areas that we need to really focus on are ways that we can get out in to the community to talk about this being a disease rather than a moral failing.
- She started a program recently through Families Against Narcotics called Hope Not Handcuffs. They are now partnering with 33 police departments. Since February they have placed over 600 people successfully into recovery the same day.
- She is looking forward to the Commission making changes that will insure that when someone walks through one of those police doors that day, a treatment bed is available for them.
- That we make sure that we have medication assisted treatment that's being paid for by insurance companies so those who can't just get clean with a 12-step program have viable treatment options.
- Her group has taken on the task of also educating all of our legislators so that when they present the bills that the Commission is putting before them that they understand the necessity of those laws and the impact that it can make in our community.
- In her community they started an organization called Operation Rx through FAN that brought every sector of the community together that's being touched by addiction so that they leave no gaps in the community.
- When a child receives Narcan and goes to the hospital, but is sent back on the streets, then we are doing a disservice by not providing treatment options.
- Even though we have gotten Narcan to every first responder, that person who overdosed should have a chance at recovery from that moment forward. And we should be relentless until we get them to that point.

C. Roxanne Schwartz, Lebanon, NJ

Roxanne Schwartz made the following comments:

- Ms. Schwartz opened by presenting her sons' current appeals for insurance coverage for their opioid use disorders.
- Thanked Congressman Kennedy for help creating the Mental Health Parity Act, while he was in Congress.
- She is the proud mom of two sons with mental and substance use disorders. Her sister died from an accidental opioid overdose. She herself has been in recovery for 35 years from alcoholism.
- She credits stigma and fear for the great number of insurance coverage denials her sons have received when seeking medical care for the mental and substance use disorders.
- In 2015, her son was released from recovery after only 48 hours and attempted suicide within two days. The courts ordered additional treatments for his personal safety. Her family paid for the care and afterwards the insurance companies refused to pay for any of this court ordered medical care.
- Her second son had 12 days of in-patient care, during which the medical staff determined it would not be safe for her son to be discharged. This care was also denied coverage and her family also paid for these costs out-of-pocket.
- This past week, her son was in the hospital being treated for a medical illness that was directly related to her son's opioid abuse. However, because this was medical care as compared to mental care, no coverage issues were raised.
- Her family has spent over \$300,000 for their sons' treatment. It has forced them to borrow against their home, cash out their college saving accounts, and withdraw from their retirement accounts.
- She has painstakingly appealed her sons' coverage denials and each have been rejected.

- She went to New Jersey Department of Banking and Insurance however they do not have jurisdiction. Currently, her appeals are being handled by the Department of Labor, however she has not yet received a response.

Governor Christie said that New Jersey has changed the laws, but it only affects 30% of the people. The testimony from the insurance companies from the previous Commission meeting was sickening. Governor Christie said the President does not tolerate this type of conduct. It offends him, and he is not going to stand for it when people get “the screws put on them.”

Congressman Kennedy commented and advocated for using the website parity.org.

D. Dr. Deni Carise, Recovery Centers of America

Dr. Deni Carise made the following comments:

- What got her started in treatment was her personal experience with drug abuse. She has since earned her Ph.D. in Clinical Psychology. Her research has previously been funded by SAMSHA, ONDCP and NIDA.
- Her step-son has addiction problems and her son died from alcohol and benzos.
- She believes that her experiences makes her uniquely qualified to give recommendations about this crisis.
- She laid out a project that is referred to as “Plan A” goals (because there is no “Plan B”):
 - Set national standards for high-quality treatment
 - Expand and improve access for patients
 - Expand treatment capacity
 - Enforce parity
- The field of addiction treatment needs to be held to the same standards as every other physician and accredited facilities. They need to offer best practices and every possible avenue of treatment. We need to have a universal way to measure success.
- Eliminate the IMD exclusion.
- We want to expand treatment capacities by reallocating funds and prioritizing substance use in areas where it is needed.
- Facilitate compliance and enforcement in parity.

E. Doug Griffin, Newton, NH

Doug Griffin made the following comments:

- Wants to discuss the effects of drugs after the addiction.
- He discussed the long term pain he and his family have felt since the loss of his daughter, Courtney.
- He explained that he continues to provide emotional support to loved ones of other victims of drug abuse.

