

Senate Committee on Health and Human Services Chair, Senator Leah Vukmir Testimony by Representative John Nygren April 6, 2017

Thank you Chair Vukmir and members of the Senate Committee on Health and Human Services for holding a public hearing on Special Session Assembly Bills 1, 4, 7, 9, and Special Session Senate Bill 5.

For the past two sessions, we have worked together to pass a package of 17 bills aimed at combating our state's opioid and heroin epidemic. We call this package the Heroin, Opioid Prevention and Education – or HOPE – Agenda. With unanimous bipartisan support and Governor Walker's signature, we successfully laid a foundation to combat heroin and opioid addiction in Wisconsin. That said, there is still more work to be done.

This session, I was appointed Co-Chair of the Governor's Task Force on Opioid Abuse with Lt. Governor Kleefisch. From the work of this task force, the Lt. Governor and I released a report of recommendations to Governor Walker. The governor took immediate action and called for a Special Session on Opioid Abuse.

The following bills are part of Governor Walker's Special Session call to fight opioid abuse and addiction in Wisconsin:

2017 Special Session Assembly Bill 1

Currently, school personnel are only protected to administer epinephrine in the event of an allergic reaction and glucagon in the event of a diabetic students' low blood sugar event. This bill expands upon these safety measures to allow school district personnel to administer an opioid antagonist to a student or other individual who experiences an overdose on school grounds.

Additionally, I worked on an amendment with Rep. Billings to allow residence hall directors in public, private, and technical colleges across the state to administer opioid antagonists to students on campus.

Expanding access to these lifesaving drugs is key to ensuring the safety of all students and adults on school grounds.

2017 Special Session Assembly Bill 4

Codeine is an opioid that can be found in certain cough syrups and other medicines used to treat severe colds and common illnesses. While many other states require a prescription to obtain these medications, Wisconsin does not.

When codeine is ingested in large doses, the person taking the medication can experience a dangerous high. To stop mass consumption of this potentially harmful substance, this bill requires a prescription for certain schedule V medications, like codeine cough syrup.

An amendment has been offered by Rep. Kolste that will expand upon this bill to require a prescription for other Schedule V medications beyond those that contain codeine.

2017 Special Session Senate Bill 5

Under current law, there is a stringent framework in place that allows for the involuntary commitment to treatment for a person who is suffering from alcohol addiction. This bill expands upon current law to allow for the involuntarily commitment of a person who suffers from drug addiction to treatment.

Additionally, I worked with the Wisconsin Counties Association on an amendment that helps streamline the system so counties across the state are notified and ready to provide resources should a person be committed.

This expansion will allow family members, friends, and others the opportunity to bridge the gap between their loves ones' addiction and an opportunity for treatment and recovery.

2017 Special Session Assembly Bill 7

It's well known that there is a need for more addiction experts across the state. Currently, doctors can pursue fellowship positions to become certified in a specific area of medicine; however, addiction-related fellowships are unavailable in Wisconsin. This bill provides grants to support addiction-specific fellowships so doctors can become certified in an area of addiction medicine.

2017 Special Session Assembly Bill 9

In parts of the state, access to addiction medicine specialists, addiction psychiatrists, and other addiction experts is hard to come by. Specifically, rural areas don't have as many addiction resources as more populated areas of the state. This bill creates a doctor-to-doctor consultation service, modeled after the Medical College of Wisconsin's Child Psychiatry Consultation Program (CPCP), to help increase access to addiction experts in underserved areas. With this bill, doctors will have a place to turn if they have questions about best practices when treating a patient who suffers from an addiction.

I appreciate the opportunity to testify before your committee today on these important pieces of legislation and welcome any questions you may have at this time.



Written Testimony concerning January 2017 SSSB 1, 5, 7, and 9 Senate Committee on Health

Dear Members of the Committee,

Thank you for the opportunity to present written testimony concerning Special Session Senate Bills 1, 5, 7, and 9. Six months ago, Governor Walker asked Rep. John Nygren and me to serve as cochairs of a Task Force on Opioid Abuse. Since then we've done a deep dive the many facets of this issue, and the legislation we are recommending stems from our January 2017 report.

