BIPARTISAN OPDOID TASK FORCE

LEGISLATIVE AGENDA 116TH CONGRESS









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PREVENTION

H.R. 1614; JOHN S. MCCAIN OPIOID ADDICTION PREVENTION ACT Rep. John Katko, R-NY

- This legislation requires practitioners to limit initial opioid prescriptions for temporary or acute pain to 7 days. This limitation would not apply to prescriptions for cancer treatments, chronic pain, hospice care, or palliative care.
- Co-Lead: Rep. Suozzi (D-NY)
- Total Cosponsors: 7
- Status: Referred to House Committee on Energy and Commerce; Judiciary

H.R. 3171; SAFE DISPOSAL OF OPIOIDS ACT OF 2019 Rep. Susan Bonamici, D-OR

- This bill makes prescription drug disposal bins more widely available in communities by creating a Department Of Justice grant program to help qualified settings acquire and maintain disposal sites. The bill prioritizes placing bins in community pharmacies and other health care settings where patients receive medication. The cost of these grants would be fully covered by levying a very small fee on opioids sold by pharmaceutical manufacturers.
- Co-Lead: Rep. Mooney (R-WV)
- Total Cosponsors: 5
- Status: Referred to the House Committee on Energy and Commerce

TREATMENT

H.R. 2911; RESPOND NOW ACT Rep. Annie Kuster, D-NH

- This bipartisan bill establishes a \$25 billion Opioid Epidemic Response Fund to be administered through the Department of Health and Human Services (HHS) over 5 years. This funding includes a total of \$250 million over five years to support children and families impacted by the opioid epidemic.
- Co-Lead: Rep. Fitzpatrick (R-PA)
- Total Cosponsors: 36
- Status: Referred to House Committees on Energy and Commerce; Judiciary; Ways and Means; Budget; Education and Labor

H.R.2466; STATE OPIOID RESPONSE GRANT AUTHORIZATION ACT Rep. David Trone, D-MD

- This legislation authorizes State Opioid Response (SOR) Grants and Tribal Opioid Response (TOR) Grants for 5 years. It authorizes \$1 billion per year, which includes \$50 million for TOR grants. These grants provide states and tribal organizations with significant and much-needed resources to increase access to prevention, treatment and recovery activities for opioid use disorder.
- Co-Leads: Reps. Armstrong (R-ND), Sherrill (D-NJ), and Riggleman (R-VA)
- Total Cosponsors: 67
- Status: Referred to the House Committee on Energy and Commerce

TREATMENT

H.R. 5172; NON-OPIOIDS PREVENT ADDICTION IN THE NATION (NO PAIN) ACT

Rep. Terri Sewell, D-AL

- This bill addresses payment disincentives for practitioners to prescribe non-opioid treatment alternatives in surgical settings by requiring CMS to place non-opioid treatments on par with other separately paid drugs and devices in Medicare Part B.
- Co-Leads: Reps. McKinley (R-WV) and Brindisi (D-NY)
- Total Cosponsors: 15
- Status: Referred to the House Committees on Energy and Commerce and Ways and Means

H.R. 5232 - ROAD TO RECOVERY ACT Rep. Brian Fitzpatrick, R-PA

- The Road to Recovery Act allows Medicaid coverage in residential treatment centers for persons under age 65, and remove the sixteen-bed limit, regardless of the size of the facility. It will also require reviews at least every 60 days to ensure that persons' needs are met and that there will be no limit to the duration a person can remain in treatment.
- Co-Lead: Reps. Kuster (D-NH) and Murphy (D-FL)
- Total Cosponsors: 2
- Status: Referred to the House Committee on Energy and Commerce

TREATMENT

H.R. 2848 - PARITY ENFORCEMENT ACT OF 2019 Rep. Donald Norcross, D-NJ

- This legislation expands the U.S. Department of Labor's authority to hold health insurers and plan sponsors accountable for offering health plans that violate the Mental Health Parity and Addiction Equity Act of 2008. It would allow the Dept. of Labor to issue civil monetary penalties for violations, while providing protection for payers who acted in good faith.
- Bipartisan Cosponsor: Rep. Fitzpatrick (R-PA)
- Total Cosponsors: 10
- Status: Referred to Committee on Education and Labor

