

March 25, 2019

Re: SB 1057 An Act Concerning Opioid Use Disorder

Senator Abrams, Representative Steinberg and members of the Public Health Committee

My name is Dr. Joanne Santiago and I am the President of the Connecticut Chiropractic Association. We commend you for remaining diligent on this opioid crisis to rescue those afflicted with the dangers of opioid use and your objectives to help alleviate the use and abuse of opioids. This bill addresses the issue for institutions of higher learning and for persons covered under Medicaid by establishing policies that utilize opioid antagonists and medication assisted treatment for opioid drug overdose and opioid use disorder. We believe it necessary to include the non-drug health care professions to help individuals achieve success in eliminating opioid use and arrive at good health and well-being. We respectfully bring to your attention the work done by the Workgroup of the Connecticut Alcohol and Drug Policy Council and its recommendation to utilize non-drug care to help alleviate chronic pain and the opioid crisis. These recommendations were established after reviewing the non-drug methods of health care science and clinical evidence. Their report to the legislature recommends the following:

"Physical therapy, acupuncture, massage, and chiropractic care should be part of the response to chronic pain. Based on available literature regarding alternative opioid treatment therapies, we recommend, as a first phase, targeting changes in access to these four interventions for two types of chronic pain: low back pain and neck pain. Given experience and results of phase one, additional types of chronic pain could be added."

Individuals with opioid use disorder, no matter how they arrived at this condition, should have the liberty in all public health policies to access and utilize non-drug methods of care to achieve good health and well-being. Disclosing to patients the benefits of chiropractic and other non-pharmaceutical treatment prior to prescribing opioid medication, and/or providing such care as part of the treatment program to reduce and eliminate opioid drug use, will raise this process into the comprehensive approach to health care.

We respectfully suggest you utilize our recommendation attached to this testimony to SB 1057. Our proposal is consistent with the recommendations from the Workgroup of the Connecticut Alcohol and Drug Policy Council and we are pleased to help with our expertise in this regard.

Respectfully,



Joanne Santiago, D.C.  
President

**Connecticut Chiropractic Association**  
**Proposal on Preventing and Treating Opioid Use Disorder**  
**2019**

- (a) Before starting a patient on an opioid when such patient seeks treatment for any condition that causes pain, a health care practitioner shall inform, refer or prescribe to a patient any of the following treatment methods, based on the practitioner's clinical judgment and the availability of the treatment: chiropractic services by a chiropractor licensed under chapter 372, acupuncture by an acupuncturist licensed under chapter 384c, physical therapy by a physical therapist licensed under chapter 376 or massage therapy by a massage therapist licensed under chapter 384a.
- (b) Nothing in this section should be construed to require that one or more of the treatment methods set forth in subsection (a) are required to be exhausted prior to the patient receiving a prescription for an opioid.
- (c) Nothing in this section shall preclude a practitioner from simultaneously prescribing an opioid.
- (d) The commissioner shall recommend guidelines for the use of evidence-based, non-pharmaceutical interventional therapies to treat chronic pain that include, but are not limited to, chiropractic treatment and services, acupuncture, physical therapy and massage therapy.
- (e) The commissioner shall conduct an outreach and marketing campaign to the public and healthcare consumers about the methods available for treating chronic pain that do not involve the use of an opioid drug.
- (f) At a minimum, an insurance provider who offers an insurance product in this state shall provide coverage for at least 20 visits per event for chiropractic services by a chiropractor licensed under chapter 372, acupuncture by an acupuncturist licensed under chapter 384c, physical therapy by a physical therapist licensed under chapter 376 or massage therapy by a massage therapist licensed under chapter 384a.