



## 2015 EPILEPSY CAPITOL HILL MESSAGE

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1. The Epilepsy Foundation believes epilepsy should be a federal public health priority, and supports investments in public health programs that help build safer communities, end stigma associated with epilepsy, educate community leaders, and build awareness that benefits everyone with epilepsy and other chronic health conditions and disabilities. **We urge Congress to continue to invest in critical epilepsy public health programs at the Centers for Disease Control and Prevention (CDC) by supporting a funding level of \$13.49 million to ensure the safety and health of people with epilepsy.**
2. The Epilepsy Foundation supports \$160 million in funding for epilepsy research at the National Institutes of Health (NIH) and \$32 billion in overall funding for NIH. We urge Congress to continue to invest in research initiatives that have been partially funded at the NIH, and to support funding for a cure and better treatments for epilepsy. **We urge Congress to continue to support the following initiatives at National Institute of Neurological Disorders and Stroke (NINDS):**
  - **NINDS Centers Without Walls.** The initiative promotes a virtual opportunity for collaborative research.
  - **EUREKA** (Exceptional, Unconventional Research Enabling Knowledge Acceleration) **Grants.** The grants support highly innovative and novel approaches in epilepsy research.
  - **BRAIN** (Brain Research through Advancing Innovative Neurotechnologies) **Initiative.** The initiative calls upon the private and scientific communities to form partnerships to advance research on mapping the human brain.
  - **iCare** (Interagency Collaborative to Advance Research in Epilepsy). Led by NINDS, this initiative coordinates the research efforts of federal agencies and voluntary organizations to identify areas for collaboration.
3. The Epilepsy Foundation supports legislative proposals that would end lengthy delays in the Drug Enforcement Administration (DEA) scheduling process for new therapies (new molecular entities) after Food & Drug Administration (FDA) approval. **We urge Congress to support the *Improving Regulatory Transparency for New Medical Therapies Act (H.R. 639, S. 481)*, bipartisan legislation that would bring transparency to the scheduling process by requiring that DEA schedule a new therapy within a set timeframe after FDA approval.**
4. The Epilepsy Foundation is committed to supporting physician-directed care and to exploring and advocating for all potential treatment options, including medical cannabis and cannabidiol (CBD). We support rescheduling cannabis to a schedule other than Schedule I and lifting federal barriers to research on cannabis and CBD. We also support safe, legal access to medical cannabis if a patient and their healthcare team feel that the potential benefits of medical cannabis for uncontrolled epilepsy outweigh the risks.

People living with uncontrolled seizures have a continual risk of serious injuries and loss of life. Working with their health care team, some people with uncontrolled seizures may wish to consider medical cannabis when other options have failed, we support this access. **We urge Congress to support the *Compassionate Access, Research Expansion, and Respect States (CARERS)* Act (S. 683 and H.R. 1538) and the *Charlotte’s Web Medical Access Act of 2015 (H.R. 1635)*, both would improve safe, legal access to cannabis for research and individuals in states with medical cannabis programs.**

5. The Epilepsy Foundation supports legislative proposals that strengthen the Six Protected Classes policy in Medicare Part D, which is intended to protect the most vulnerable patients by ensuring timely access to lifesaving medications. **We urge Congress to support the *Medicare Formulary Improvement Act (S. 648)*, bipartisan legislation that would ensure that anticonvulsants and the other five classes of clinical concern remain protected under Medicare Part D.**

**If you have any questions or concerns, please contact Angela Ostrom, COO & Vice President Public Policy at [aostrom@efa.org](mailto:aostrom@efa.org) or 301-918-3766.**