

118TH CONGRESS
1ST SESSION

S. _____

To amend title XIX of the Social Security Act to encourage appropriate prescribing under Medicaid for victims of opioid overdose.

IN THE SENATE OF THE UNITED STATES

Mr. MANCHIN (for himself, Mr. MULLIN, Mrs. BLACKBURN, and Mr. CARPER) introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To amend title XIX of the Social Security Act to encourage appropriate prescribing under Medicaid for victims of opioid overdose.

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 the “Improving Medicaid
5 Programs’ Response to Overdose Victims and Enhancing
6 Addiction Care Act” or the “IMPROVE Addiction Care
7 Act”.

1 **SEC. 2. ENCOURAGING APPROPRIATE PRESCRIBING**
2 **UNDER MEDICAID FOR VICTIMS OF OPIOID**
3 **OVERDOSE.**

4 (a) IN GENERAL.—Section 1927(g)(2) of the Social
5 Security Act (42 U.S.C. 1396r–8(g)(2)) is amended by
6 adding at the end the following new subparagraph:

7 “(E) ADDITIONAL DRUG USE REVIEW RE-
8 QUIREMENTS.—As part of a State’s prospective
9 and retrospective drug use review under sub-
10 paragraphs (A) and (B), as applicable, the
11 State shall, not later than 24 months after the
12 date of enactment of this subparagraph, develop
13 and implement, or review and update, protocols
14 to, subject to any applicable State or Federal
15 privacy or confidentiality protections that could
16 preclude such protocols—

17 “(i) identify individuals receiving ben-
18 efits under this title who have experienced
19 a nonfatal opioid-related overdose within a
20 look-back period (to be determined by the
21 Secretary except that such period shall not
22 be less than 1 year and shall not exceed 5
23 years), to the extent that such data is
24 available, and make a good faith effort to
25 connect these individuals to treatment op-
26 tions and recovery support services that

1 have been determined appropriate by the
2 Secretary;

3 “(ii) if an individual receiving benefits
4 under this title experiences a fatal overdose
5 that is opioid-related (without regard to
6 whether such overdose was related to a
7 covered outpatient drug), or, if specified by
8 the Secretary, related to any other drug
9 (including a drug that is not a covered out-
10 patient drug), not later than 6 months
11 after the date of such overdose—

12 “(I) provide notice of such over-
13 dose to each provider that, during the
14 period (to be established by the Sec-
15 retary) preceding such overdose, pre-
16 scribed opioids (or such other speci-
17 fied drug, if applicable) to such indi-
18 vidual, to the extent that such data is
19 available; and

20 “(II) provide each such provider
21 with educational materials on pre-
22 scribing opioids (or such other speci-
23 fied drugs, if applicable);

24 “(iii) ensure that a provider who is
25 treating an individual receiving benefits

1 under this title has notice of the individ-
2 ual's diagnosis or history of opioid use dis-
3 order, opioid poisoning diagnosis, history
4 of nonfatal opioid-related overdose, or a di-
5 agnosis or history of a substance use dis-
6 order or overdose for such other specified
7 drug, if applicable, to the extent such data
8 is available; and

9 “(iv) perform ongoing retrospective
10 drug utilization reviews and offer provider
11 education that is informed by such reviews
12 (which may include education provided
13 under an educational outreach program es-
14 tablished under subparagraph (D) or
15 through an intervention described in para-
16 graph (3)(C)(iii)) regarding appropriate
17 prescribing practices for individuals receiv-
18 ing benefits under this title with a diag-
19 nosis or history of opioid use disorder, a
20 history of nonfatal opioid-related overdose,
21 an opioid poisoning diagnosis, or a diag-
22 nosis or history of a substance use disorder
23 or overdose for such other specified drug,
24 if applicable.

1 Nothing in this subparagraph shall be con-
2 strued as requiring a State to develop and im-
3 plement additional protocols if the State estab-
4 lishes to the satisfaction of the Secretary that
5 the State has in place existing protocols meet-
6 ing or exceeding the standards set forth in this
7 subparagraph.”.

8 (b) TECHNICAL AMENDMENTS.—Section 1932(i) of
9 the Social Security Act (42 U.S.C. 1396u–2(i)) is amend-
10 ed—

11 (1) by striking “section 483.3(s)(4)” and in-
12 serting “section 438.3(s)(4)”; and

13 (2) by striking “483.3(s)(5)” and inserting
14 “438.3(s)(5)”.