Suspend the Rules and Pass the Bill, H.R. 2466, With an Amendment

(The amendment strikes all after the enacting clause and inserts a new text)

116TH CONGRESS 2D SESSION

H. R. 2466

To extend the State Opioid Response Grants program, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MAY 1, 2019

Mr. Trone (for himself, Mr. Armstrong, Ms. Sherrill, and Mr. Riggleman) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To extend the State Opioid Response Grants program, 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 “State Opioid Response
5 Grant Authorization Act of 2020”.

SEC. 2. GRANT PROGRAM FOR STATE AND TRIBAL RESPONSE TO SUBSTANCE USE DISORDERS OF SIGNIFICANCE.

(a) IN GENERAL.—Section 1003 of the 21st Century Cures Act (42 U.S.C. 290ee–3 note) is amended to read as follows:

“SEC. 1003. GRANT PROGRAM FOR STATE AND TRIBAL RESPONSE TO SUBSTANCE USE DISORDERS OF SIGNIFICANCE.

“(a) IN GENERAL.—The Secretary of Health and Human Services (referred to in this section as the ‘Secretary’) shall carry out the grant program described in subsection (b) for purposes of addressing substance use disorders of significance, including opioid and stimulant use disorders, within States, Indian Tribes, and populations served by Tribal organizations and Urban Indian organizations.

“(b) GRANTS PROGRAM.—

“(1) IN GENERAL.—The Secretary shall award grants to States, Indian Tribes, Tribal organizations, and Urban Indian organizations for the purpose of addressing substance use disorders of significance, including opioid and stimulant use disorders, within such States, such Indian Tribes, and populations served by such Tribal organizations and
Urban Indian organizations, in accordance with paragraph (2).

“(2) MINIMUM ALLOCATIONS; PREFERENCE.—In awarding grants under paragraph (1), the Secretary shall—

“(A) ensure that each State and the District of Columbia receives not less than $4,000,000; and

“(B) give preference to States, Indian Tribes, Tribal organizations, and Urban Indian organizations whose populations have an incidence or prevalence of opioid use disorders that is substantially higher relative to the populations of other States, Indian Tribes, Tribal organizations, or Urban Indian organizations, as applicable.

“(3) FORMULA METHODOLOGY.—Not less than 15 days before publishing a funding opportunity announcement with respect to grants under this section, the Secretary shall—

“(A) develop a formula methodology to be followed in allocating grant funds awarded under this section among grantees, which includes performance assessments for continuation awards; and
“(B) submit the formula methodology to—

“(I) the Committee on Energy and Commerce and the Committee on Appropriations of the House of Representatives; and

“(ii) the Committee on Health, Education, Labor and Pensions and the Committee on Appropriations of the Senate.

“(4) USE OF FUNDS.—Grants awarded under this subsection shall be used for carrying out activities that supplement activities pertaining to substance use disorders of significance, including opioid and stimulant use disorders, undertaken by the State agency responsible for administering the substance abuse prevention and treatment block grant under subpart II of part B of title XIX of the Public Health Service Act (42 U.S.C. 300x–21 et seq.), which may include public health-related activities such as the following:

“(A) Implementing prevention activities, and evaluating such activities to identify effective strategies to prevent substance use disorders.

“(B) Establishing or improving prescription drug monitoring programs.
“(C) Training for health care practitioners, such as best practices for prescribing opioids, pain management, recognizing potential cases of substance abuse, referral of patients to treatment programs, preventing diversion of controlled substances, and overdose prevention.

“(D) Supporting access to health care services, including—

“(i) services provided by federally certified opioid treatment programs;

“(ii) outpatient and residential substance use disorder treatment services that utilize medication-assisted treatment, as appropriate; or

“(iii) other appropriate health care providers to treat substance use disorders.

“(E) Recovery support services, including community-based services that include peer supports, address housing needs, and address family issues.