SSSB 1 would provide school employees with the same legal protection for administering an opioid antagonist like Narcan that they currently receive for other response services like administering an epi-pen. Though we have not yet had a fatal overdose in a Wisconsin school, this bill would empower districts with the option to ensure trained staff are prepared. SSSB 5 would give families the same opportunity to ensure a struggling family member gets the detox treatment they need that the law currently makes available for another addiction, namely alcoholism.

Concerning SSSB 7 and 9: traveling all over our great state, I often hear about the challenges facing our rural communities. We know we have a skills gap in Wisconsin, where people don't have skills in jobs like computer-numerical machining or welding. But we also have a geography gap, where people don't live in the same places as the jobs are located. That's true in many of our trades, but it's also true in other fields, including health care. We have a skills gap for addiction medicine – there are very few psychiatrists, psychologists, or others trained in this emerging field – and we have a geography gap – there are even fewer trained experts in rural communities.

These bills seek to tackle both of these problems. SSSB 7 would authorize additional graduate medical education fellowships at the University of Wisconsin School of Medicine to train more addiction medicine specialists. And SSSB 9 would create an addiction medicine consultation hotline so that doctors across Wisconsin who encounter these cases can promptly reach experts who are trained in the latest brain and chemical science for treating addiction. Together these bills help address our medical skills gap to ensure that all our citizens have access to the latest innovations and ideas in addressing addiction to heroin and other opioids.

Rebecca Kleefisch
REBECCA KLEEFISCH

Lieutenant Governor

State of Wisconsin



State of Wisconsin Department of Health Services

Scott Walker, Governor Linda Seemeyer, Secretary

April 6, 2017

Senate Committee on Health and Human Services

2017 Special Session Senate Bills 5, 7 and 9

WI Department of Health Services Position: Testifying in favor

Good morning Chairwoman Vukmir and members of the Committee on Health and Human Services,

Thank you for the opportunity to provide written testimony on Special Session Senate Bills 5, 7 and 9 regarding the opioid epidemic in Wisconsin. My name is Jennifer Malcore, and I am the Assistant Deputy Secretary at the Department of Health Services.

By now, I am sure we have heard the statistics. Opioid related overdose deaths more than tripled in Wisconsin, from 194 deaths in 2003 to 622 deaths in 2014, and that heroin abuse is tightly tied to prescription drug abuse. Addressing opioid abuse and addiction requires a multifaceted approach, and we believe the special session bills introduced by Representative Nygren continue this effort.

Giving families the opportunity to petition the court to have someone committed to treatment has not been an option in Wisconsin; it is for alcohol but not for drug dependence. Families are desperate to be able to get help to their loved ones and this is another way to allow that to happen. Special Session Senate Bill 5 will give families that option.

Ensuring accessible and effective opioid addiction treatment is a vital part in a strategic plan to address this epidemic. Special Senate Bill 7 would expand graduate medical training in an addiction specialty. In Wisconsin, we have a critical shortage in the AODA physician workforce of addiction psychiatrists and addiction medicine specialists.

To continue to address this shortage, Special Session Senate Bill 9 would require the Department of Health Services to create and administer an addiction medicine consultation program to assist clinicians and provide care to patients with substance addiction.

Thank you for your time.

Jennifer Malcore



Testimony by ARCW Vice President Bill Keeton in Support of the January 2017 Special Session Package of Bills Addressing Heroin and Opioids

Dear Chairwoman Vukmir and Committee Members,

Thank you for allowing me the opportunity to provide written testimony to in support of the bills resulting from the Governor's Task Force on Opioid Abuse that are aimed at fighting heroin and opioid abuse in our state.

First, it is important to recognize the work of Governor Walker, Lieutenant Governor Kleefisch, Representative Nygren and all of the members of the Governor's task force for their work in developing the set of proposals before you today.

