

April 20, 2016

TO:	Members, Subcommittee on Health
FROM:	Committee Majority Staff
RE:	Subcommittee Markup of H.R. 4978, H.R. 4641, H.R. 3680, H.R. 3691, H.R. 1818, H.R, H.R. 3250, H.R. 4969, H.R. 4586, H.R. 4599, H.R. 4976, and H.R

## I. INTRODUCTION

On Wednesday, April 20, 2016 at 1:30 p.m. in 2322 Rayburn House Office Building, the Subcommittee on Health will meet in open markup session to consider the following:

- H.R. 4978, Nurturing and Supporting Healthy Babies Act;
- H.R. 4641, To provide for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes;
- H.R. 3680, Co-Prescribing to Reduce Overdoses Act of 2015;
- H.R. 3691, Improving Treatment for Pregnant and Postpartum Women Act;
- H.R. 1818, Veteran Emergency Medical Technician Support Act of 2015;
- H.R.\_\_\_\_, Opioid Use Disorder Treatment Expansion and Modernization Act;
- H.R. 3250, DXM Abuse Prevention Act of 2015;
- H.R. 4969, John Thomas Decker Act of 2016;
- H.R. 4586, Lali's Law;
- H.R. 4599, Reducing Unused Medications Act of 2016;
- H.R. 4976, Opioid Review Modernization Act of 2016; and
- H.R.\_\_\_\_, Examining Opioid Treatment Infrastructure Act of 2016.

In keeping with Chairman Upton's announced policy, Members must submit any amendments they may have two hours before they are offered during this markup. Members

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may submit amendments by email to peter.kielty@mail.house.gov. Any information with respect to an amendment's parliamentary standing (e.g., its germaneness) should be submitted at this time as well.

## **II. LEGISLATION**

- A. <u>H.R. 4978, Nurturing and Supporting Healthy Babies Act</u>: H.R. 4978, introduced by Rep. Jenkins and Rep. Bustos, would require the Comptroller General of the United States to issue a report one year after enactment on neonatal abstinence syndrome (NAS). Among other things, the report is to include information on: the prevalence of NAS among children covered by Medicaid, NAS treatment services covered by Medicaid and the costs associated with that treatment, the settings in which Medicaid covered treatment for infants with NAS are provided, and any Federal barriers for treating infants with NAS.
- B. <u>H.R. 4641, To provide for the establishment of an inter-agency task force to review,</u> <u>modify, and update best practices for pain management and prescribing pain</u> <u>medication, and for other purposes</u>: H.R. 4641, introduced by Rep. Brooks and Rep. Kennedy, would authorize the Secretary of Health and Human Services to convene a task force to review, revise if appropriate, and disseminate best practices for chronic and acute pain management. The task force would be comprised of Federal agencies, outside experts, and patients.
- C. <u>H.R. 3680, Co-Prescribing to Reduce Overdoses Act of 2015</u>: H.R. 3680, introduced by Rep. Sarbanes, would establish a grant program for co- prescribing of opioid reversal drugs for patients who are at a high risk of overdose. This grant would support the creation of opioid overdose reversal co-prescribing guidelines.
- D. <u>H.R. 3691, Improving Treatment for Pregnant and Postpartum Women Act</u>: H.R. 3691, introduced by Rep. Lujan, would reauthorize a residential treatment programs for pregnant and postpartum women and establish a pilot grant program for State substance abuse agencies to support family based services with a primary diagnosis of a substance use disorder, which would include opioid addiction.
- E. <u>H.R. 1818, Veteran Emergency Medical Technician Support Act of 2015</u>: H.R. 1818, introduced by Rep. Kinzinger, would create a demonstration program to help streamline the licensure requirements for veterans who have already completed military emergency medical technician training to more easily meet civilian emergency medical technician licensure requirements. The House approved this legislation by a voice vote in both the 112th and 113th Congress (H.R. 4124 and H.R. 235 respectively).
- F. <u>H.R.</u>, <u>Opioid Use Disorder Treatment Expansion and Modernization Act</u>: H.R. \_\_\_\_\_, introduced by Rep. Bucshon and Rep. Tonko, would amend the Controlled Substances Act to expand access to medication-assisted treatment, while ensuring that

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patients receive the full array of quality evidence-based services and minimizing the potential for drug diversion.

- G. <u>H.R. 3250, DXM Abuse Prevention Act of 2015</u>: H.R. 3250, introduced by Rep. Johnson and Rep. Matsui, amends the Federal Food, Drug, and Cosmetic Act to ban the sale of a drug containing dextromethorphan (DXM) to an individual under age 18 unless the individual has a prescription or is actively enrolled in the military. This bill includes civil monetary penalties, which increase upon repeated violations.
- H. <u>H.R. 4969, James Thomas Decker Act of 2016</u>: H.R. 4969, introduced by Rep. Meehan, Rep. Kind, and Rep. Veasey, amends the Public Health Service Act to direct the Centers for Disease Control and Prevention (CDC) to study what information and resources are available to youth athletes and their families regarding the dangers of opioid use and abuse, non-opioid treatment options, and how to seek addiction treatment. The CDC is then to publicly report its findings and work with stakeholders to disseminate resources to students, parents, and those involved in treating a sports related injury.
- <u>H.R. 4586, Lali's Law:</u> H.R. 4586, introduced by Rep. Dold and Rep. Clark, amends the Public Health Service Act to authorize grants to States for developing standing orders for naloxone prescriptions and educating health care professionals regarding the dispensing of opioid overdose reversal medication without person-specific prescriptions.
- J. <u>H.R. 4599, Reducing Unused Medications Act of 2016</u>: H.R. 4599, introduced by Rep. Clark and Rep. Stivers, would amend the Controlled Substances Act (CSA) to clarify when a prescription for a drug listed on Schedule II of the CSA may be partially filled.
- K. <u>H.R. 4976, Opioid Review Modernization Act of 2016</u>: H.R. 4976, introduced by Rep. Maloney and Rep. Lance, would require the FDA to work closely with expert advisory committees before making critical product approval and labeling decisions, and to make recommendations regarding education programs for prescribers of extended-release and long-acting opioids. Further, it would encourage the development and approval of opioids with abuse-deterrent properties.
- L. <u>H.R.</u>, Examining Opioid Treatment Infrastructure Act of 2016: H.R. \_\_\_\_, introduced by Rep. Foster and Rep. Pallone, requires the Comptroller General of the United States to issue a report to Congress on substance abuse treatment availability and infrastructure needs throughout the United States. This report shall include an evaluation of various substance abuse treatment settings including inpatient, outpatient, and detoxification programs.

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## III. STAFF CONTACTS

If you have any questions regarding this markup, please contact John Stone, Carly McWilliams, Josh Trent, or Adrianna Simonelli of the Committee staff at (202) 225-2927.