H. R. ______

To amend title XVIII of the Social Security Act to require a review of current opioid prescriptions for chronic pain and screening for opioid use disorder to be included in the Welcome to Medicare initial preventive physical examination.

IN THE HOUSE OF REPRESENTATIVES

Mr. BUCSHON introduced the following bill; which was referred to the Committee on ______

A BILL

To amend title XVIII of the Social Security Act to require a review of current opioid prescriptions for chronic pain and screening for opioid use disorder to be included in the Welcome to Medicare initial preventive physical examination.

1 Be it enacted by the Senate and House of Representa-
2 tives of the United States of America in Congress assembled,
SECTION 1. REQUIRING A REVIEW OF CURRENT OPIOID PRESCRIPTIONS FOR CHRONIC PAIN AND SCREENING FOR OPIOID USE DISORDER TO BE INCLUDED IN THE WELCOME TO MEDICARE INITIAL PREVENTIVE PHYSICAL EXAMINATION.

(a) In General.—Section 1861(ww) of the Social Security Act (42 U.S.C. 1395x(ww)) is amended—

(1) in paragraph (1), by inserting “and a review of current opioid prescriptions and screening for opioid use disorder (as defined in paragraph (4)),” before “but does not include”; and

(2) by adding at the end the following new paragraph:

“(4) For purposes of paragraph (1), the term ‘a review of current opioid prescriptions and screening for opioid use disorder’ means, with respect to an individual—

“(A) a review by a physician of whether any of the current prescriptions of the individual include a prescription for opioids; and

“(B) in the case of an individual determined by the review of a physician under subparagraph (A) to have a current prescription for opioids—

“(i) a review by the physician of the potential risk factors to the individual for opioid use disorder based on the use of an appropriate
screening instrument designed for such purpose and recognized by national professional medical organizations;

“(ii) an evaluation by the physician of pain of the individual, including the severity of pain (such as the extent to which the individual is disabled or experiences limits to activities of daily living due to chronic pain), and of the current treatment plan for the individual to manage chronic pain symptoms;

“(iii) the provision of verbal or written information by the physician regarding non-opioid treatment options for the treatment and management of any chronic pain of the individual; and

“(iv) a referral by the physician, as deemed appropriate by the physician based on the results of the review and evaluation conducted as described in this paragraph, to a specialist that is a physician or qualified nonphysician practitioner (as defined by the Secretary).”.

(b) EFFECTIVE DATE.—The amendments made by subsection (a) shall apply with respect to initial preventive
1 physical examinations furnished on or after January 1, 2019.