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):

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

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

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

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

(9) An October 2017 report by the Government Accountability Office entitled “Federal Action Needed to Address Neonatal Abstinence Syndrome” recommended that the Department of Health and Human Services should expeditiously develop a plan to effectively implement the 39 recommendations
identified in the Department’s report entitled, “Protecting Our Infants Act: Final Strategy”, which relates to prevention, treatment, and related services 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’ categories”.

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

(4) exclude the recommendation to increase access to the full range of contraceptive options for women at risk of experiencing a substance-exposed pregnancy, including barrier-free access to long-acting reversible contraception; and

(5) be posted with the timeline described in paragraph (1) on a publicly accessible website for review by stakeholders and the public.