

Testimony of U.S. Pain Foundation in Support of Senate Bill 21
An Act Concerning Health Insurance Coverage of Abuse Deterrent Opioid Analgesics
February 5, 2014

Chairman and members of the committee, thank you for the opportunity to testify in support of Senate Bill 21. My name is Paul Gileno and I am President of the U.S. Pain Foundation, a national non-profit based here in Middletown, Connecticut. We are an organization created by people with pain for people with pain and we recognize and validate the 100 million Americans who courageously battle pain every day. U.S. Pain Foundation works across the country every day to support and advocate for the needs of those living with chronic pain to have access to the medications their doctors prescribe. We also work to make sure those who choose to abuse these medications can't do so. We support restricting access to those who are abusing while keeping those who are in compliance away from penalty or stigma.

I am here to support Senate Bill 21. This bill would require insurance companies to cover abuse deterrent formulation, or ADF, medications at the same level as traditional pain medications. Due to the way ADF medications are developed, the drugs cannot be crushed, injected or otherwise altered to achieve a high. Abuse-deterrent opioids will not be the sole solution, but U.S. Pain Foundation believes they can play an important role as part of a comprehensive approach that addresses misuse and abuse from prevention to treatment.

Abuse deterrents do make an impact. According to the 2013 Journal of Pain, after introduction of the reformulated abuse-deterrent version of OxyContin® into the market, researchers found that abuse rates dropped across a range of patient types and insurers, including:

- 49% decrease in abuse among a subset of opioid abusers
- 41% decrease in abuse among all individuals
- 22% decrease in abuse among commercially insured
- 18% decrease in abuse among Medicaid patients

Abuse-deterrent formulation (ADF) should be part of a comprehensive approach to tackling opioid abuse and misuse in Connecticut. Why put insurer barriers in front of patients and doctors for something that is aimed at preventing prescription abuse and misuse? The FDA considers the development of abuse-deterrent formulations to be a public health priority and is encouraging their development. While ADF medications are not the only tools that should be used to stem the rising tide of prescription drug abuse, the technology should be on the front line in that fight.

Again, I ask for your support of Senate Bill 21. Massachusetts was the first state in the nation to pass similar legislation. Connecticut should take steps to reduce manipulation and diversion by ensuring access to and use of abuse-deterrent opioids. As a pain patient myself, I see ADF technology as a way to help put a stop to the unnecessary abuse of critical medications, while not penalizing those who have legitimate need for pain relief.