F. Jim Freund, Ashburn, VA

Jim Freund made the following comments:

- Jim came to discuss his deceased son Scott.
- The opioid epidemic has no boundaries. His son’s addiction changed and rewired his brain.

- We must end the stigma of addiction, like HIV or cancer.
- Four years after their son's intervention, his son took his own life because he knew that he was going into relapse. Relapse does not mean the treatment has failed but rather the treatment plan needs to be readjusted.
- The Commission is readjusting our Nation's response.

Gov. Christie said he agrees with eliminating the stigma. One recommendation by the Commission will be to increase and federally fund a media campaign that will address prevention and the issue of stigma.

G. Terry Allebaugh, North Carolina Coalition to End Homelessness

Terry Allebaugh made the following comments:

- He noted the connection between drug addiction and homelessness as well as how collaboration with government can address these issues.
- Moreover, he explained that his oldest son has struggled with his addiction for years. His addiction has resulted in numerous treatments for his disease.
- In May 2016, his son contracted a disease by using a dirty needle. The disease caused his son to suffer a stroke.
- Mr. Allebaugh discussed his son's issues with seeking help and with piecing together a treatment. However, he notes the realization of how difficult it must be for those patients that do not have the support and resources his family can provide.

I. Justin Phillips, Overdose Lifeline

Justin Phillips made the following comments:

- Her son, Aaron at the age of 20 years old, died from opioid use in 2013. Now she is heading a non-profit called Overdose Lifeline.
- We have lots of gaps with prescription medications and opioids.
- We don't treat the families that struggle with addiction issues the same as families with family members with other chronic diseases.
- Her non-profit, Overdose Lifeline, addresses drug awareness education for minors; education for minors about anxiety coping skills; they passed a law for over-the-counter naloxone named in the memory of her son Aaron; and online courses about the opioid crisis.

J. Vanessa Vitolo, Victory Bay Recovery Center

Vanessa Vitolo made the following comments:

- Received treatment at a treatment facility in Newark, NJ for heroin addiction.
- She was a normal person and then was prescribed an opioid for a sports injury. This led her to use heroin, give up everything for the disease, and became homeless. She accepted the fact that she was going to die a drug addict.
- She tried a few times to get into treatment, but due to the fact that she only had Medicaid and the Institution for Mental Disease exclusion, it was very difficult to get into treatment, and she would start using before she completed the process.
- Eventually, all the consequences to her addiction caught up to her, and she found herself in jail for the fifth or sixth time. But this time, she wasn't getting out.
- Her judge fought for her to become a drug court participant. That action alone saved her life.

- Through drug court, she was sent to Integrity House, a long term treatment program where she also went to a halfway house and an intensive outpatient program. Integrity House taught her how to become a productive member of society again.
- Through the course of drug court, she got her license back, a car, and an apartment.
- She got a job, and began advocacy work for those who are still suffering
- She now participates in the Reach N.J. campaign with Governor Christie. He started this to help people navigate their way into treatment, and it has saved thousands of lives.
- She works at Victory Bay Recovery Center, where they fully support and believe in her advocacy work. They know that we have to treat the mind, the body, and the spirit.
- We believe the three keys to long term sobriety are a good clinical plan, participation in the 12 step program and structured sober living. Recovery is possible.
- Three years ago today she was in jail, and today she is here. She thanked the Commission and specifically Gov. Christie.

Gov. Christie said the power of Vanessa is the power that shows this can happen to anyone and everyone. Whatever your stigmatized, predisposed, pre-conceived notion is of what someone who's struggling with addiction looks like, it's not Vanessa. But it is Vanessa. The second reason was that she was so extraordinarily willing to tell her story, and to help folks in New Jersey to get over that stigma. And so, she is the star of the first \$25 million ad campaign in New Jersey.

