



Federal Opioids Legislation

On October 3, 2018, Congress overwhelmingly passed new authorizing legislation to address the opioid epidemic. [H.R. 6](#), the SUPPORT for Patients and Communities Act, is a wide-ranging legislative package that combines dozens of smaller proposals to address different aspects of the opioid crisis. President Trump is expected to sign the legislation into law soon. A summary of maternal and child health provisions included in the legislation is copied below.

For additional information about the legislation, please contact Amy Haddad, Director of Public Policy and Government Affairs, at ahaddad@amchp.org.

Summary of Maternal and Child Health Provisions in H.R. 6, the SUPPORT for Patients and Communities Act:

Sec. 1001: Requires state Medicaid programs to not terminate a juvenile's medical assistance eligibility because the juvenile is incarcerated. A state may suspend coverage while the juvenile is an inmate, but must restore coverage upon release without requiring a new application unless the individual no longer meets the eligibility requirements for medical assistance.

Sec. 1002: Enables former foster youth who are in care by their 18th birthday and previously enrolled in Medicaid to receive health care until the age of 26 if they move out of state.

Sec. 1005: Requires CMS to issue guidance on Neonatal Abstinence Syndrome (NAS) treatment options under Medicaid and requires a study by the Government Accountability Office (GAO) on Medicaid coverage gaps for pregnant and postpartum women with substance use disorder.

Sec. 1007: Clarifies states' ability under Medicaid to provide care for infants with NAS in residential pediatric recovery centers as well as those centers' option to provide counseling or other services to mothers or caretakers provided those services are otherwise covered.

Sec. 1012: Modifies the so-called IMD exclusion for pregnant and postpartum women to address a subset of the prohibition on Medicaid from paying for otherwise coverable Medicaid services for certain adults while in institutions for mental disease. This ensures that pregnant and postpartum women receiving care for substance use disorders in an IMD can continue to receive other Medicaid-covered care outside of the IMD, such as prenatal services.



Sec. 5022: Requires state Children's Health Insurance Programs (CHIP) to cover mental health benefits, including substance use disorder services for pregnant women and children.

Sec. 7061: Requires the U.S. Department of Health and Human Services (HHS) to submit a report to Congress on addressing maternal and infant health in the opioid crisis, including:

1. Information on opioid, non-opioid, and non-pharmacologic pain management practices during pregnancy and after pregnancy;
2. Recommendations for increasing public awareness and education about substance use disorders, including opioid use disorders, during and after pregnancy, including available treatment resources in urban and rural areas;
3. Recommendations to prevent, identify, and reduce substance use disorders, including opioid use disorders, during pregnancy to improve care for pregnant women with substance use disorders and their infants; and
4. An identification of areas in need of further research with respect to acute and chronic pain management during and after pregnancy.

Sec. 7062: Requires HHS to submit a report to Congress on the status of the implementation of the recommendations of the SAMHSA Report, "[Protecting Our Infants Act: Final Strategy](#)." Increases the authorization of appropriations for grants for residential treatment programs for pregnant and postpartum women.

Sec. 7063: Requires the Center for Substance Abuse Prevention to develop, in cooperation with the Centers for Disease Control and Prevention (CDC), educational materials for clinicians to use with pregnant women for shared decision-making regarding pain management during pregnancy.

Sec. 7064: Authorizes data collection and analysis on neonatal abstinence syndrome or other outcomes related to prenatal substance abuse and misuse, including prenatal opioid abuse and misuse.

Sec. 7065: Authorizes funding for a program for states to collaborate and improve plans of safe care for substance-exposed infants. States may use funds to coordinate with various agencies responsible for child and family wellbeing, develop policies and procedures, train healthcare and child welfare professionals, and develop and update technology and monitoring systems to more effectively implement plans of safe care.

Sec. 7131: Authorizes funding for CDC to support states' efforts to collect and report data on adverse childhood experiences through existing public health surveys, including the Behavioral Risk Factor Surveillance System and the Youth Risk Behavior Surveillance System.

Sec. 7132: Creates an interagency task force to make recommendations regarding best practices to identify, prevent, and mitigate the effects of trauma on infants, children, youth, and their families.

Sec. 7133: Reauthorizes and increases the authorized appropriation for the National Child Traumatic Stress Initiative.



Sec. 7134: Authorizes the U.S. Secretary of Education, in coordination with the Assistant Secretary of Mental Health and Substance Use, to make grants that link educational agencies with mental health systems in order to increase student access to evidence-based trauma support services to help prevent and mitigate trauma that children and youth experience.

Sec. 7135: Requires HHS to disseminate information to professionals working with young children on ways to recognize children impacted by trauma related to an adult's substance use, and how to respond in a manner that will provide the best support for the child.

Sec. 8081: Requires HHS to issue guidance to states identifying opportunities to support family-focused residential treatment programs for the provision of substance use disorder treatment.

Sec. 8082: Authorizes HHS to award grants for a family recovery and reunification program pilot and its evaluation. The program will utilize a recovery coach model designed to help reunify families and protect children by working with parents or guardians with a substance use disorder who have temporarily lost custody of their children

Sec. 8083: Authorizes HHS to award grants to states, local, and tribal governments to develop programs designed to keep pregnant women who have substance use disorder together with their newborns and support the attendance of children who have a family member with substance use disorder at therapeutic camps or programs aimed at addiction prevention education, coping strategies, and family support initiatives aimed at keeping families together.

