

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: HB-5597

Title: AN ACT CONCERNING OPIOIDS.

Vote Date: 3/26/2021

Vote Action: Joint Favorable

PH Date: 3/24/2021

File No.: 410

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SPONSORS OF BILL:

The Public Health Committee

REASONS FOR BILL:

This bill establishes a 10-member task force to study protocols used by first responders, EMS personnel, police officers, hospital personnel, and medical examiners following an opioid overdose death. The task force must report its findings and recommendations to the Public Health and Public Safety Committees by January 1, 2022.

The bill also requires the Department of Public Health commissioner to establish guidelines for the use of evidence-based, non-pharmaceutical therapies to treat chronic pain and conduct educational outreach activities to raise awareness of these guidelines by January 1, 2022.

RESPONSE FROM ADMINISTRATION/AGENCY:

Deidre S. Gifford, MD, MPH, Acting Commissioner, Department of Public Health (DPH): Commissioner Gifford and the DPH support Section 1 of this bill to study current opioid overdose deaths with the addition of clarifying language to make the study recommendations useful and actionable to the agency due to the exhaustive measures already in place that monitor and attempt to prevent opioid overdose deaths in the state. DPH would also like the membership list of studied participants to include hospital emergency room personnel, mental health and addiction services professionals, and a forensic pathology clinician. Additionally, they want the study results linked to the statewide Alcohol and Drug Policy Council.

The DPH opposes Section 2 of this bill. They state that the Centers for Disease Control and Prevention (CDC) addresses and promotes the use of evidence-based, non-pharmaceutical therapies to all clinicians when considering pain management strategies. The DPH supports

the CDC efforts via federal grant dollars and any additional efforts would be redundant. They also feel that these efforts are best developed and managed by the applicable professional societies and national organizations rather than a state government agency.

Miriam Delphin-Rittmon, PhD, Commissioner, Department of Mental Health and Addiction Services (DHMAS):

Commissioner Delphin-Rittmon and the DHMAS support Section 1 of this bill with the addition of two additional task force members to include one representative from the DHMAS and a second from the recovery community.

The DHMAS states they already have a robust and highly coordinated substance abuse prevention, treatment, and recovery protocol utilizing state and federal funds. Their experience with the recovery community as part of their routine protocols has been highly successful and they feel that they are a critical component in addressing the substance abuse problems facing the state.

NATURE AND SOURCES OF SUPPORT:

Representative Bill Buckbee:

Representative Buckbee supports this bill as part of a collection of bills he is championing this session to address the opioid crisis in the state. He wants the current protocols used by both the Department of Public Health and the Department of Mental Health and Addiction Services strengthened via the results of this study to better support both the agencies that provide support and the people struggling with addiction.

Nicole Arel, Government Relations Chair, American Massage Therapy Association-Connecticut Chapter (AMTA):

Ms. Arel and the AMTA support this bill and would like an amendment to add massage therapy as one of the allowable evidence-based, non-pharmaceutical therapies to treat chronic pain along with chiropractic treatment and physical therapy as part of the state's efforts to address the opioid crisis. They state that massage therapy is now recognized as an effective pain management tool and massage therapists are licensed by the Department of Public Health and meet several of the same training, certification, and insurance requirements as chiropractors and physical therapists.

Mat DiMond, Legislative Committee Chair, Connecticut Chiropractic Association (CTChiro):

Mr. DiMond and the CTChiro support this bill because they want more people to be aware of the benefits of chiropractic treatment and how it can reduce pain without drugs.

Caroline Kate Keefe, Member of Government Affairs, Connecticut Occupational Therapy Association (ConnOTA):

Ms. Keefe and the ConnOTA support this bill and would like language added in Section 2 to include occupational therapy as one of the allowable evidence-based, non-pharmaceutical therapies to treat chronic pain. Occupational therapy has been recognized at the federal level as licensed healthcare providers able to address the opioid crisis.

Gloria Merritt, Behavioral Health Nurse, Elara Caring:

Ms. Merritt supports this bill due to her experience working in the substance abuse

community for decades and would like the Committee to add behavioral health services professionals to the list of task force members. This would include any number of people active in the recovery community because they bring experience and insight that can help prevent the tragedy of opioid abuse death.

NATURE AND SOURCES OF OPPOSITION:

Connecticut State Medical Society (CSMS):

The CSMS does not support this bill as written. They do not feel that another task force is necessary as we already have the Connecticut Alcohol and Drug Policy Council (ADPC) comprised of physicians with substance abuse disorder and representatives from all three branches of state government. They suggest expanding the scope of the ADPC to include the study of opioid overdose protocols.

Additionally, the CSMS has concerns with the list of required task force personnel as it does not include physicians. The CSMS states that this bill is an attempt by the Committee to practice and legislate medicine.

The CSMS does not support Section 2 of this bill as there are already well established protocols for pain management in the medical community. Pain management is a complex medical practice and chronic pain can be a marker for a serious disease or disorder. These are tasks best left to medical professionals and not unqualified government officials.

Reported by: Kate Hamilton

April 16, 2021