

115TH CONGRESS  
1ST SESSION

# H. R. 4275

To provide for the development and dissemination of programs and materials for training pharmacists, health care providers, and patients on indicators that a prescription is fraudulent, forged, or otherwise indicative of abuse or diversion, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 7, 2017

Mr. DESAULNIER (for himself and Mr. CARTER of Georgia) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To provide for the development and dissemination of programs and materials for training pharmacists, health care providers, and patients on indicators that a prescription is fraudulent, forged, or otherwise indicative of abuse or diversion, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Empowering Phar-  
5 macists in the Fight Against Opioid Abuse Act”.

1 **SEC. 2. PROGRAMS AND MATERIALS FOR TRAINING ON**  
2 **CERTAIN CIRCUMSTANCES UNDER WHICH A**  
3 **PHARMACIST MAY DECLINE TO FILL A PRE-**  
4 **SCRIPTION.**

5 (a) IN GENERAL.—Not later than 1 year after the  
6 date of enactment of this Act, the Administrator of the  
7 Drug Enforcement Administration, in consultation with  
8 the Secretary of Health and Human Services, the Com-  
9 missioner of Food and Drugs, the Director of the Centers  
10 for Disease Control and Prevention, and the Assistant  
11 Secretary for Mental Health and Substance Use, shall de-  
12 velop and disseminate programs and materials for training  
13 pharmacists, health care providers, and patients on—

14 (1) circumstances under which a pharmacist  
15 may, consistent with section 201 of the Controlled  
16 Substances Act (21 U.S.C. 811) and regulations  
17 thereunder, including section 1306.04 of title 21,  
18 Code of Federal Regulations, decline to fill a pre-  
19 scription for a controlled substance because the  
20 pharmacist suspects the prescription is fraudulent,  
21 forged, or otherwise indicative of abuse or diversion;  
22 and

23 (2) any Federal requirements pertaining to de-  
24 clining to fill a prescription under such circum-  
25 stances.

1           (b) MATERIALS INCLUDED.—In developing materials  
2 under subsection (a), the Administrator of the Drug En-  
3 forcement Administration shall include information edu-  
4 cating—

5           (1) pharmacists on how to decline to fill a pre-  
6 scription and actions to take after declining to fill a  
7 prescription; and

8           (2) other health care practitioners and the pub-  
9 lic on a pharmacist’s responsibility to decline to fill  
10 prescriptions in certain circumstances.

11          (c) STAKEHOLDER INPUT.—In developing the pro-  
12 grams and materials required under subsection (a), the  
13 Administrator of the Drug Enforcement Administration  
14 shall seek input from relevant national, State, and local  
15 associations, boards of pharmacy, medical societies, licens-  
16 ing boards, health care practitioners, and patients.

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