



January 30, 2025

Dr. Brad Barrett (R-56)
Chair, Public Health Committee
Indiana House of Representatives
Indiana General Assembly
200 W. Washington St.
Indianapolis, IN 46204

Dear Chairman Barrett,

On behalf of the patients, providers, families, and health professionals our organizations represent, we respectfully request a hearing before the Public Health Committee on Indiana House Bill 1358 at your earliest convenience. This important legislation seeks to prevent unnecessary exposure to prescription opioids and ensure access to a wide array of FDA-approved, safe, and effective non-opioid pain management approaches for those in Indiana.

Voices for Non-Opioid Choices (www.nonopioidchoices.org) is a national, non-partisan, and nonprofit organization based in Washington, DC dedicated to preventing opioid addiction. Our coalition boasts over 20,000 advocates and 200 member organizations from across the country representing the leading patient, provider, and public health advocacy organizations. All told, Voices' members represent millions of Americans affected by the U.S. opioid epidemic.

For too long, our response to the opioid addiction crisis focused solely on opioid overdose death prevention. Such a focus misses the opportunity to prevent addiction where we can, including by reducing and minimizing unnecessary exposure to opioids. One opportunity to do this is to increase the availability of non-opioid pain management approaches. In doing so, HB 1358 will prevent opioid addiction for many of those in Indiana and save lives.

Despite years of attention to combatting the opioid epidemic, the crisis persists. Last year, we lost 81,000 Americans to an opioid-related drug overdose.ⁱ This means that, on average, **we lose more than 200 Americans every day to an opioid-related drug overdose.**

Indiana is not immune from this national epidemic. In 2023, there were **1,651 opioid-related overdose deaths**, accounting for **77.4% of all drug overdose fatalities** in the state.ⁱⁱ For many, the path towards addiction begins after being prescribed opioids to manage an acute pain incident, such

as for postsurgical pain, an accident, or sports injury. In Indiana, there were **49.4 opioid prescriptions written for every 100 persons** in 2023.ⁱⁱⁱ

Fortunately, this is a path to addiction that can be prevented by ensuring access to non-opioid approaches.

Prescription opioids are frequently used to treat acute pain. In fact, as many as **90 percent of all surgical patients** in the United States receive a prescription for opioids to manage postsurgical pain.^{iv} It is easy to understand why prescription opioids are frequently used – medical professionals are trained to treat pain with opioids, they are seen as effective ways to treat pain, and, perhaps most importantly, generic prescription opioids are incredibly cheap. As such, health insurers frequently make generic opioids available to patients at little – or no – charge to the patient.

This inadvertently incentivizes patients – and their healthcare providers – to treat pain with prescription opioids. We must change this care paradigm.

HB 1358 would do just this. This legislation ensures that Medicaid, the Children’s Health Insurance Program (CHIP), and private health insurance plans do not impose stricter coverage restrictions on FDA-approved non-opioid pain management drugs compared to opioids.

In short, HB 1358 would go a long way towards preventing opioid addiction by ensuring robust access to non-opioid pain management approaches. The legislation accomplishes this by making sure that health insurers are not putting up barriers that inhibit patient access to these products.

Simply put, we must ensure that all patients can easily access non-opioid pain approaches across all care settings.

Voices for Non-Opioid Choices urges the federal and state government to continue to work hand-in-hand to solve the opioid crisis currently taking place in Indiana, and throughout the country. For too long, prescription opioids have been the default method for managing pain – this puts patients at unnecessary risk for misuse and addiction.

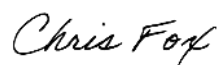
Indiana must remain vigilant in fighting this crisis. Patients deserve choices when managing their pain or recovering from surgery. In order to prevent addiction and save lives, we urge the Public Health Committee to promptly hold a hearing on HB 1358 and ensure it receives consideration.

Together, we can prevent opioid addiction before it starts and, in the process, save lives. We look forward to working with you to advance this important legislation.

Sincerely,



Overdose Lifeline
Chief Executive Officer



Voices for Non-Opioid Choices
Executive Director

ⁱ Centers for Disease Control and Prevention (2024). US Overdose Deaths Decrease in 2023, First Time Since 2018. https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2024/20240515.htm

ⁱⁱ Centers for Disease Control and Prevention (2024). SUDORS Dashboard: Fatal Drug Overdose Data. <https://www.cdc.gov/overdose-prevention/data-research/facts-stats/sudors-dashboard-fatal-overdose-data.html>

ⁱⁱⁱ Center for Disease Control and Prevention (2024). Opioid Dispensing Rate Maps. <https://www.cdc.gov/overdose-prevention/data-research/facts-stats/opioid-dispensing-rate-maps.html>

^{iv} Singh, K., Murali, A., Stevens, H., Vydiswaran, V. G. V., Bohnert, A., Brummett, C. M., & Fernandez, A. C. (2022). Predicting persistent opioid use after surgery using electronic health record and patient-reported data. *Surgery*, 172(1), 241–248. <https://doi.org/10.1016/j.surg.2022.01.008>