H.R. 2281 - EASY MEDICATION ACCESS AND TREATMENT (MAT) FOR OPIOID ADDICTION ACT Rep. Raul Ruiz, D-CA

- The Easy MAT for Opioid Addiction Act requires the DEA to revise regulations to allow a practitioner to administer up to a three-day supply of narcotic drugs to an individual at one time for purposes of relieving acute withdrawal symptoms while the individual awaits arrangements for narcotic treatment. Current regulations authorize up to a one-day supply of narcotic drugs for an individual at one time, for a total of up to three days.
- Cosponsor: Rep. Walden (R-OR)
- Status: Referred to House Committee on Energy and Commerce; Judiciary

TREATMENT

H.R. 4814 - SUSPICIOUS ORDER IDENTIFICATION ACT OF 2019 Rep. Doris Matsui, D-CA

- This bill requires DEA registrants to electronically report on every sale, delivery, or disposal (other than dispensing by a practitioner) by registrants of any controlled substance within 30 days. The bill also establishes a Suspicious Order Monitoring Task Force, which will help design a program to facilitate real time data sharing to and from registrants, including the limited sharing of Automation of Reports and Consolidated Orders System (ARCOS) data, in order to help identify suspicious ordering in real time.
- Co-Lead: Rep. Johnson (R-OH)
- Total Cosponsors: 2
- Status: Referred to the Committees on Energy and Commerce; Judiciary

RURAL COMMUNITIES AND WORKFORCE DEVELOPMENT

H.R. 2482 – MAINSTREAMING ADDICTION TREATMENT ACT OF 2019

Rep. Paul Tonko, D-NY

- This bill eliminates the requirement for health care providers to obtain a special waiver from the DEA in order to prescribe buprenorphrine.
- Co-Leads: Reps. Budd (R-NC), Lujan (D-NM), Stefanik (R-NY), Delgado (D-NY), and Turner (R-OH)
- Total Cosponsors: 109
- Status: Referred to the Committees on Energy and Commerce, Judiciary, and Ways and Means

H.R.3414 - OPIOID WORKFORCE ACT OF 2019 Rep. Brad Schneider, D-IL

- This bipartisan bill funds 1,000 additional residency positions in hospitals that have or are in the process of establishing approved residency programs in addiction medicine, addiction psychiatry, or pain management.
- Co-Leads: Reps. Brooks (R-IN), Kuster (D-NH), and Stefanik (R-NY)
- Total Cosponsors: 69
- Status: Ordered Reported by Ways and Means Committee 25-12; Referred to Energy and Commerce Committee

RURAL COMMUNITIES AND WORKFORCE DEVELOPMENT

H.R. 1695 - COMMUNITY SERVICES BLOCK GRANT REAUTHORIZATION ACT OF 2019 Rep. Betty McCollum, D-MN

- The bill preserves and strengthens the core principles that make the 1,100+ Community Action Agencies that currently serve all 435 congressional districts. H.R. 1695 reinforces and expands transparency efforts to improve Community Action at federal, state, and local levels while also spurring innovation and evidence-based practices. The bill also modernizes the Community Services Block Grant by establishing the Community Action Opioid Response Grant to help communities address the unmet needs of low-income individuals, families, and communities affected by the opioid crisis.
- Co-Lead: Rep. Thompson (R-PA)
- Total Cosponsors: 156
- Status: Referred to House Committee on Education and Labor



RURAL COMMUNITIES AND WORKFORCE DEVELOPMENT

H.R. 4974 – MEDICATION ACCESS AND TRAINING EXPANSION (MATE) ACT Rep. Lori Trahan, D-MA

- The MATE Act ensures that medical professionals across our health care system possess baseline knowledge on how to prevent, identify, treat, and manage patients with opioid and other substance use disorders (SUD). Prescribers of controlled substances would receive a one-time, non-repetitive training on SUD unless they are otherwise qualified.
- Co-Leads: Reps. Rogers (R-KY), Trone (D-MD), Bergman (R-MI), Kuster (D-NH), Carter (R-GA)
- Total Cosponsors: 17
- Status: Referred to the Committees on Energy and Commerce; Judiciary



LAW ENFORCEMENT

H.R. 4563 - RESTORING ENFORCEMENT STANDARDS TO TRACK OPIOIDS RESPONSIVELY AND EFFECTIVELY ACT OF 2019 Rep. Brian Fitzpatrick, R-PA

