



February 11, 2025

Testimony Of
Voices for Non-Opioid Choices
Before The
New York State Assembly Committee on Ways & Means
New York State Senate Finance Committee
On the Governor's Proposed Budget
For State Fiscal Year 2025-2026

Dear New York State Senate Finance Committee,

I am Chris Fox, Executive Director of Voices for Non-Opioid Choices. Thank you for the opportunity to submit this testimony to the committee.

Voices for Non-Opioid Choices (“Voices”) applauds the committee’s ongoing efforts to address the opioid crisis and appreciates the opportunity to raise awareness on this issue. As there is no specific provision in the Governor’s proposed budget addressing access to non-opioid pain management, we urge the legislature to include such a provision to ensure that patients in New York have meaningful access to safe and effective opioid alternatives.

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.

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.

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.**

New York is not immune from this national epidemic. In 2023, there were **5,196 opioid-related drug overdose deaths.**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 New York, there were **26.3 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.

This budget presents an opportunity to change that paradigm by ensuring that non-opioid pain management approaches are accessible. Including provisions to support non-opioid pain management access would align New York’s efforts with other legislative initiatives—both at the state and federal levels—aimed at expanding patient choice and reducing opioid reliance.

This would not put prescription opioids out-of-reach for those patients who want – or require – those treatments. Rather, it would ensure that more New Yorkers would have full access to the full suite of safe, effective, and FDA-approved pain management approaches, including both opioid and non-opioid options.

There are currently some FDA-approved, safe, and effective non-opioid pain management products on the market with more in the pipeline. These include nerve blocks which provide regionally-specific pain relief and are commonly used during oral and soft tissue surgeries. There are also brand name non-steroidal anti-inflammatory drugs (NSAIDs) that are used in a variety of other acute pain incidents, such as sports injuries, migraines and other short-term pain incidents. Finally, there are other physician-administered products that are used instead of fentanyl for cataract surgeries. All of these products greatly diminish reliance on prescription opioids, provide effective analgesic support for patients, and reduce quantities of opioids prescribed and consumed in the United States.

On top of these currently available products, including provisions in the state budget to ensure access to non-opioid pain management options would send a strong market signal to innovators developing novel therapies. There has been a good deal of innovation in the non-opioid market that is starting to bear promise, and several non-addictive approaches may be approaching the market over the next year or so. This signal is clear: if you are successful in bringing new, innovative products to market that can treat pain without relying on opioids, patients will be able to access them.

There are solutions on the market and there are more on the way. However, all of this work, innovation, and advocacy will be for naught if we do not ensure that patients and providers can easily access these products. This inclusion is an important patient safeguard and a commonsense solution to an opioid addiction crisis that gets worse every year.


Including provisions in the state budget to improve access to non-opioid pain management would align with the federal Alternatives to Prevent Addiction in the Nation (Alternatives to PAIN) Act (S.475), which was recently reintroduced in the Senate in the 119th Congress. **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 New York, and throughout the country. For too long, prescription opioids have been the default method for managing pain – and insurance company practices have reinforced this reality. This puts patients at unnecessary risk for misuse and addiction.

As the legislature considers modifications to the governor's proposed budget, we urge you to include provisions that ensure non-opioid pain management options are accessible to all patients. Doing so would help prevent unnecessary opioid exposure, reduce addiction risk, and improve patient outcomes across New York.

Thank you for making the time today to recognize and examine the importance of expanding access to non-addictive alternatives throughout New York.

With appreciation,



Chris Fox
Executive Director
Voices for Non-Opioid Choices

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>