Senator Crisco, Representative Megna and members of the Insurance and Real Estate Committee, on behalf of the physicians and physicians in training of the Connecticut State Medical Society (CSMS), thank you for the opportunity to present this testimony to you today on House Bill 5620 An Act Concerning Insurance Coverage For Opioid Analgesics And Requiring A Study Of Impediments To Insurance Coverage For Substance Use Disorder Treatments. This bill would require the Insurance Commissioner to study impediments to insured’s access to treatments for substance abuse disorder and prohibit coverage for long-term prescriptions for opioid analgesics.

CSMS fully supports the need for the Commissioner to study impediments to access to substance abuse services for insured patients. We have long urged the General Assembly to address the lack of access and resource to treat this deadly disease that not only takes lives, but harms families, friends and loved ones arguably more than any other disease. We know that a significant barrier to treatment is the availability of resources. However, we also posit that the cost of treatment, particularly with the proliferation of high-deductible plans, and the lack of parity in coverage for addiction treatment versus other diseases, will be found to be significant barriers.

CSMS opposes Sections 1 and 2 of this proposed legislation that would prohibit an insurer from providing coverage for more than a thirty-day supply of an opioid analgesic. First, we must reiterate how CSMS has been at the forefront of efforts to address the opioid and heroin crisis that is gripping the state and the country. These efforts have included pioneering the state’s Prescription Monitoring Program with the Department of Consumer Protection, supporting the need for all prescribers to register for its use, advocating for increased resources to treat addiction as well as for the availability of opioid antagonists, and supporting efforts to require coverage for abuse deterrent formularies. With that said, it must be acknowledged that a small portion of patients require long-term use of opioid analgesics to treat chronic pain. These patients are almost always treated by physicians specializing in pain management under pain management contracts. These patients are carefully monitored by these physicians on a regular basis.

As the cost of all medications has been increasing dramatically, many steps have been taken by this Committee to assist patients in their ability to afford needed prescriptions. These actions have included the ability for certain prescription to be filled for ninety days, to limit the patient’s co-payments and deductibles. CSMS has supported these efforts. Eliminating the ability for the portion of patients needing long-term pain management through opioid analgesics to take advantage of this statute will place an increased financial burden on them, and will also intrude on the clinical judgment of highly specialized physicians. Rather, we suggest that we focus on such items as coverage for abuse deterrent formularies and increased access to substance abuse treatment.