AMENDMENT TO H.R. 4981

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Page and line numbers refer to committee print dated April 21, 2016, 12:13 p.m.

Page 2, line 3, insert before the period at the end the following: "and by increasing awareness of safer prescriber practices of opioids for the treatment of pain, or pain management".

Page 13, after line 11, insert the following:

1 SEC. 4. TRAINING FOR PRESCRIBERS OF OPIOIDS.

- 2 Section 303 of the Controlled Substances Act (21
- 3 U.S.C. 823) is amended—
- 4 (1) in subsection (f), in the matter preceding
- 5 paragraph (1), by striking "The Attorney General
- 6 shall register" and inserting "Subject to subsection
- 7 (k), the Attorney General shall register"; and
- 8 (2) by adding at the end the following:
- 9 "(k)(1) In this subsection, the term 'covered practi-
- 10 tioner' means a practitioner that prescribes opioids for the
- 11 treatment of pain, or pain management who has been
- 12 identified by the Secretary to have prescribing practices
- 13 outside of expected norms or standards in a prescriber's
- 14 field or specialty.

1	"(2) As a condition of renewing the registration of
2	a covered practitioner under this part to prescribe con-
3	trolled substances for the treatment of pain, or pain man-
4	agement, in schedule II, III, IV, or V, the Attorney Gen-
5	eral shall require the covered practitioner to have com-
6	pleted not less than 8 hours of training (through class-
7	room situations, seminars at professional society meetings,
8	electronic communications, or otherwise) that the Sec-
9	retary of Health and Human Services determines meets
10	the requirements under paragraph (3).".
11	(3) Training requirements.—Section 303(g)
12	of the Controlled Substance Act is amended by add-
13	ing at the end the following:
14	"(3) The training provided for purposes of
15	paragraph 303(f)(2) shall, at a minimum, expose
16	covered practitioners to—
17	"(A) pain management treatment guide-
18	lines and best practices;
19	"(B) the treatment and management of
20	opioid-dependent patients;
21	"(C) tools to manage adherence and diver-
22	sion of controlled substances;
23	"(D) early detection of opioid addiction, in-
24	cluding screening tools to identify patients with
25	a substance-use disorder;

1	"(E) methods for diagnosing, treating, and
2	managing a substance use disorder, including
3	the use of medications approved by the Food
4	and Drug Administration and evidence-based
5	nonpharmacological therapies; and
6	"(F) linking patients to evidence-based
7	treatment for substance use disorders.
8	"(4) The Substance Abuse and Mental Health
9	Services Administration shall establish or support
10	the establishment of not less than 1 training module
11	that meets the requirements under paragraph (3)
12	that is provided—
13	"(A) to any covered practitioner registered
14	or applying for a registration under this part to
15	dispense, or conduct research with, controlled
16	substances in schedule II, III, IV, or V;
17	"(B) online; and
18	"(C) free of charge.
19	"(5) Not later than 9 months after this section
20	becomes law, the Secretary, after receiving public
21	comment, shall publish prescribing patterns and
22	practices that meet the requirements of (i)(1) in a
23	prescriber's field or specialty. The Secretary shall
24	periodically publish updates these prescribing pat-
25	terns after a period of public comment.

1	"(6) The requirement of (1)(2) shall not become
2	effective for renewals until the date that is 1 year
3	after the date in which the Secretary publishes the
4	prescribing patterns and practices that meets the re-
5	quirement of (i)(1) for a prescriber's field.
6	"(7) Not later than 5 years after the date of
7	enactment of this subsection, the Secretary of
8	Health and Human Services shall evaluate and make
9	publicly available a report describing how exposure
10	to the training required under this subsection has
11	affected prescribing patterns and practices of con-
12	trolled substances.".

