AMENDMENT IN THE NATURE OF A SUBSTITUTE
TO H.R. 4284
OFFERED BY MR. LATTA OF OHIO

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.
This Act may be cited as the “Indexing Narcotics, Fentanyl, and Opioids Act of 2018” or the “INFO Act”.

SEC. 2. ESTABLISHMENT OF SUBSTANCE USE DISORDER INFORMATION DASHBOARD.
(a) IN GENERAL.—Not later than 60 days after the date of the enactment of this Act, the Secretary of Health and Human Services shall, in consultation with the Director of National Drug Control Policy, establish and periodically update a public information dashboard that—

(1) coordinates information on programs within the Department of Health and Human Services related to the reduction of opioid abuse and other substance use disorders;

(2) provides access to publicly available data from other Federal agencies; State, local, and Tribal governments; nonprofit organizations; law enforcement; medical experts; public health educators; and
research institutions regarding prevention, treatment, recovery, and other services for opioid use disorder and other substance use disorders

(3) provides comparable data on substance use disorder prevention and treatment strategies in different regions and population of the United States;

(4) provides recommendations for health care providers on alternatives to controlled substances for pain management, including approaches studied by the National Institutes of Health Pain Consortium and the National Center for Complimentary and Integrative Health; and

(5) provides guidelines and best practices for health care providers regarding treatment of substance use disorders.

(b) CONTROLLED SUBSTANCE DEFINED.—In this section, the term “controlled substance” has the meaning given that term in section 102 of the Controlled Substances Act (21 U.S.C. 802).

SEC. 3. INTERAGENCY SUBSTANCE USE DISORDER COORDINATING COMMITTEE.

(a) ESTABLISHMENT.—Not later than three months after the date of the enactment of this Act, the Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall, in consultation with the Di-
rector of National Drug Control Policy, establish a committee, to be known as the Interagency Substance Use Disorder Coordinating Committee (in this section referred to as the “Committee”), to coordinate all efforts within the Department of Health and Human Services concerning substance use disorder.

(b) Membership.—

(1) Federal Members.—The Committee shall be composed of the following Federal members (or the designees of such members):

(A) The Secretary, who shall service as the Chair of the Committee.

(B) The Attorney General of the United States.

(C) The Secretary of Labor.

(D) The Secretary of Housing and Urban Development.

(E) The Secretary of Education.

(F) The Secretary of Veterans Affairs.

(G) The Commissioner of Social Security.

(H) The Assistant Secretary for Mental Health and Substance Use.

(I) The Director of the Centers for Disease Control and Prevention.
(J) The Director of the National Institutes of Health and the Directors of such national research institutes of the National Institutes of Health as the Secretary determines appropriate.

(K) The Administrator of the Centers for Medicare & Medicaid Services.

(L) The Director of National Drug Control Policy.

(M) Representatives of other Federal agencies that serve individuals with substance use disorder.

(2) Non-Federal Members.—The Committee shall be composed of a minimum of 17 non-Federal members appointed by the Secretary, of which—

(A) at least two such members shall be an individual who has received treatment for a diagnosis of an opioid use disorder;

(B) at least two such members shall be an individual who has received treatment for a diagnosis of a substance use disorder other than an opioid use disorder;

(C) at least two such members shall be a State Alcohol and Substance Abuse Director;

(D) at least two such members shall be a representative of a leading research, advocacy,
or service organization for adults with sub-
stance use disorder;

(E) at least two such members shall—

(i) be a physician, licensed mental
health professional, advance practice reg-
istered nurse, or physician assistant; and

(ii) have experience in treating indi-
viduals with opioid use disorder or other
substance use disorders;

(F) at least one such member shall be a
substance use disorder treatment professional
who is employed with an opioid treatment pro-
gram;

(G) at least one such member shall be a
substance use disorder treatment professional
who has research or clinical experience in work-
ing with racial and ethnic minority populations;

(H) at least one such member shall be a
substance use disorder treatment professional
who has research or clinical mental health expe-
rience in working with medically underserved
populations;

(I) at least one such member shall be a
State-certified substance use disorder peer sup-
port specialist;
(J) at least one such member shall be a drug court judge or a judge with experience in adjudicating cases related to substance use disorder;

(K) at least one such member shall be a law enforcement officer or correctional officer with extensive experience in interacting with adults with a substance use disorder; and

(L) at least one such member shall be an individual with experience providing services for homeless individuals and working with adults with a substance use disorder.

(c) TERMS.—

(1) IN GENERAL.—A member of the Committee appointed under subsection (b)(2) shall be appointed for a term of three years and may be reappointed for one or more three-year terms.

(2) VACANCIES.—A vacancy on the Committee shall be filled in the same manner in which the original appointment was made. Any individual appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of such term and may serve after the expiration of such term until a successor has been appointed.
(d) MEETINGS.—The Committee shall meet not fewer than two times each year.

(e) DUTIES.—The Committee shall—

(1) monitor opioid use disorder and other substance use disorder research, services, and support and prevention activities across all relevant Federal agencies, including coordination of Federal activities with respect to opioid use disorder and other substance use disorders;

(2) evaluate the effectiveness of Federal grants and programs for the prevention and treatment of, and recovery from, opioid use disorder and other substance use disorders;

(3) review substance use disorder prevention and treatment strategies in different regions and populations in the United States and evaluate the extent to which Federal substance use disorder prevention and treatment strategies are aligned with State and local substance use disorder prevention and treatment strategies;

(4) make recommendations to the Secretary regarding any appropriate changes with respect to the activities and strategies described in paragraphs (1) through (3);
(5) make recommendations to the Secretary regarding public participation in decisions relating to opioid use disorder and other substance use disorders and the process by which public feedback can be better integrated into such decisions; and

(6) make recommendations to ensure that opioid use disorder and other substance use disorder research, services, and support and prevention activities of the Department of Health and Human Services and other Federal agencies are not unnecessarily duplicative.

(f) ANNUAL REPORT.—

(1) IN GENERAL.—Not later than one year after the date of the enactment of this Act, and annually thereafter for the life of the Committee, the Committee shall publish on the public information dashboard established under section 2(a) a report summarizing the activities carried out by the Committee pursuant to subsection (e), including any findings resulting from such activities.

(2) RECOMMENDATION FOR COMMITTEE EXTENSION.—After the publication of the second report of the Committee under paragraph (1), the Secretary shall submit to Congress a recommendation on whether or not the operations of the Committee
should continue after the termination date described in subsection (i).

(g) WORKING GROUPS.—The Committee may establish working groups for purposes of carrying out the duties described in subsection (e). Any such working group shall be composed of members of the Committee (or the designees of such members) and may hold such meetings as are necessary to enable the working group to carry out the duties delegated to the working group.

(h) FEDERAL ADVISORY COMMITTEE ACT.—The Federal Advisory Committee Act (5 U.S.C. App.) shall apply to the Committee only to the extent that the provisions of such Act do not conflict with the requirements of this section.

(i) SUNSET.—The Committee shall terminate on the date that is six years after the date on which the Committee is established under subsection (a).

Amend the title so as to read: “A bill to establish a substance use disorder information dashboard within the Department of Health and Human Services, and for other purposes.”