

United States Senate

WASHINGTON, DC 20510

August 11, 2016

General Frank Grass
Chief, National Guard Bureau
111 S. George Mason Dr.
Arlington, VA 22204

Dear General Grass:

We applaud the efforts of the National Guard's Counterdrug Program in combatting the heroin and opioid epidemic that is plaguing too many of our communities, and recently joined together to introduce bi-partisan legislation that would help ensure stable funding for this important program. As part of our efforts related to this legislation, we write to encourage the National Guard Bureau (NGB) to adjust the Threat-Based Resource Model (TBRM) to take into account state-specific drug overdose death rates and more effectively allocate funds to address the drug epidemic in states with high concentrations of overdose fatalities.

The activities and accomplishments of the Counterdrug Program are a credit to both the National Guard and its dedicated service members. Last year, the West Virginia National Guard Counterdrug Task Force assisted 37 law enforcement agencies in seizures of illicit drugs and assets valued at over \$1 billion, eradicated over 193,000 marijuana plants, provided training to 400 law enforcement officers across the state, and mentored 250 children. In New Hampshire, the Counterdrug Task Force assisted with 238 separate narcotics cases, resulting in 606 arrests and \$7.85 million in seized illicit drugs, property, weapons, and cash. Of those seizures, more than half were opiate based drugs (fentanyl, heroin, and diverted pharmaceuticals).

As you know, deaths from drug overdoses are sweeping across our country. In 2014, driven largely by addiction to opioids—namely, prescription painkillers and heroin—a total of 47,055 drug overdose deaths occurred in the United States, or about 125 Americans a day.

That is why it is so important that we fully utilize all available resources to fight this epidemic, including the National Guard. To accomplish this goal, we encourage the NGB, in its next annual review of the Counterdrug Program's TBRM, to restructure the funding model to accurately reflect the severity of this drug epidemic. Currently, the TBRM fails to take into account state-specific drug overdose death rates, as reported by the CDC, when determining funding awards. Rather, the TBRM emphasizes raw population as the basis for funding, which results in disproportionate funding allocations to states that may not face the same rates of drug abuse and overdose. New Hampshire and West Virginia were in the bottom third of state funding distributed by the Counterdrug Program in FY15 despite per capita overdose rates ranking in the top third of the states and territories.

We hope that our concerns can be addressed and we look forward to continuing to support you on these important matters. We are eternally grateful for your dedication, the sacrifices made by our brave men and women serving in the National Guard, and sacrifices made by the families of those service members.

Sincerely,



Shelley Moore Capito
United States Senator



Jeanne Shaheen
United States Senator

Cc: Secretary of Defense Ash Carter
Cc: Secretary of the Army Eric Fanning