V. Open Dialogue Between Commission Members and Invited Guests

A. Professor Bertha Madras made the following remarks:

- Thanked everyone for testifying.
- What you've shown all of us in this commission is that addiction is not only a brain disease, it's a family disease. There is no one member of a family that escapes the pain, the anguish, the torture, the suffering. And therefore, we should call it also a family disease. If we don't stop the pipeline into substance use, if we don't promote prevention, we are going to have an open-ended catastrophe that goes on for multiple generations. And therefore, promoting prevention is critical. And every person who is in recovery, and every family who has been affected by this needs to help us figure out is there anything along the way that the system, or you, or someone, could have done differently to avoid this? We need your input on that story as well. Whatever is responsible for the specific cause of this opioid crisis, we have to remember that chemical coping and chemical reward is at the heart of this matter. And we have to find out how we can prevent it. What I did one night, Dr. Sally Sutelis, psychiatrist, emailed me at midnight, and she said, Bertha, I'm blaming the pharmacies, and maybe the pharmaceutical companies. Who do you think is responsible for this? And at 1:00 a.m., I emailed her back and I said, Sally, my list is up to 12, and it's going to be higher than 21. And it now is. One of the things that we did as a commission is try to understand how we got here. What were the factors? What were the institutions? The societies? All the contributors? And try to reverse-engineer and develop solutions that take into account how we got here. Some of them don't match at all, but many of them do. We have to correct the mistakes of the past, not only in solving this problem, but above all, in preventing it from happening again. Because if we don't learn lessons from the past, we are going to have a

repeat and repeat and repeat for generations to come. And many of the lessons we've learned now are already beginning to rear their heads, in terms of other substances.

B. Governor Charlie Baker made the following remarks:

- Expressed his gratitude for everyone that spoke today.
- Sometimes, when you get into these conversations about clinical options and efficacy and all the rest, we miss the most important element of all, which is the heart and soul of what's at stake here, which is the people who are directly affected by this terrible illness. And I would just say, very briefly, that I look forward to continuing to pursue the implementation of the recommendations of the report. I think it's a great document, and I think it gives us a blueprint, if we stay the course and persevere and recognize that we are dealing with a brutal beast who will stop at nothing on its own. To be successful, we need to follow through and be as aggressive as addiction is. And that, for us, I think, in many respects, will be our greatest challenge. We need to stay with this issue, stay committed to it, stay engaged in it,

C. Governor Roy Cooper made the following remarks:

- Expressed his gratitude to everyone on the Commission and the people that testified.
- Very powerful and gripping stories that were told today, and I think they were representative of hundreds of thousands of more stories across this country. Our first responders, our firefighters, police, they're on the front lines of this every day, to the many families who are suffering the pain of loss, some of whom are (inaudible) and the cause of the fact that this crisis is hurting our economy. We have to make sure that this good report involves real follow-through, and that is critical. This epidemic is unacceptable. But I urge the President and his cabinet and Congress to enact these recommendations. I'll continue to do my part as governor of North Carolina. And I know the governors of this country are ready to step up and work with our local and federal partners to address this problem that is costing lives and costing our economy.
- Gov. Cooper voted "Yes" on approving the report.

D. Florida Attorney General Pam Bondi made the following remarks:

- As a career prosecutor, I don't have a personal story like many of you, other than when I was a young prosecutor, I watched a famous baseball player trade his World Series ring for one piece of crack. And that's when I learned the power of an addiction. And that has stayed with me my entire career. And I know -- I think I can speak for all of us; we don't sleep at night over this issue to this day. And when we start sleeping well at night, we're not doing our jobs. And for all of you families to come out and talk --and Mary, you've been my champion forever. For all of you to come out and speak on this issue means so much, and the world needs to hear you. Vanessa, Eli, you know, to the lucky ones, and you know, Justin, Jim, and Doug. I'm going to frame your children in my office. I frame pictures in my office to inspire me. Thank you all for telling your stories, and for what you do, because you keep all of us going.

