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I am writing in support of HB 4143.

I have worked in Public Health for the past 15 years and prior to that provided primary care in rural and frontier settings in Oregon. Additionally I have worked providing medication assisted therapies (MAT) for thousands of Oregonians over a 25 year period. I know the problems of opioid use and misuse from all sides of the issue. Currently I am a consultant to the OHA and serve on the Governor's Task Force due to my long history of experience with these issues.

I am in full agreement with all of the components of this bill. We need prescribers to access the PDMP routinely. Automatic registration is a first step.

Providing services for those with opioid use disorder (OUD) when they present in the Emergency Department is providing lifesaving care when individuals are most vulnerable. Recent studies suggest that 10% of individuals who present with an overdose will be dead within the year. Providing real time safe and effective addiction services, like buprenorphine (Suboxone), upon ED admission for an overdose, for example, will undoubtedly save lives. This plan will require lots of coordination and the development of new systems of care and shifts in paradigms of responsibility. Testing the waters in a few strategic locations around the State and providing adequate funding will be essential for the project's success.

It is time we looked at removing impediments to promoting and supporting the most effective treatments for OUD – MAT. Cost of the medications, insurance prior authorization requirements, and misunderstanding of the science of addiction are all road blocks to this effort. HB 4143 has components to assist in the removal of those obstacles.

Thank you for your support of this important and timely legislation,



Jim Shames MD

Consultant to



Leadership of



