



**Testimony of Victoria Veltri
Office of Health Strategy, Executive Director
Before the General Law Committee
In support of HB 7159, AAC Opioid Use
March 12, 2019**

Good afternoon, Representative D’Agostino, Senator Fonfara, Senator Witkos, Representative Cheeseman and members of the General Law Committee. For the record, I am Vicki Veltri, Executive Director of the Office of Health Strategy (“OHS”). OHS brings together current state efforts and staff to provide integrated, comprehensive leadership to implement data driven strategies that promote equal access to high quality health care, control costs and ensure better health for the people of Connecticut.

Governor’s Bill 7159, An Act Concerning Opioid Use, proposes common sense measures to address the opioid crisis with which our state and nation continue to struggle. While early data suggests that our efforts to date to mitigate the opioid crisis in Connecticut may be producing tangible benefits, there remains more to be done.

The Department of Public Health projects that the incidents of deaths due to opioid overdose may be stabilizing, with about the same number of people overdosing on opioids in 2018 as did in 2017.ⁱ While this is a positive sign after years of dramatic and seemingly unrestrained growth in the number of Connecticut citizens who died from overdose of these drugs, the stark reality is that nearly 3 people still die each day as a result of opioid abuse. That is unacceptable, and if Governor’s Bill 7159 passes, there will be a day when these statistics are drastically reduced reflecting the enhanced supports and consumer education we are investing in.

One common theme raised routinely in discussions about the opioid crisis concerns consumer’s understanding of the strength and consequences of using these drugs. For many people, opioids are a reasonable and beneficial, short term treatment, but if they don’t recognize how easy it is to



develop an addiction, alternate options for treatment of ongoing or chronic conditions, or the risks of alternate sources of opioids, the consequences can be lethal. HB 7159's requirement that pharmacists offer counseling to consumers about their prescriptions, which can be crucial to ensuring that a person knows how to safely and effectively maximize their therapeutic benefit. HB 7159 promotes this important function by expanding access to allow pharmacy technicians to query the state's Prescription Drug Monitoring Program on behalf of the pharmacist for information about a consumer's pertinent prescription history, allowing the pharmacist to spend more time providing these important consumer protections. This legislation also strengthens reporting requirements for manufacturers of controlled substances in an effort to identify and mitigate the improper use or sale of these drugs.

In addition, HB 7159 would bar certain insurers from using history of naloxone prescription for a consumer when underwriting an application for life insurance or annuity. Naloxone is a highly effective drug that those with opioid addiction or their loved ones who proactively obtain a prescription rely on in the event of an overdose, and penalizing people for taking reasonable, effective, life-saving measures for the management of possible overdose disincentivizes utilization of this extremely effective and affordable intervention. Mere possession of naloxone or a prescription is a wildly inaccurate measure of the risk a person represents for underwriting purposes. Instead, Connecticut again led national opioid policy, acknowledging the importance of expanding access to this drug by permitting certified pharmacists to prescribe and dispense naloxone to patients or their caregivers. The elimination of this unnecessary and illogical adverse consequence for those taking reasonable, clinically appropriate and state sanctioned precautions in response to this crisis simply furthers Connecticut's common sense opioid policies.

Finally, for providers prescribing an opioid for a patient for a period of greater than 12 weeks, HB 7159 requires that they execute a pain management contract with their patient. The act of executing this contract requires that there be detailed and comprehensive counseling about the risks and benefits of opioids, the prescribing provider's expectations for the course of treatment, and the provider's expectations for his or her patient. This codifies the education that most providers already provide their patients, and reinforces the importance and seriousness of the drug for the patient.



Thank you for providing me the opportunity to deliver OHS's testimony today. If you have any questions concerning my testimony, please feel free to contact me at victoria.veltri@ct.gov.

ⁱ <https://portal.ct.gov/DPH/Press-Room/Press-Releases---2019/Preliminary-Opioid-Involved-Overdose-ED-Visit-Rate-May-be-Stabilizing>