

AMENDMENT NO. \_\_\_\_\_ Calendar No. \_\_\_\_\_

Purpose: In the nature of a substitute.

**IN THE SENATE OF THE UNITED STATES—115th Cong., 1st Sess.**

(no.) \_\_\_\_\_

(title) \_\_\_\_\_

Referred to the Committee on \_\_\_\_\_ and  
ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT IN THE NATURE OF A SUBSTITUTE intended  
to be proposed by \_\_\_\_\_

Viz:

1 Strike all after the enacting clause and insert the fol-  
2 lowing:

3 **SECTION 1. SHORT TITLE.**

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

5 **SEC. 2. INCLUSION OF OPIOID ADDICTION HISTORY IN PA-**  
6 **TIENT RECORDS.**

7 (a) BEST PRACTICES.—

8 (1) IN GENERAL.—Not later than 1 year after  
9 the date of enactment of this Act, the Secretary of  
10 Health and Human Services, in consultation with  
11 appropriate stakeholders, including a patient with a  
12 history of opioid use disorder, an expert in electronic

1 health records, an expert in the confidentiality of pa-  
2 tient health information and records, and a health  
3 care provider, shall identify or facilitate the develop-  
4 ment of best practices regarding—

5 (A) the circumstances under which infor-  
6 mation that a patient has provided to a health  
7 care provider regarding such patient's history of  
8 opioid use disorder should, only at the patient's  
9 request, be prominently displayed in the med-  
10 ical records (including electronic health records)  
11 of such patient;

12 (B) what constitutes the patient's request  
13 for the purpose described in subparagraph (A);  
14 and

15 (C) the process and methods by which the  
16 information should be so displayed.

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

21 (b) REQUIREMENTS.—In identifying or facilitating  
22 the development of best practices under subsection (a), as  
23 applicable, the Secretary, in consultation with appropriate  
24 stakeholders, shall consider the following:

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

5           (2) The benefits of displaying information  
6           about a patient's opioid use disorder history in a  
7           manner similar to other potentially lethal medical  
8           concerns, including drug allergies and contraindica-  
9           tions.

10          (3) The importance of prominently displaying  
11          information about a patient's opioid use disorder  
12          when a physician or medical professional is pre-  
13          scribing medication, including methods for avoiding  
14          alert fatigue in providers.

15          (4) The importance of a variety of appropriate  
16          medical professionals, including physicians, nurses,  
17          and pharmacists, to have access to information de-  
18          scribed in this section when prescribing or dis-  
19          pensing opioid medication, consistent with Federal  
20          and State laws and regulations.

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

- 1           (6) All applicable Federal and State laws and
- 2       regulations.