- This legislation ensures that the Drug Enforcement Administration has the authority to carry out needed enforcement actions for drug diversion control investigations and operations to combat the opioid epidemic.
- Co-Lead: Rep. Kuster (D-NH)
- Total Cosponsors: 4
- Status: Referred to House Committee on Energy and Commerce; Judiciary

H.R. 3878 - BLOCK, REPORT, AND SUSPEND SUSPICIOUS SHIPMENTS ACT OF 2019 Rep. David McKinley, R-WV

- This bill requires drug manufacturers and distributors who discover a suspicious order for controlled substances to report and halt the shipment. The legislation is based on a recommendation from the Energy and Commerce Committee's 2018 report on pill dumping in West Virginia.
- Co-Lead: Rep. Dingell (D-MI)
- Total Cosponsors: 3
- Status: Referred to the House Committees on Energy and Commerce, Judiciary

LAW ENFORCEMENT

H.R. 2070 - PROVIDING OFFICERS WITH ELECTRONIC RESOURCES (POWER) ACT Rep. Conor Lamb, D-PA

- This bill helps police officers and first responders address the opioid epidemic by establishing a new grant program at the DOJ to provide funds to state, local, tribal, and territorial law enforcement organizations in order for them to obtain high-tech, portable chemical screening devices. Placing these devices in the hands of state and local law enforcement officials would enhance officer safety and increase the efficiency of investigations, enabling our law enforcement professionals to better respond to the ongoing opioid crisis.
- Co-Leads: Reps. Joyce (R-OH) and Trone (D-MD)
- Total Cosponsors: 20
- Status: Referred to the House Committee on Judiciary



CRIMINAL JUSTICE REFORM

H.R. 3496 - THE COMMUNITY RE-ENTRY THROUGH ADDICTION TREATMENT TO ENHANCE (CREATE) OPPORTUNITIES ACT Rep. Annie Kuster, D-NH

- This bill establishes the Medication-Assisted Treatment Corrections and Community Reentry Program in the Department of Justice. Under the program, the National Institute of Corrections may award grants to support local programs that provide medication-assisted treatment for incarcerated individuals who have opioid-use disorder.
- Co-Leads: Reps. Turner (R-OH), Blunt Rochester (D-DE), and Walorski (R-IN)
- Status: Referred to House Committee on Judiciary

H.R. 4141 - HUMANE CORRECTIONAL HEALTH CARE ACT Rep. Annie Kuster, D-NH

- This bill repeals the Medicaid Inmate Exclusion Policy which since the founding of the low-income health care program in 1965, bans states from using federal Medicaid funds for health care services to incarcerated individuals. Providing Medicaid and its standard of care can help to improve prison and jail health systems across the country by ensuring treatment for substance use disorder and mental illness, protecting public health through the treatment of infectious diseases, and reducing recidivism.
- Co-leads: Reps. Fitzpatrick (R-PA), Norton (D-DC), and McKinley (R-WV)
- Total Cosponsors: 12
- Status: Referred to the House Committees on Energy and Commerce, Judiciary

GLOBAL INTERDICTION

H.R. 2780 - SAVE AMERICAN FAMILIES EVERYWHERE (SAFE) FROM ILLICIT FOREIGN OPIOIDS ACT Rep. Michael McCaul, R-TX

- This bill requires the State Department, in conjunction with other federal agencies, to develop an international diplomatic and assistance strategy to stop the flow of illicit drugs into the United States. By identifying concrete benchmarks and clearly stated objectives, this bill will reduce global demand and production of opioids, prevent foreign market distribution, and strengthen country capacities to deter opioid threats. Additionally, H.R. 2780 protects vital funding for international anti-opioid efforts and law enforcement working to stop illicit drug flows into the U.S.
- Co-Lead: Rep. Sires (D-NJ)
- Total Cosponsors: 3
- Status: Referred to the House Committee on Foreign Affairs

GLOBAL INTERDICTION

H.R. 2483 - FENTANYL SANCTIONS ACT Rep. Max Rose, D-NY

- This bill authorizes new funding to law enforcement and intelligence agencies, including the Departments of Treasury, Department of Defense and Department of State, to combat the foreign trafficking of synthetic opioids. It would require imposition of sanctions on drug manufacturers in China who knowingly provide synthetic opioids to traffickers, transnational criminal organizations like those in Mexico who mix fentanyl with other drugs and traffic them into the U.S. and financial institutions that assist such entities. Waivers would be provided for countries that take sufficient action to implement and enforce regulations on synthetic opioid production.
- Co-Leads: Reps. Hill (R-AR), Fitzpatrick (R-PA), and Brindisi (D-NY)
- Total Cosponsors: 23
- Status: Signed into law December 2019



