



**Testimony Before the
House Committee on Health Care regarding HB 2114
Presented by Dr. Andris Antoniskis
on behalf of the Oregon Medical Association
February 8, 2017**

Thank you for allowing me to testify today. My name is Andris Antoniskis, MD, DFASAM, and I am the co-chair of the Opioid Task Force at the Oregon Medical Association and past president of the Oregon Society of Addiction Medicine. I am board certified in internal and addiction medicine and served as the medical director for Providence's Chemical Dependency program for 33 years.

Oregon physicians, physician assistants and prescribers are well aware of the toll the opioid abuse epidemic has on our patients, families and their communities. My OMA colleagues and myself recognize the role health care providers played in this epidemic and the continuing role we have in reducing the misuse, abuse and unintentional overdose deaths.

The OMA supports the intent of HB 2114, as an effort to reduce the number pills in circulation, based on recent state and Federal guidelines. However, the OMA is concerned about codifying a guideline, which by its very nature, allows for flexibility and modification as needed. As a member of the Oregon Health Authority's Prescribing Guideline's Task Force, which adopted the CDC's Guideline for Prescribing Opioids for Chronic Pain, it was always clear to members that the intent of these guidelines was that they serve as recommendations for prescribers and be updated when/if new evidence becomes available. I can attest to the amount of time that was spent carefully scrutinizing the CDC Guidelines and how to best utilize them in Oregon. The Task Force ultimately adopted CDC Guidelines as the foundation for decreasing opioid-related deaths and included Oregon-specific additions to the Guidelines in order to make them relevant to Oregon prescribers. This work resulted in a CDC grant to the OHA to implement our Oregon-specific guidelines. The OHA will need time to begin this work, especially in educating prescribers about the full Guidelines and how to adopt them in meaningful ways for their practice.

I would encourage the Legislature to consider adopting a statement of policy regarding the opioid crisis that supports the work of the OHA Prescribing Task Force. This would effectively support the evidence-based recommendations of the OHA Task Force and give health care providers the needed time to engage with and implement the Oregon recommendations.

The OMA has taken significant steps in the past few years to ensure our membership is informed and participating in efforts to reduce opioid abuse and misuse by their patients. This has included: an OMA opioid task force to guide OMA CME education and policy, our annual meeting in 2016 dedicated to this topic and attended by over 200 members, an entire magazine issue on the opioid crisis and representation on state and regional coalitions as well as national

coalitions. We continue to work with OHA, the OHLC and the OMB to increase the use of the PDMP and supported HB 4124 in the 2015 session that integrates the PDMP into electronic record systems; implementation is under way. The OMA further supports the evidence-based recommendation that non-pharmacological interventions (such as physical therapy) be “prescribed” and continue to advocate for universal coverage of these services.

The OMA remains a committed partner in the state’s efforts to reduce the misuse and abuse of opioids and as such, encourages the alignment of all state efforts. The ongoing integration of the PDMP into EMRs and the state’s adoption of the CDC guidelines with Oregon additions should be given the opportunity to take root in Oregon’s medical practices before additional measures are taken that could swing the pendulum too far in either direction. The OMA looks forward to continuing its partnership with the legislature and the state to advance these efforts and turn the tide of opioid-related deaths in Oregon while ensuring appropriate patient care.

I would like to thank you once again for the opportunity to address the committee regarding this very important topic and I’m happy to answer any questions.

The Oregon Medical Association serves and supports over 8,200 physicians, physician assistants and student members in their efforts to improve the health of all Oregonians. Additional information can be found at www.theOMA.org.