

AMENDMENT TO H.R. 5562

OFFERED BY MR. BURGESS OF TEXAS

[Page/line numbers refer to the posted draft dated March 29]

Page 2, after line 6, insert the following (and redesignate the subsequent paragraphs accordingly):

1 (2) NAS is an expected and treatable condition
2 that can follow prenatal exposure to opioids.

Page 2, after line 24, insert the following (and redesignate the subsequent paragraphs accordingly):

3 (7) The Protecting Our Infants Act of 2015
4 (Public Law 114–91) directed the Department of
5 Health and Human Services to develop a strategy to
6 identify key recommendations related to addressing
7 NAS.

Page 3, amend lines 9 through 14 to read as follows:

8 (9) An October 2017 report by the Government
9 Accountability Office entitled “Federal Action Needed
10 to Address Neonatal Abstinence Syndrome” recommended
11 that the Department of Health and
12 Human Services should expeditiously develop a plan
13 to effectively implement the 39 recommendations

1 identified in the Department’s report entitled, “Pro-
2 tecting Our Infants Act: Final Strategy”, which re-
3 lates to prevention, treatment, and related services
4 for NAS and prenatal opioid use.

Page 3, line 15, strike “**CERTAIN**”.

Page 3, line 18, strike “six months” and insert
“three months”.

Page 3, line 21, strike “under the ‘child’ cat-
egories”.

Page 4, after line 10, insert the following (and make
such conforming changes as may be necessary):

- 5 (4) exclude the recommendation to increase ac-
6 cess to the full range of contraceptive options for
7 women at risk of experiencing a substance-exposed
8 pregnancy, including barrier-free access to long-act-
9 ing reversible contraception; and
10 (5) be posted with the timeline described in
11 paragraph (1) on a publicly accessible website for re-
12 view by stakeholders and the public.

