

115TH CONGRESS
2^D SESSION

H. R. 5009

AN ACT

To include information concerning a patient's opioid
addiction in certain medical records.

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 “Jessie’s Law”.

3 **SEC. 2. INCLUSION OF OPIOID ADDICTION HISTORY IN PA-**
4 **TIENT RECORDS.**

5 (a) BEST PRACTICES.—

6 (1) IN GENERAL.—Not later than 1 year after
7 the date of enactment of this Act, the Secretary of
8 Health and Human Services, in consultation with
9 appropriate stakeholders, including a patient with a
10 history of opioid use disorder, an expert in electronic
11 health records, an expert in the confidentiality of pa-
12 tient health information and records, and a health
13 care provider, shall identify or facilitate the develop-
14 ment of best practices regarding—

15 (A) the circumstances under which infor-
16 mation that a patient has provided to a health
17 care provider regarding such patient’s history of
18 opioid use disorder should, only at the patient’s
19 request, be prominently displayed in the med-
20 ical records (including electronic health records)
21 of such patient;

22 (B) what constitutes the patient’s request
23 for the purpose described in subparagraph (A);
24 and

25 (C) the process and methods by which the
26 information should be so displayed.

1 (2) DISSEMINATION.—The Secretary shall dis-
2 seminate the best practices developed under para-
3 graph (1) to health care providers and State agen-
4 cies.

5 (b) REQUIREMENTS.—In identifying or facilitating
6 the development of best practices under subsection (a), as
7 applicable, the Secretary, in consultation with appropriate
8 stakeholders, shall consider the following:

9 (1) The potential for addiction relapse or over-
10 dose, including overdose death, when opioid medica-
11 tions are prescribed to a patient recovering from
12 opioid use disorder.

13 (2) The benefits of displaying information
14 about a patient’s opioid use disorder history in a
15 manner similar to other potentially lethal medical
16 concerns, including drug allergies and contraindica-
17 tions.

18 (3) The importance of prominently displaying
19 information about a patient’s opioid use disorder
20 when a physician or medical professional is pre-
21 scribing medication, including methods for avoiding
22 alert fatigue in providers.

23 (4) The importance of a variety of appropriate
24 medical professionals, including physicians, nurses,
25 and pharmacists, to have access to information de-

1 scribed in this section when prescribing or dis-
2 pensing opioid medication, consistent with Federal
3 and State laws and regulations.

4 (5) The importance of protecting patient pri-
5 vacy, including the requirements related to consent
6 for disclosure of substance use disorder information
7 under all applicable laws and regulations.

8 (6) All applicable Federal and State laws and
9 regulations.

10 **SEC. 3. COMMUNICATION WITH FAMILIES DURING EMER-**
11 **GENCIES.**

12 (a) PROMOTING AWARENESS OF AUTHORIZED DIS-
13 CLOSURES DURING EMERGENCIES.—The Secretary of
14 Health and Human Services, acting through the Adminis-
15 trator of the Centers for Medicare & Medicaid Services
16 and the Administrator of the Health Resources and Serv-
17 ices Administration, shall annually develop and dissemi-
18 nate written materials (electronically or by other means)
19 to health care providers regarding permitted disclosures
20 under Federal health care privacy law during emergencies,
21 including overdoses, of certain health information to fami-
22 lies, caregivers, and health care providers.

23 (b) USE OF MATERIAL.—For the purposes of car-
24 rying out subsection (a), the Secretary of Health and
25 Human Services may use material produced under section

1 11004 of the 21st Century Cures Act (42 U.S.C. 1320d–
2 2 note).

Passed the House of Representatives June 12, 2018.

Attest:

Clerk.

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