To direct the Secretary of Health and Human Services to conduct a demonstration program to test alternative pain management protocols to limit the use of opioids in hospital-based emergency departments.

IN THE HOUSE OF REPRESENTATIVES

Mr. PASCRELL introduced the following bill; which was referred to the Committee on

A BILL

To direct the Secretary of Health and Human Services to conduct a demonstration program to test alternative pain management protocols to limit the use of opioids in hospital-based emergency departments.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “__________ Act of 2017”.

SEC. 2. FINDINGS.

The Congress finds as follows:
(1) More than 90 Americans die each day of an opioid overdose, according to the National Institute on Drug Abuse.

(2) Opioids contributed to the deaths of more than 33,000 people in 2015, more than any year on official record. Nearly half of all opioid overdose deaths involve a prescription opioid.

(3) The Centers for Disease Control and Prevention estimate that the economic burden of prescription opioid misuse in the United States totals $78.5 billion per year. This includes costs stemming from health care, including addiction treatment, lost productivity, and criminal justice involvement.

(4) Over 200 million opioid prescriptions are written in the United States each year, and 2,000,000 Americans have the symptoms of substance use disorder.

(5) Approximately 21 to 29 percent of patients prescribed opioids for chronic pain misuse them.

(6) Emergency departments in several States, including New Jersey and Colorado, have developed innovative programs to more widely utilize non-opioid pain treatments in order to reduce the use of opioids.
SEC. 3. EMERGENCY DEPARTMENT ALTERNATIVES TO OPIOIDS DEMONSTRATION PROGRAM.

(a) Demonstration Program Grants.—The Secretary of Health and Human Services acting through the Assistant Secretary for Mental Health and Substance Use (in this section referred to as the “Secretary”) shall carry out a demonstration program under which the Secretary shall award grants to hospitals and emergency departments, including freestanding emergency departments, to develop and implement alternative pain management protocols that limit the use of opioids in hospital-based emergency departments.

(b) Eligibility.—To be eligible to receive a grant under subsection (a), a hospital or emergency department shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require.

(c) Geographic Diversity.—In awarding grants under this section, the Secretary shall seek to ensure geographical diversity among grant recipients.

(d) Use of Funds.—Grants under subsection (a) shall each be used for developing or enhancing, implementing, studying, and reporting on alternative pain management protocols that—
(1) target common painful conditions, including renal colic, sciatica, headaches, musculoskeletal pain, and extremity fractures; and

(2) may include trigger point injections, nitrous oxide, ultrasound-guided nerve blocks, and non-opioid pain medications.

(e) CONSULTATION.—The Secretary shall implement a process for recipients of grants under subsection (a) to consult (in a manner that allows for sharing of evidence-based best practices) with emergency departments and physicians that have successfully deployed alternative pain management protocols that limit the use of opioids.

(f) REPORT TO THE SECRETARY.—Each recipient of a grant under this section shall submit to the Secretary annual evaluations of the progress of the program funded through the grant. These evaluations shall include—

(1) a description of and specific information about the alternative pain management protocols employed;

(2) the number of patients who were treated with each alternative pain management protocol;

(3) the success of each specific alternative pain management protocol;

(4) data on the number of opioid prescriptions written—
(A) before the program began; and

(B) at various stages of the program;

(5) the demographic characteristics of patients who were treated with an alternative pain management protocol, including age, sex, race, ethnicity, and insurance status and type;

(6) data on patients who were eventually prescribed opioids after alternative pain management protocols were employed; and

(7) any other information the Secretary deems necessary.

(g) REPORT TO CONGRESS.—Not later than 120 days after completion of the demonstration program under this section, the Secretary shall submit a report to the Congress on the results of the demonstration program and include in the report—

(1) the number of applications received and the number funded; and

(2) recommendations for broader implementation of pain management protocols that limit the use of opioids in hospital-based emergency departments.

(h) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there is authorized to be appropriated $10,000,000 for each of fiscal years 2019 through 2021.