AMENDMENT IN THE NATURE OF A SUBSTITUTE
TO H.R. 5353
OFFERED BY MR. LANCE OF NEW JERSEY

Strike all after the enacting clause and insert the following:

1 SECTION 1. SHORT TITLE.
2
3 This Act may be cited as the “Eliminating Opioid Related Infectious Diseases Act of 2018”.

4 SEC. 2. REAUTHORIZATION AND EXPANSION OF PROGRAM
5 OF SURVEILLANCE AND EDUCATION REGARDING INFECTIONS ASSOCIATED WITH ILlicit DRUG USE AND OTHER RISK FACTORS.
6
7 Section 317N of the Public Health Service Act (42
8 U.S.C. 247b–15) is amended to read as follows:

9 “SEC. 317N. SURVEILLANCE AND EDUCATION REGARDING INFECTIONS ASSOCIATED WITH ILlicit DRUG USE AND OTHER RISK FACTORS.
10 “(a) In General.—The Secretary may (directly and through grants to public and nonprofit private entities) provide for programs for the following:
11 “(1) To cooperate with the States in implementing or maintaining a surveillance system to determine the incidence of infections commonly associ-
ated with illicit drug use, including infections commonly associated with injection drug use such as viral hepatitis, human immunodeficiency virus, and infective endocarditis, and to assist the States in determining the prevalence of such infections, which may include the reporting of cases of such infections.

“(2) To identify, counsel, and offer testing to individuals who are at risk of infections as a result of injection drug use, receiving blood transfusions prior to July 1992, or other risk factors.

“(3) To provide appropriate referrals for counseling, testing, and medical treatment of individuals identified under paragraph (2) and to ensure, to the extent practicable, the provision of appropriate follow-up services.

“(4) To develop and disseminate public information and education programs for the detection and control of infections described in paragraph (1), with priority given to high-risk populations as determined by the Secretary.

“(5) To improve the education, training, and skills of health professionals in the detection and control of infections and the coordination of treatment of addiction and infectious diseases described.
in paragraph (1), with priority given to substance
use disorder treatment providers, pediatricians and
other primary care providers, obstetrician-gynecologists, infectious diseases clinicians, and HIV cli-
nicians.

“(b) LABORATORY PROCEDURES.—The Secretary
may (directly or through grants to public and nonprofit
private entities) carry out programs to provide for im-
provements in the quality of clinical-laboratory procedures
regarding infections described in subsection (a)(1).

“(c) DEFINITIONS.—In this section, the term ‘injec-
tion drug use’ means—

“(1) intravenous administration of a substance
in schedule I under section 202 of the Controlled
Substances Act;

“(2) intravenous administration of a substance
in schedule II, III, IV, or V under section 202 of the
Controlled Substances Act that has not been ap-
proved for intravenous use under—

“(A) section 505 of the Federal Food,
Drug and Cosmetic Act; or

“(B) section 351 of the Public Health
Service Act; or

“(3) intravenous administration of a substance
in schedule II, III, IV, or V under section 202 of the
Controlled Substances Act that has not been prescribed to the person using the substance.

“(d) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there are authorized to be appropriated $40,000,000 for each of the fiscal years 2019 through 2023.”.