

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: SB-274

Title: AN ACT CONCERNING OPIOIDS.

Vote Date: 3/11/2024

Vote Action: Joint Favorable

PH Date: 3/6/2024

File No.: 93

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SPONSORS OF BILL:

The Public Health Committee

REASONS FOR BILL:

Connecticut is experiencing an increase in multigenerational opioid crises with a significant negative impact on the health and safety of families, and in particular children. This bill will require the Alcohol and Drug Policy Council (ADPC) to establish a standing subcommittee to examine programs and services for parents and caregivers and their children impacted by substance abuse. In addition, the subcommittee, in consultation with various stakeholders, is to develop recommendations to improve the delivery of treatment and services to families, supports to protect children, and improve Narcan distribution to targeted parents and caregivers. The bill also requires the following:

- The subcommittee submit their recommendations to the ADPC, DMHAS, and the Opioid Settlement Advisory Committee, and report to the Appropriations, Children's, and Public Health committees by January 1, 2025.
- In addition, the bill requires the Department of Social Services (DSS) and insurance commissioners, in consultation with the commissioner of DPH and DMHAS, to develop a plan to require Medicaid and private insurance to cover the cost of opioid antagonists for patients, as applicable, being discharged from the hospital or ED's. The report is due on January 1, 2025.

RESPONSE FROM ADMINISTRATION/AGENCY:

Nancy Navarretta, Commissioner of the Departments of Mental Health and Addiction Services (DMHAS) and Jodi Hill-Lilly, Commissioner-Designate for the Department of Children and Families (DCF):

The ADCP is a council comprised of expert stakeholders co-chaired by the Commissioners of DMHAS and DCF and legislatively mandated with coordinating a statewide response to alcohol, tobacco, and other drug use in Connecticut. The council is charged with developing recommendations and executing interventions. DMHAS and DCF recognize how vital it is to develop a family-centered approach to treatment of substance abuse disorders. The current subcommittee structure allows for a response to current trends in substance use. With that in mind, we would be happy to further discuss with the proponents how the issues that are contemplated in this legislation, are currently being achieved through the existing framework of the Council. Regarding the additional reporting sought through this bill, currently, the Council issues a triennial report that includes information from all state agencies, including executive and judicial, that are involved in the delivery of substance abuse services. We would be happy to work with the proponent of the bill to discuss what additional data and recommendations would be beneficial to add to this report. We look forward to a continued dialogue on this important concept. Attached to this testimony are the recent comprehensive reports required in section 29 through 34 of Public Act 23-97.

Sarah Egan, Office of the Child Advocate (OCA):

The OCA is charged with reviewing, investigating, and making recommendations concerning how publicly funded state and local programs meet the needs of children. The OCA is specifically required to evaluate the delivery of services to children, and to recommend changes in policies regarding issues of juvenile justice, childcare, foster care and treatment. Regarding the issue of the causes and rates of child fatalities, "Since 2021, almost 50 children under the age of 5 have suffered a near-fatal injury from suspected or confirmed opioid ingestion. The deaths of 12 infants and toddlers in the last few years from fentanyl intoxication and the near-fatal injury of an additional 37 young children during the same timeframe demonstrates the need for more action." Most of the children were saved due to the administration of naloxone by first responders. Ms. Egan referred to a report by Dr. Kirsten Bechtel, a pediatrician, and Chair of the CT Child Fatality Review Panel, who has recommended additional treatment and support options for caregivers with a substance abuse disorder and how best to address caregiver treatment while ensuring child safety. Given the numbers of children living in families affected by substance abuse disorder, the OCA recommends that the state examine the current array of services available to caregivers and their children including access, capacity, and outcomes. The ADCP offers this opportunity to bring together agencies, providers, and policymakers to examine the current array of services in the state and to develop recommendations on how best to protect and support children impacted by adult substance abuse.

NATURE AND SOURCES OF SUPPORT:

Kirsten Bechtel, Pediatrician and Chair of the CT Child Fatality Review Panel:

Dr. Bechtel explained that her committee reviewed the 12 deaths and 40 other cases involving children exposed to fentanyl referred to in Ms. Egan's testimony. Dr. Bechtel shared that during her entire tenure on the panel, they had never reviewed child deaths under similar circumstances. This is truly a crisis impacting our most vulnerable citizens. Dr. Bechtel

strongly supports the creation of the subcommittee to develop a two-generation approach to treatment and prevention.

Matthew Pagano, Chiropractor, and Past President of the CT Chiropractic Association:

Mr. Pagano pointed out that, for many individuals addicted to opioids, their addiction started following a prescription given to address a pain complaint. The Association believes that if the public were made more aware of the variety of non-pharmacological applications for pain management, perhaps some who have become dependent on opiates might have avoided this addiction. Mr. Pagan suggested that chiropractors should be specified in the language as one group of providers who could help people suffering from addiction. He adds that there is a considerable and growing body of research to support the efficacy of these interventions regarding pain and he knows of hundreds of willing providers wanting to be part of the solution.

Margaret Barilli, RN, and President of CT Society of Acupuncturists and Joe Pandolfo, Board Member, CT Society of Acupuncturists:

In her testimony on behalf of the Society, Ms. Barilli wished to offer the expertise and experience of their members to assist as participants or advisors in achieving the goals of this legislation. There is a long history of acupuncturists providing evidence-based, effective, and sought-after treatment for pain management reducing the use of opioids. Recently, several of our members have begun serving Medicaid patients and report that their patients have expressed gratitude for an alternative to costly and risky opioid treatments. Our treatments for pain are also used extensively by the Veterans Administration and are now approved as Medicare services. We welcome the opportunity to work with the committee.

Lynn Rapsilber, APRN, Northwest Nurse Practitioner Group:

APRNs serve people and their families affected by opioids as well as treating opioid addiction among employees and practice owners. Including APRN's to be a part of this committee can offer another perspective to addressing and establishing solutions.

Alison Jacobson, CEO of First Candle:

Fist Candle is a non-profit head-quartered in CT that addresses Sudden Unexpected Infant Death (SUID) issues. The growing opioid crisis is not only affecting adults but also infants and we support any effort to mitigate this devastating impact on our babies.

NATURE AND SOURCES OF OPPOSITION:

None expressed.

Reported by: Kathleen Panazza

Date: March 8th 2024