CHILDREN AND FAMILIES

H.R. 5583 - HELP GRAND-FAMILIES PREVENT CHILD ABUSE ACT Rep. Mary Gay Scanlon, D-PA

- This legislation helps families affected the opioid epidemic meet the unique needs of children who have experienced trauma, including being exposed to substance misuse, by amending the Child Abuse and Prevention Treatment Act (CAPTA) to provide additional support for grandparents and other relatives who have taken over responsibility as primary caregivers of children.
- Co-lead: Rep. Thompson (R-PA)
- Total Cosponsors: 2
- Status: Referred to the House Committee on Education and Labor

H.R. 5572, FAMILY SUPPORT SERVICES FOR ADDICTION ACT Rep. David Trone, D-MD

- The bill takes a family and community-based approach to addiction treatment that works to address the deep-seated effects of the addiction crisis on families. It would establish a \$5 million grant program for nonprofit family community organizations that provide support for families of individuals struggling with substance use disorder.
- Co-Lead: Rep. Meuser (R-PA)
- Total Cosponsors: 4
- Status: Referred to the House Committees on Energy and Commerce

VETERANS

H.R. 4817 - VA DIRECTLY RETURNING OPIOID PRESCRIPTIONS (DROP) ACT Rep. Jim Baird, R-IN

- This bill directs the Secretary of the Veteran's Administration to ensure that certain Department of Veterans Affairs medical facilities have physical locations for the disposal of controlled substance medications. The VA DROP Act ensures covered VA medical facilities, with an on-site pharmacy or with a law enforcement officer present to monitor the disposal location, will be charged with having a physical location for disposal of these medications.
- Co-Leads: 38 bipartisan
- Total Cosponsors: 58
- Status: Referred to House Veterans Affairs Committee

VETERANS

PAIN CARE CENTER OF INNOVATION LEGISLATION (TO BE INTRODUCED) Rep. Annie Kuster, D-NH

- This legislation establishes a new Center of Innovation for research into pain. The Center of Innovation would provide coordination across VA's existing and innovative research programs on reducing the use of opioids and improving alternative treatments to pain. The Center of Innovation would also conduct new research, especially in prescriber education regarding pain and substance use. The Center of Innovation is inspired in part by NIH's Pain Consortium which coordinates Pain related research across the institutes of NIH.
- Co-Lead: TBD
- Total Cosponsors : NA
- Status: Pending Draft



PRESCRIPTIONS

H.R. 1845 - ALERT ACT OF 2019 Rep. Annie Kuster, D-NH

- This legislation requires the Food and Drug Administration to establish an electronic system to provide pharmacists with a patient's prescription and dispensing history with respect to covered drugs (i.e., those identified as having a risk of misuse or abuse). This Prescription Safety Alert System would use prescription and dispensing data to alert dispensers when a patient is at risk, in real time, and in the workflow.
- Co-Lead: Rep. Mullin (R-OK)
- Cosponsors: 4
- Status: Referred to the House Committee on Energy and Commerce

H.R. 3927 - PDMPS HELP PATIENTS ACT OF 2019 Rep. David McKinley, R-WV

- This legislation creates a pilot program to integrate a treatment locator tool into PDMP's to allow for immediate treatment referral by a health care provider.
- Co-Lead: Rep. Blunt Rochester (D-DE)
- Total Cosponsors: 3
- Status: Referred to House Committee on Energy and Commerce

PRESCRIPTIONS

H.R. 3974 - PRESCRIPTION DRUG MONITORING ACT Rep. Tim Ryan, D-OH

- This legislation strengthens the role of Prescription Drug Monitoring Programs (PDMPs) by requiring the use of prescription drug monitoring programs in all states that receive certain federal funding to combat opioid abuse and requiring states to make their PDMP data accessible to other states. PDMPs can identify and prevent unsafe prescribing practices and doctor shopping, helping to prevent addiction before it starts.
- Co-Lead: Rep. Balderson (R-OH)
- Total Cosponsors: 7
- Status: Referred to the Energy & Commerce Subcommittee on Health