

Committee Print

[SHOWING THE TEXT OF H.R. 4275 AS FORWARDED BY THE SUBCOMMITTEE
ON HEALTH ON APRIL 25, 2018]

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.

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

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 Secretary of Health and
7 Human Services, in consultation with the Administrator
8 of the Drug Enforcement Administration, the Commis-
9 sioner of Food and Drugs, the Director of the Centers for
10 Disease Control and Prevention, and the Assistant Sec-
11 retary for Mental Health and Substance Use, shall develop
12 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 Secretary of Health and Human
3 Services shall include information educating—

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

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

10 (c) STAKEHOLDER INPUT.—In developing the pro-
11 grams and materials required under subsection (a), the
12 Secretary of Health and Human Services shall seek input
13 from relevant national, State, and local associations,
14 boards of pharmacy, medical societies, licensing boards,
15 health care practitioners, and patients.