E. Congressman Patrick J. Kennedy made the following remarks:

- What we need to do is keep the advocacy going. One of the reasons why this terrible tragedy's been allowed to continue is that there hasn't been the kind of voices that we heard today, in this room, all across this country, going to the Attorneys General in this country, going to the insurance commissioners to make sure they write the insurance policies in each state. Going to the state legislatures, in addition to Capitol Hill. And it's taken us this long because this town doesn't react, nor does any other capital in this country, unless it hears from real people talk about their stories, and then follows it up by saying, And we're going to vote in the next election. That's how democracy works. And because these illnesses have been so stigmatized, the voices have been silenced, and the insurance companies are counting on it. Because it allows them to continue to practice more onerous medical management practices on those seeking from addiction than they would any other set of illnesses. And it still allows members of Congress to be Oh, yeah, okay, I love to hear your story. And yet, never appropriate the needed dollars to make a difference. So, we need to take that bully pulpit that the governor is giving us today and say, we're going to make this happen because we need to go out there and start going to these officials and telling them that we're going to hold them accountable. God forbid. Hold politicians accountable on an issue that's important to millions of American families on both sides of the political aisle. I want to thank Governor Christie for your incredible leadership throughout this process, including from my vantage point the work on the parity language which was so crucial in this report. And I appreciate it so much. But as you know parity won't matter if people don't have access to insurance. We need to get access to insurance and with that we will begin to treat the whole person because these aren't isolated illnesses. They have co-morbidities as we heard today. And frankly it's going to cost the system less if we're to add up all the costs if we first provide them the coverage to begin with. And I'll just conclude by saying, in New Jersey alone, Governor Christie has led the way for over \$200 million just this year, which marks nearly half of what the Federal Government is spending on this illness. In just the state of New Jersey. If we're going to extrapolate that across 50 states, that's a minimum of \$10 billion dollars that we need to spend on a national level. On the AIDS epidemic, we were spending \$24 billion a year and we had 53,000, not to equate one life with the other, but let's just be honest. If we see those dollars appropriated there, there's no reason why we can expect a similar amount of dollars being spent on this, our nation's epidemic for our time.

VI. Closing Remarks

A. Governor Chris Christie made the following remarks:

- Gov. Christie thanked the staff to include the ONDCP, the White House, and the individual members of the Commissioner's staff.
- Just as we get ready to get a final vote on the report, I think the testimony you heard today and the reason I decided to have the Commission's last hearing be with all of you, because I wanted those who were listening and those who will report on what happened here today to acknowledge that our people are dying. Our people are dying, 175 people a day, every day, are dying in the United States from this epidemic. I asked somebody the other day who was talking to me about funding, I asked him if a terrorist organization was killing 175 Americans a day on American soil, what

would you be willing to pay to make it stop? I think we'd be willing to do anything and everything to make it stop. And that's the way we now need to see this, because this is an attack from within. We are killing ourselves and it is unacceptable from my perspective not to step up to the fight and do things -- everything that needs to be done to stop the dying and stop the suffering. It means requiring accountability, accountability from everybody in this process to produce results. Just spending money will not be enough if we're not spending it in a way that's evidence based. You see that throughout the report, evidence based treatment that will give people hope and a pathway for them to deal with this enormous challenge. I wanted this to be a Public Health emergency because I wanted HHS to take the lead in administering the funds instead of FEMA. But now it's incumbent upon Congress to step up and put money in the public health emergency fund so that the President can utilize that. And that should happen without delay in the view of the Commission. You will see in the report that there are 56 additional recommendations that the report makes today, when added to the nine recommendations to the interim report, that's 65 recommendations that we're making. All of which are substantive and intended to deal with specific issues that we have discovered through our work outside this room and also through the testimony that we've heard inside this room. I can tell you that each one of those recommendations is being put forward thoughtfully and carefully and based upon real evidence that we believe that either this is a problem that needs to be addressed, or it's an opportunity that we haven't taken advantage of. We need to make sure that the National Institutes of Health work with our pharmaceutical industry to make sure that they do two things; to develop non-opioid pain killers and to develop more medication assisted treatment for those who are already in addiction. It's inexcusable that the major pharmaceutical companies in this country have stood on the sidelines during this crisis, and they have. And that's why we called a meeting in Trenton that a number of people attended and all of the major pharmaceutical companies attended and they have committed to this partnership with the National Institutes of Health. We need them to follow through on that commitment. Those additional treatments, both medication assisted treatment for addicts and pain treatment that's non-opioid, will help to avoid many of the problems that you heard here today. We need more people to enter treatment, and to do that we need to do two things: make treatment more broadly available, because right now only 10.5% of the young people and adults who need treatment receive that treatment. But, we also need to remove the stigma because we know that one of the reasons people don't receive treatment is for the reasons Justin put so eloquently in her remarks. The stigma is real and it's not something that we just can talk about, it's something that we have to do something about each and every day and your voices are the most important voices in all this. We need you to continue to speak out and speak up and do what needs to be done.

- Gov. Christie entertained a motion to vote on the report. Professor Madras and former Congressman Kennedy voted to entertain the motion to vote. The Commission voted unanimously (6-0) to approve of the report.

VII. Adjournment

The meeting adjourned at 4:15 PM.