“(F) Other public health-related activities, as the State, Indian Tribe, Tribal organization, or Urban Indian organization determines appropriate, related to addressing substance use disorders within the State, Indian Tribe, Tribal or-
ganization, or Urban Tribal organization, including directing resources in accordance with local needs related to substance use disorders.

“(c) ACCOUNTABILITY AND OVERSIGHT.—A State receiving a grant under subsection (b) shall include in reporting related to substance abuse submitted to the Secretary pursuant to section 1942 of the Public Health Service Act (42 U.S.C. 300x–52), a description of—

“(1) the purposes for which the grant funds received by the State under such subsection for the preceding fiscal year were expended and a description of the activities of the State under the grant; and

“(2) the ultimate recipients of amounts provided to the State through the grant.

“(d) LIMITATIONS.—Any funds made available pursuant to subsection (i) shall be subject to the same requirements as substance abuse prevention and treatment programs under titles V and XIX of the Public Health Service Act (42 U.S.C. 290aa et seq., 300w et seq.).

“(e) INDIAN TRIBES, TRIBAL ORGANIZATIONS, AND URBAN INDIAN ORGANIZATIONS.—The Secretary, in consultation with Indian Tribes, Tribal organizations, and Urban Indian organizations, shall identify and establish appropriate mechanisms for Indian Tribes, Tribal organi-
zations, and Urban Indian organizations to demonstrate or report the information as required under subsections (b), (c), and (d).

“(f) REPORT TO CONGRESS.—Not later than September 30, 2022, and biennially thereafter, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives, and the Committees on Appropriations of the House of Representatives and the Senate, a report summarizing the information provided to the Secretary in reports made pursuant to subsections (c) and (e), including the purposes for which grant funds are awarded under this section and the activities of such grant recipients.

“(g) TECHNICAL ASSISTANCE.—The Secretary, including through the Tribal Training and Technical Assistance Center of the Substance Abuse and Mental Health Services Administration, shall provide States, Indian Tribes, Tribal organizations, and Urban Indian organizations, as applicable, with technical assistance concerning grant application and submission procedures under this section, award management activities, and enhancing outreach and direct support to rural and underserved communities and providers in addressing substance use disorders.

“(h) DEFINITIONS.—In this section:
“(1) INDIAN TRIBE.—The term ‘Indian Tribe’ has the meaning given the term ‘Indian tribe’ in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304).

“(2) TRIBAL ORGANIZATION.—The term ‘Tribal organization’ has the meaning given the term ‘tribal organization’ in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304).

“(3) URBAN INDIAN ORGANIZATION.—The term ‘Urban Indian organization’ has the meaning given to that term in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603).

“(4) STATE.—The term ‘State’ has the meaning given such term in section 1954(b) of the Public Health Service Act (42 U.S.C. 300x–64(b)).

“(i) AUTHORIZATION OF APPROPRIATIONS.—

“(1) IN GENERAL.—For purposes of carrying out the grant program under subsection (b), there is authorized to be appropriated $1,585,000,000 for each of fiscal years 2021 through 2026, to remain available until expended.

“(2) FEDERAL ADMINISTRATIVE EXPENSES.—Of the amounts made available for each fiscal year to award grants under subsection (b), the Secretary
shall not use more than 2 percent for Federal administra-
tive expenses, training, technical assistance, and evalua-
tion.

“(3) Set aside.—Of the amounts made available for each fiscal year to award grants under sub-
section (b) for a fiscal year, the Secretary shall—

“(A) award 5 percent to Indian Tribes, Tribal organizations, and Urban Indian organi-
izations; and

“(B) of the remaining amount, set aside up to 15 percent for States with the highest age-adjusted rate of drug overdose death based on the ordinal ranking of States according to the Director of the Centers for Disease Control and Prevention.”.

(b) Clerical Amendment.—The table of sections in section 1(b) of such Act is amended by striking the item relating to section 1003 and inserting the following:

“Sec. 1003. Grant program for State and Tribal response to substance use disorders of significance.”.