



STATEMENT FOR THE RECORD

**United States Senate Committee on Health, Education, Labor and Pensions
(HELP)**

Hearing:

“Managing Pain During the Opioid Crisis”

Tuesday, February 12, 2019, 10:00AM ET

Submitted by: Chris Fox, Executive Director

Voices for Non-Opioid Choices (“Voices”) appreciates the Senate Health, Education, Labor and Pensions (HELP) Committee’s efforts to examine legislative approaches to help patients manage their pain during our country’s opioid epidemic.

Voices believes that, by putting patients in charge of their pain management options, we can serve multiple goals while helping acute pain patients, including improving patient health outcomes, reducing the number of opioid pills prescribed after surgeries, and ultimately, saving health care resources. Accordingly, Voices urges the Committee, as part of its work, to consider policies that increase patient access to non-opioid approaches to pain management, including pharmacologic and non-pharmacologic interventions that are proven to help patients manage their acute pain.

Voices is a non-partisan coalition dedicated to increasing patient choice in acute pain management, including by helping them access non-opioid options. In this context, Voices works to remove barriers that inhibit patient access to the wide array of pain management options, including reimbursement hurdles, promoting procedure-specific clinical guidelines, and promoting increased pre-surgical counseling on acute pain management options for patients.

How We Can Address the Opioid Epidemic in America

Every year, millions of Americans become newly persistent opioid users following an otherwise routine surgical procedure.¹ It is easy to see why – surgical patients in the

¹ Choices Matter: Exposing a Silent Gateway to Persistent Opioid Use. October 2015;15. Available at: https://www.planagainstpain.com/wp-content/uploads/2018/10/ChoicesMatter_Report_2018.pdf.

United States often receive hundreds of opioids following a procedure.² In fact, all told, nearly 10 percent of all surgical patients in 2017 became persistent opioid users and were still taking opioids three to six months after the procedure.³

Voices believes that we can mitigate this trend by increasing utilization of non-opioid approaches to pain management, which would significantly limit opioid prescribing in the United States. In 2017, 10.5 opioid pills were prescribed to patients in the United States – this is enough for every American – men, women, and children – to have 32 opioid pills each.⁴

Benefits of Increasing Access to Non-Opioid Pain Management Approaches

Voices believes that the benefits of utilizing non-addictive, non-narcotic approaches to acute pain management are clear. Specifically, increased utilization of such non-opioid management approaches would:

- Reduce the number of opioid pills available for abuse and diversion in communities around the country;
- Reduce the prevalence of post-surgical addiction and the three million newly persistent opioid users every year; and
- Improve patient health outcomes by limiting opioid adverse events, helping patients recover function more quickly after surgery, and shorten hospital lengths of stay.^{5,6}

Current Barriers to Patient Access to Non-Opioid Approaches

Unfortunately, there are significant barriers that currently exist inhibiting patient access and choice when it comes to managing acute pain.

First and foremost, Voices believes that pain management choices should be made by patients in consultation with their physicians and that patients should have a choice in how they manage their pain. In any other care model, patients would be put in charge of decisions related to their health care. Unfortunately, when it comes to how these patients want to manage their pain, decisions are ultimately made for them and are made based on economic considerations, rather than what is best for the patient.

² Ibid.

³ Ibid.

⁴ Ibid.

⁵ Beck DE, Margolin DA, Babin SF[‡], Russo CT. Benefits of a Multimodal Regimen for Postsurgical Pain Management in Colorectal Surgery. *Ochsner J.* 2015;15(4):408-12

⁶ Afonso A, Oskar S, Tan KS, Disa JJ, Mehrara BJ, Ceyhan J, et al. Is Enhanced Recovery the New Standard of Care in Microsurgical Breast Reconstruction? *Plast Reconstr Surg.* 2017

To address this challenge, Voices supports policies that:

- Facilitate patient access to a range of evidence-based pain management approaches – including pharmacologic and non-pharmacologic non-opioid interventions;
- Promote patient choice and education in how patients manage their pain, including by providing for pre-surgical pain management consultations with trained healthcare professionals; and
- Streamline clinical practices to pain management through the development of procedure-specific clinical guidelines that ensure all patients can access multi-modal approaches to acute pain management.

Opportunities to Increase Patient Access to Non-Opioid Approaches to Pain Management

Voices believes that increasing patient access to non-opioid approaches is a no-brainer. When you consider the broader context of our country's opioid epidemic, supporting efforts to promote or facilitate access to non-addictive, non-narcotic pain management approaches makes even more sense – for patients, for clinicians, and for the country.

Just last year, we saw the Centers for Medicare & Medicaid Services (CMS) make an important policy change that would, for the first time, provide separate reimbursement for pain management services for patients treated in an ambulatory surgery center (ASC). This was an important step and one that will help these patients access non-opioids; however, more needs to be done.

Unfortunately, because millions of Medicare beneficiaries are ineligible to be treated in an ASC, this rule unfortunately means that approximately 8 million Medicare beneficiaries may lack access to non-opioid approaches as a similar policy change was not afforded to those patients treated in a hospital outpatient setting.⁷ Voices believes in parity across care settings and that that we must accordingly ensure that **all** patients have access to non-opioid approaches - whether they are treated in an ASC or a hospital outpatient setting.

Voices stands ready to work with Congress and the Administration on addressing the opioid epidemic by helping Americans manage their pain in a more responsible manner. To us, this means ensuring that patients have choices when it comes to managing their pain. We believe there are commonsense approaches available to lawmakers to serve this important goal and we commend the Committee for its attention to this important matter.

⁷ Hall, MJ, Schwartzman A, Zang J. Lui X. Ambulatory Surgery Data from Hospitals and Ambulatory Surgery Centers: United States, 201. Natl. Health Stat Report. 2017 Fe;(102) 1-15.