Since 1994, ARCW has been engaged in the fight against heroin and opiate abuse through our nationally renowned HIV, hepatitis C and opiate overdose prevention programs that have been successfully providing services to injection drug users, their family members, their social networks, members of law enforcement and public health programs across the state.

Previous HOPE bills have had a direct and positive impact in addressing the opioid and heroin epidemic. At ARCW, we have been able to increase community access to naloxone and have heard first hand reports of how individuals witnessing an overdose have been more likely to call 9-1-1 for help. Our Lifepoint prevention and outreach program, which is built upon the tenants of harm reduction, operates statewide and last year was instrumental in helping ARCW reach more than 15,000 people who are using opiates and who at-risk for HIV infection in Wisconsin annually. To date, our staff have trained more than 12,000 people on the use of naloxone and provided them with doses they can use to save a life during an overdose. More than 4,000 times, individuals we have trained have returned to one of our locations to let us know they have used the naloxone we provided them to save a life.

The relationship we are able to engage in with our program participants not only helps prevent new HIV infections, it also helps people who are battling addiction get linked to the health care and treatment services they need to begin traveling the often difficult road to sobriety.

These outcomes are the result of the enactment of HOPE legislation.

The five bills being heard today will continue this legacy by helping to overcome identified gaps in our state's ability to address the ongoing opioid epidemic.

Special Session Senate Bill 1 will help ensure that more individuals are protected when administering naloxone or narcan to a student who may be experiencing an overdose.

Much the same as how epinephrine injectors can save the lives of people who are experiencing a severe allergic reaction, the delivery of narcan or naloxone to someone experiencing an overdose in a timely fashion is paramount to saving their life.

By tightening controls related to the availability of codeine, Special Session Senate Bill 4 will help reduce access to another pathway to addiction and abuse of opioids. While often less publicized than other opiates, codeine contributes to the development or continuation of opiate addiction for many individuals. The passage of this bill will help ensure less opioids are available to be abused.

Special Session Assembly Bills 7 and 9 together will help address a critical need in our state's response to this problem as well. Too often, individuals who reach out to ARCW for help in accessing treatment for their addiction are placed on wait lists or are unable to find providers in their areas at all. This is especially true in rural areas throughout the state. Building our provider workforce, clinical capacity and taking advantage of technology are all critical as we continue to address gaps in access to addiction treatment.

ARCW encourages the committee to support passage of the four bills before you today.

Thank you for your consideration of my testimony.

Sincerely,

Bill Keeton Vice President, Government and Public Relations



TESTIMONY BEFORE THE SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES SPECIAL SESSION SENATE BILL 9 Senator Alberta Darling Thursday, April 6 at 10:00 AM

Thank you Chair Vukmir and committee members for holding a public hearing on Special Session Senate Bill 9. The legislation before you is an important recommendation from the Governor's Task Force on Opioid Abuse. Special Session Senate Bill 9 creates a doctor-to-doctor consultation service for physicians to connect with addiction specialists, psychiatrists, and experts in the field of addiction medicine.

While many suffering from addiction in Wisconsin have access to a general practitioner, access to an addiction specialist is not universally accessible across the state. In particular, rural areas struggle with access to addiction specialists. Special Session Senate Bill 9 creates a hotline for primary physicians to easily consult with experts in the field of addiction medicine. This legislation is modeled after the highly successful Child Psychiatry Consultation Program (CPCP), which connected primary physicians with child psychiatrists. When the CPCP was implemented, primary physicians expressed a higher confidence when prescribing medicine, implementing best practices, and in generally handling mental health cases. These same results can be expected in the field of addiction consultation.

Not only will this bill create an ongoing partnership between general physicians and addiction specialists, but it will be instrumental in spreading best practices and addiction education statewide. Special Session Senate Bill 9 is critical in ensuring that every Wisconsin citizen has access to vital addiction resources regardless of where they live.

I'd like to thank Representative Nygren, the members of the Governor's Task Force on Opioid Abuse, and all other stakeholders for contributing to this important piece of legislation.

Thank you again committee members for your time and consideration. I hope I can count on your support for Special Session Senate Bill 9.