114TH CONGRESS 2D SESSION

H.R.4982

AN ACT

- To direct the Comptroller General of the United States to evaluate and report on the in-patient and outpatient treatment capacity, availability, and needs of the United States.
 - 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.

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2	This Act may be cited as the "Examining Opioid
3	Treatment Infrastructure Act of 2016".
4	SEC. 2. STUDY ON TREATMENT INFRASTRUCTURE.
5	Not later than 24 months after the date of enactment
6	of this Act, the Comptroller General of the United States
7	shall initiate an evaluation, and submit to Congress a re-
8	port, of the inpatient and outpatient treatment capacity,
9	availability, and needs of the United States, which shall
10	include, to the extent data are available—
11	(1) the capacity of acute residential or inpatient
12	detoxification programs;
13	(2) the capacity of inpatient clinical stabiliza-
14	tion programs, transitional residential support serv-
15	ices, and residential rehabilitation programs;
16	(3) the capacity of demographic specific resi-
17	dential or inpatient treatment programs, such as
18	those designed for pregnant women or adolescents;
19	(4) geographical differences of the availability
20	of residential and outpatient treatment and recovery
21	options for substance use disorders across the con-
22	tinuum of care;
23	(5) the availability of residential and outpatient
24	treatment programs that offer treatment options
25	based on reliable scientific evidence of efficacy for

the treatment of substance use disorders, including

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1	the use of Food and Drug Administration-approved
2	medicines and evidence-based nonpharmacological
3	therapies;
4	(6) the number of patients in residential and
5	specialty outpatient treatment services for substance
6	use disorders;
7	(7) an assessment of the need for residential
8	and outpatient treatment for substance use disorders
9	across the continuum of care;
10	(8) the availability of residential and outpatient
11	treatment programs to American Indians and Alaska
12	Natives through an Indian health program (as de-
13	fined by section 4 of the Indian Health Care Im-

provement Act (25 U.S.C. 1603)); and

(9) the barriers (including technological barriers) at the Federal, State, and local levels to real-time reporting of de-identified information on drug overdoses and ways to overcome such barriers.

Passed the House of Representatives May 11, 2016. Attest:

Clerk.

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