

114TH CONGRESS
2D SESSION

H. R. 4982

IN THE SENATE OF THE UNITED STATES

MAY 12, 2016

Received; read twice and referred to the Committee on Health, Education,
Labor, and Pensions

AN ACT

To direct the Comptroller General of the United States to evaluate and report on the in-patient and outpatient treatment capacity, availability, and needs of the United States.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Examining Opioid
3 Treatment Infrastructure Act of 2016”.

4 **SEC. 2. STUDY ON TREATMENT INFRASTRUCTURE.**

5 Not later than 24 months after the date of enactment
6 of this Act, the Comptroller General of the United States
7 shall initiate an evaluation, and submit to Congress a re-
8 port, of the inpatient and outpatient treatment capacity,
9 availability, and needs of the United States, which shall
10 include, to the extent data are available—

11 (1) the capacity of acute residential or inpatient
12 detoxification programs;

13 (2) the capacity of inpatient clinical stabiliza-
14 tion programs, transitional residential support serv-
15 ices, and residential rehabilitation programs;

16 (3) the capacity of demographic specific resi-
17 dential or inpatient treatment programs, such as
18 those designed for pregnant women or adolescents;

19 (4) geographical differences of the availability
20 of residential and outpatient treatment and recovery
21 options for substance use disorders across the con-
22 tinuum of care;

23 (5) the availability of residential and outpatient
24 treatment programs that offer treatment options
25 based on reliable scientific evidence of efficacy for
26 the treatment of substance use disorders, including

1 the use of Food and Drug Administration-approved
2 medicines and evidence-based nonpharmacological
3 therapies;

4 (6) the number of patients in residential and
5 specialty outpatient treatment services for substance
6 use disorders;

7 (7) an assessment of the need for residential
8 and outpatient treatment for substance use disorders
9 across the continuum of care;

10 (8) the availability of residential and outpatient
11 treatment programs to American Indians and Alaska
12 Natives through an Indian health program (as de-
13 fined by section 4 of the Indian Health Care Im-
14 provement Act (25 U.S.C. 1603)); and

15 (9) the barriers (including technological bar-
16 riers) at the Federal, State, and local levels to real-
17 time reporting of de-identified information on drug
18 overdoses and ways to overcome such barriers.

Passed the House of Representatives May 11, 2016.

Attest:

KAREN L. HAAS,

Clerk.