

Opioids Have Our Attention

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The government is focusing on opioids. Whether it be **program policies**, **enforcement**, or **legislation**, combating the opioid epidemic continues to be a major focus for government officials. It is also a major piece of the health care legislation moving in both the House and the Senate.

In the Senate, the **Judiciary Committee** advanced five bills relating to the opioid crisis, and the HELP Committee advanced the “**Opioid Crisis Response Act of 2018**,” which has over 40 measures relating to opioids. Most recently (6/12), the **Senate Finance Committee** unanimously approved the Helping To End Addiction And Lessen (HEAL) Substance Use Disorders Act Of 2018. That Act includes the expansion of the Physician Payment Sunshine Act to include payments to mid-level providers, as we previously blogged about [here](#). Click [here](#) for a summary of all Senate bills.

On the House side, over the last two weeks, the House passed over 50 bills to combat the opioid crisis and have received bipartisan support. Additional opioid related bills have been introduced and passed out of committee. On June 20, the House voted and passed three additional opioid bills (HR 5925, HR 9797, and HR 6082). Two of these bills were considered controversial. H.R. 5797, The IMD CARE Act, repeals the Medicaid IMD exclusion for individuals with opioid use disorders. H.R. 6082, The Overdose Prevention and Patient Safety Act, amends 42 CFR Part 2 confidentiality protections pertaining to substance use disorder patient records.

Today (Friday, June 22), the House combined all passed opioid bills and those additional opioid bills (not yet voted on) into one package – HR 6 - and passed HR 6 (396 Yeas, 14 Nays).

It is expected that the House will send the final opioid package – HR 6 – to the Senate. The Senate is in the position to add additional measures to the opioid package, which we expect to include modifications to the Medicare Part D doughnut hole. These bills will have implications across the health care system. Here are just a few of the current House bills we thought were of interest. Click [here](#) for a summary of all the House opioid bills.

- **H.R. 3331**: Allows CMS to test incentive payment models for behavioral health providers to adopt electronic health records technology and use that technology to improve the quality and coordination of care. *(Passed in House by voice vote 6/12/18)*
- **H.R. 5799**: Requires State Medicaid plans to have certain drug utilization review activities in place in order to receive full Federal matching. *(Included in HR 6)*
- **H.R. 5801**: Establishes requirements under the Medicaid program relating to the use of qualified prescription drug monitoring programs and prescribing certain controlled substances. *(Passed in House by voice vote 6/19/18)*
- **H.R. 5715**: Provides for program integrity transparency measures under Medicare Parts C and D. *(Included in HR 6)*
- **H.R. 5775**: Requires Medicare Advantage and Part D plans to include information on the risks associated with opioids, coverage of certain non-opioid treatments of pain, and on the safe disposal of prescription drugs. *(Passed in House by voice vote on 6/19/18)*

Keep in mind though, with the focus on immigration issues, it is likely that the timeline for opioids could slip, especially as legislation enters the Senate. What the final opioid package contains and the process to get there remain the questions to be answered. We will be following the issues closely and will report on any updates.

*Nicole Meyerson and Madeleine Giaquinto contributed to this blog post.

Update: This post was updated on Friday afternoon to reflect the House's passage of HR 6.

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