

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: HB-6913

Title: AN ACT CONCERNING OPIOIDS.

Vote Date: 3/27/2023

Vote Action: Joint Favorable Substitute

PH Date: 3/22/2023

File No.:

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SPONSORS OF BILL:

The Public Health Committee.

REASONS FOR BILL:

With the overall increase in the use of anti-anxiety, anti-depressant, attention deficit hyperactivity disorder (ADHD) and other mental health medications, there exists the increased likelihood of individuals becoming addicted to such medications. This bill makes changes to opioid use disorder prevention and treatment. Among other things, it provides the following:

- Retaining patient records including, and where possible, status updates on their health at least every four months for a year after their last treatment.
- Requires presidents of higher education institutions to report, by January 1, 2024, to the Public Health and Higher Education committees the implementation of its policies on the availability and use of antagonists on their campuses.
- Requires DHMAS to collaborate with DSS to create a pilot program for prescription digital therapeutics and report the findings by January 1, 2024.
- Prohibits dispensing of controlled substances for patient treatment from a mobile unit that is within 500 feet of a school, childcare center, playground or public park.
- Requires DHMAS, DCF, and DSS to evaluate substance abuse programs for people who are childcare givers; are pregnant and/or parenting persons; as well as programs to prevent people from having their children removed from the home and support reunification of the children with the family.
- Adds to the Opioid Settlement Fund Advisory Committee two members with experience supporting infants and children affected by the opioid crisis.

RESPONSE FROM ADMINISTRATION/AGENCY:

Nancy Navarretta, Commissioner, the Department of Mental Health and Addiction Services (DHMAS):

DHMAS offers a range of person-centered opioid use disorder treatments including outpatient, residential and inpatient care. To mitigate opioid addiction, DHMAS has provided training and funding for providers to implement medication assisted treatment (MAT), distributed Narcan, funded outreach to communities, and implemented multi-media campaigns to educate citizens about opioid misuse and programs available to help. Regarding Section 1, this bill requires treatment facilities to maintain records for a minimum of one year which is significantly less than current law making this requirement unnecessary. DHMAS also has serious concerns regarding Section 4 that would prohibit the transport of medications. Vans providing medication to individuals living with disorders have been an effective way to reach populations that have limited access to treatment and these lifesaving medications.

Manisha Juthani, MD, Commissioner of the Department of Public Health:

The Commissioner explained that with the passage of PA 22-108, mobile methadone dispensing options were allowed to open in Connecticut. In working with other agencies and stakeholders, DPH included in its implementation of this program that local towns and municipalities should have the opportunity to approve the location of these mobile units. Once approved by local authorities, the dispensing operators would be required to report their location to the Department. DPH hopes that Section 4 of this bill can reflect this goal to generate as much flexibility as possible for this vital program.

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

OCA supports this bill but offers multiple recommendations concerning the impact of opioid use disorder, not just on adults, but on children as well. This is a two-generational issue. Ms. Egan shares that the OCA is currently conducting an in-depth review of unexpected and preventable infant and toddler fatalities during a recent 3-year period. While infant-toddler death can result from a myriad of causes, it was found that at least eight deaths were from fentanyl intoxication. This demonstrates the need to provide home-based services that can work with families struggling with opioid use disorder and fentanyl dependency.

NATURE AND SOURCES OF SUPPORT:

Connecticut Hospital Association (CHA):

CHA supports the intent of this bill but asks the Committee for clarification concerning license types in Section 19a-490. To avoid confusion, CHA requests this section be clarified to confirm that the requirements shall be specifically applicable to "substance abuse treatment facilities" and not to other types of licensed healthcare facilities.

Olivia Goodwin, Connecticut resident:

Ms. Goodwin supports the intent of this bill but points out that by limiting the transportation of naloxone, it undermines the efforts of Section 2 in this bill as well as similar Sections 4-5 and 6-9 in SB 9. Our legislation must be consistent to be effective.

Gregg Gonsalves, Associate Professor of Epidemiology at Yale School of Public Health:

Mr. Gonsalves supports the bill as another step to overcoming the overdose crisis. He supports Section 2 which includes provisions to help establish naloxone access for students, teachers and staff in schools across the state. However, he believes that restrictions on transport of controlled substances is counterproductive to the overall goal of the bill.

The following individuals also submitted testimony supporting the availability of naloxone in schools, but oppose the restrictions on transport as outlined in Section 4 of the bill:

- Jason Ortiz, Students Sensible Drug Policy.
- Duncan Markovich, Owner and Co-Founder, Better Ways LLC.
- Noushyar Panahpour Eslami, Master of Public Health, Yale School of Medicine.
- Scott and Kellie Choquette, parents who lost a son the fentanyl poisoning.
- Winnie Ho, Master of Public Health Student at Yale School of Medicine.

Scott Young, Animal Policy Group:

Mr. Young points out that last year his group was unable to clarify if veterinarians were included in the language of PA 22-108. Since HB 6913 amends that section, this is an opportunity to revisit this question and the group respectfully asks the Committee to consider an exemption for veterinarians regarding the transport of certain medications.

NATURE AND SOURCES OF OPPOSITION:

Chad McDonald, MD, Medical Director for an Addiction Behavioral Network:

Dr. McDonald is opposed to the use of "prescription digital therapeutics" referred to in Section 3 of the bill. He points out that it is difficult enough to educate and to facilitate patients coming for their office visits to engage with therapists for individual and group therapy. Adding a third party to their care plan will only serve to fragment their treatment. This is a "shiny" new industry with limited proven efficacy.

Reported by: Kathleen Panazza

Date: April 8, 2023