



*September 22, 2025*

**The Honorable Kevin Hertel**

Chair  
Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
Lansing, MI 48933

**The Honorable Sylvia Santana**

Majority Vice Chair  
Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
Lansing, MI 48933

**The Honorable Michael Webber**

Minority Vice Chair  
Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
Lansing, MI 48933

**The Honorable Paul Wojno**

Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
Lansing, MI 48933

**The Honorable John Cherry**

Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
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**The Honorable Veronica Klinefelt**

Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
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**The Honorable Erika Geiss**

Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
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**The Honorable Roger Hauck**

Committee on Health Policy  
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**The Honorable Mark Huizenga**

Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
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**The Honorable Jim Runestad**

Committee on Health Policy  
Michigan Senate  
201 Townsend Street  
Lansing, MI 48933

Dear Chair Hertel, Vice Chair Santana, and Honorable Members of the Health Policy Committee,

Voices for Non-Opioid Choices ("Voices") applauds and thanks Vice Chair Sylvia Santana and Senator Rosemary Bayer for introducing legislation designed to further prevent opioid addiction

in Michigan. Voices would like to extend our full support for Senate Bill 551 and Senate Bill 552, which require Medicaid and private insurers to provide fair, timely coverage of non-opioid pain management drugs without disadvantaging them compared to opioids.

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, SB 551/552 will prevent opioid addiction for many Michiganders and save lives.

Voices for Non-Opioid Choices ([www.nonopioidchoices.org](http://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 combating the opioid epidemic, the crisis persists. Last year, over 54,000 Americans died from an opioid-related drug overdose.<sup>i</sup> This means that, on average, **we lose 148 Americans every day to an opioid-related drug overdose.**

Michigan is not immune to this national epidemic. In 2024, there were **1,309 opioid-related drug overdose deaths**, accounting for **69.6% of all drug overdose fatalities** in the state.<sup>ii</sup> 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 a sports injury. In Michigan, there were **47.9 opioid prescriptions written for every 100 persons** in 2023.<sup>iii</sup>

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.<sup>iv</sup> 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.**

SB 551 and SB 552 prohibit disadvantaging or discouraging coverage of non-opioid prescription drugs compared to opioids or narcotics for the treatment or management of pain, including through stricter utilization controls such as prior authorization or step therapy. Specifically, SB 551 applies these provisions to the Michigan Medicaid program, requiring that newly FDA-approved non-opioid pain drugs be added to the preferred drug list within 90 days. SB 552

applies the same protections to private health insurers, mandating timely formulary inclusion of non-opioid pain drugs within 90 days of FDA approval.

SB 551/552 would not put prescription opioids out-of-reach for those patients who want – or require – those treatments. Rather, the legislation would ensure that more Michiganders 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. These are products that would be made more accessible through SB 551/552.

On top of these currently available products, SB 551/552 sends 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, with several non-addictive approaches already available and more expected to enter the market in the next year or so.<sup>v</sup>

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.

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.

SB 551 and SB 552 serve as a critical safeguard that removes barriers to non-opioid pain treatments, helping ensure these safer alternatives remain accessible to patients. By preventing unnecessary restrictions from health insurers, this legislation offers a commonsense approach to addressing an opioid crisis that worsens each year.

The legislation being considered today mirrors a federal bill, the Alternatives to Prevent Addiction in the Nation (Alternatives to PAIN) Act, which was reintroduced in the 119<sup>th</sup> Congress (H.R.1227/S.475). **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 governments to continue to work hand-in-hand to solve the opioid crisis currently taking place in Michigan 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.

SB 551/552 would expand access to non-addictive pain management options and improve care for the tens of thousands of Michiganders who experience acute pain each year. By ensuring that Medicaid beneficiaries and privately insured patients can obtain non-opioid prescription drugs without unnecessary delays or restrictions, the bills help provide safe, evidence-based alternatives for pain treatment.

Voices applauds the advancements proposed in these bills and urges the committee to take action to prevent opioid addiction before it starts by advancing SB 551 and SB 552.

Once again, thank you for making the time today to recognize and examine the importance of expanding access to non-addictive opioid alternatives throughout Michigan.

With appreciation,

**Kimberly Robbins**

Board of Directors, *Voices for Non-Opioid Choices*

Founder & Recovery Coach, *Setbacks to Comebacks*

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<sup>i</sup> Centers for Disease Control and Prevention (2025). Provisional Drug Overdose Death Counts.

<https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>.

<sup>ii</sup> Ibid.

<sup>iii</sup> 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>

<sup>iv</sup> 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>

<sup>v</sup> Kingwell, K. (2022, October 14). *New non-opioid pain drug pushes through to pivotal trials*. *Nature*. <https://www.nature.com/articles/d41573-022-00175-2>