

114TH CONGRESS
2D SESSION

H. R. 5142

To amend the Public Health Service Act to provide for the sharing of health information concerning an individual's substance abuse treatment by certain entities.

IN THE HOUSE OF REPRESENTATIVES

APRIL 29, 2016

Mr. WALBERG (for himself, Mrs. DINGELL, Mr. JENKINS of West Virginia, Mr. MCKINLEY, Mr. MOOLENAAR, Mr. KILDEE, Mr. MOONEY of West Virginia, Ms. KUSTER, and Mrs. LAWRENCE) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to provide for the sharing of health information concerning an individual's substance abuse treatment by certain entities.

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

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as “Jessie’s Law”.

5 **SEC. 2. CONFIDENTIALITY OF RECORDS.**

6 (a) EXPANSION OF WHO CAN CONSENT.—Section
7 543(b) of the Public Health Service Act (42 U.S.C.
8 290dd–2(b)) is amended—

1 (1) in paragraph (1)—

2 (A) by inserting “or oral” after “written”;

3 and

4 (B) by inserting “or a parent, legal guard-
5 ian, or spouse of the patient,” after “main-
6 tained”; and

7 (2) in paragraph (2)—

8 (A) by inserting “(or parent, legal guard-
9 ian, or spouse)” after “patient”; and

10 (B) by inserting “or oral” after “written”.

11 (b) EXCEPTION FOR SHARING OF CERTAIN INFOR-
12 MATION.—Section 543(e) of the Public Health Service Act
13 (42 U.S.C. 290dd–2(e)) is amended—

14 (1) in paragraph (1), by striking “; or” and in-
15 serting a semicolon;

16 (2) in paragraph (2), by striking the period and
17 inserting “; or”; and

18 (3) after paragraph (2), by inserting the fol-
19 lowing:

20 “(3) within accountable care organizations de-
21 scribed in section 1899 of the Social Security Act
22 (42 U.S.C. 1395jjj), health information exchanges
23 (as defined for purposes of section 3013), health
24 homes (as defined in section 1945(h)(3) of such Act
25 (42 U.S.C. 1396w–4(h)(3))), or other integrated

1 care arrangements (in existence before, on, or after
2 the date of the enactment of this paragraph) involv-
3 ing the interchange of electronic health records (as
4 defined in section 13400 of division A of Public Law
5 111–5 (42 U.S.C. 17921(5))) containing information
6 described in subsection (a), for purposes of attaining
7 interoperability, improving care coordination, reduc-
8 ing health care costs, and securing or providing pa-
9 tient safety.”.

10 **SEC. 3. INCLUSION OF OPIOID ADDICTION HISTORY IN PA-**
11 **TIENT RECORDS.**

12 (a) DEVELOPMENT OF STANDARDS.—Not later than
13 1 year after the date of enactment of this Act, the Sec-
14 retary of Health and Human Services shall develop and
15 disseminate standards to provide information to hospitals
16 and physicians relating to prominently displaying the his-
17 tory of opioid addiction in the medical records of patients
18 (including electronic health records) if the patients have
19 consented to having such information included in such
20 records.

21 (b) REQUIREMENTS.—The standards developed
22 under subsection (a) shall take into account the following:
23 (1) The potential for addiction relapse or over-
24 dose death if opioid medications are prescribed to an
25 individual recovering from opioid addiction.

1 (2) The need to display the past opioid addic-
2 tion of a patient in a manner similar to other poten-
3 tially lethal medical concerns, including drug aller-
4 gies and contraindications.

5 (3) The need for information about past opioid
6 addiction to be prominently displayed when a physi-
7 cian or medical professional is prescribing medica-
8 tion.

9 (4) The need for a variety of medical profes-
10 sionals, including physicians, nurses, and phar-
11 macists, to have access to information described in
12 this section when prescribing or dispensing opioid
13 medication to ensure that the medication is medi-
14 cally appropriate given the history of addiction of
15 the patient.

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