

[DISCUSSION DRAFT]

115TH CONGRESS
2^D SESSION

H. R. _____

To amend the Public Health Service Act to authorize the Director of the Centers for Disease Control and Prevention to carry out certain activities to prevent controlled substances overdoses, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

M____. _____ introduced the following bill; which was referred to the Committee on _____

A BILL

To amend the Public Health Service Act to authorize the Director of the Centers for Disease Control and Prevention to carry out certain activities to prevent controlled substances overdoses, 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 [“_____ Act
5 of 2018”].

1 **SEC. 2. PREVENTING OVERDOSES OF CONTROLLED SUB-**
2 **STANCES.**

3 Part P of title III of the Public Health Service Act
4 (42 U.S.C. 280g et seq.) is amended by adding at the end
5 the following new subsection:

6 **“SEC. 399V-7. PREVENTING OVERDOSES OF CONTROLLED**
7 **SUBSTANCES.**

8 “(a) EVIDENCE-BASED PREVENTION GRANTS.—

9 “(1) IN GENERAL.—The Director of the Cen-
10 ters for Disease Control and Prevention may—

11 “(A) to the extent practicable, carry out
12 any evidence-based prevention activity described
13 in paragraph (2);

14 “(B) provide training and technical assist-
15 ance to States for purposes of carrying out any
16 such activity; and

17 “(C) award grants to States for purposes
18 of carrying out any such activity.

19 “(2) EVIDENCE-BASED PREVENTION ACTIVI-
20 TIES.—An evidence-based prevention activity de-
21 scribed in this paragraph is any of the following ac-
22 tivities:

23 “(A) With respect to a State, improving
24 the efficiency and use of the State prescription
25 drug monitoring program by—

1 “(i) encouraging all authorized users
2 (as specified by the State) to register with
3 and use the program and making the pro-
4 gram easier to use;

5 “(ii) enabling such users to access any
6 updates to information collected by the
7 program in as close to real-time as pos-
8 sible;

9 “(iii) providing for a mechanism for
10 the program to automatically flag any po-
11 tential misuse or abuse of controlled sub-
12 stances and any detection of inappropriate
13 prescribing practices relating to such sub-
14 stances;

15 “(iv) enhancing interoperability be-
16 tween the program and any electronic
17 health records system, including by inte-
18 grating the use of electronic health records
19 into the program for purposes of improving
20 clinical decisionmaking;

21 “(v) continually updating program ca-
22 pabilities to respond to technological inno-
23 vation for purposes of appropriately ad-
24 dressing a controlled substance overdose

1 epidemic as such epidemic may occur and
2 evolve; and

3 “(vi) facilitating data sharing between
4 the program and the prescription drug
5 monitoring programs of neighboring
6 States.

7 “(B) Achieving community or health sys-
8 tem interventions through activities such as—

9 “(i) establishing or improving con-
10 trolled substances prescribing interventions
11 for insurers and health systems;

12 “(ii) enhancing the use of evidence-
13 based controlled substances prescribing
14 guidelines across sectors and health care
15 settings; and

16 “(iii) implementing strategies to align
17 the prescription of controlled substances
18 with the guidelines described in clause (ii).

19 “(C) Evaluating interventions to better un-
20 derstand what works to prevent overdoses, in-
21 cluding those involving prescription and illicit
22 controlled substances.

23 “(D) Implementing projects to advance an
24 innovative prevention approach with respect to
25 new and emerging public health crises and op-

1 portunities to address such crises, such as en-
2 hancing public education and awareness on the
3 risks associated with opioids.

4 “(b) ENHANCED SURVEILLANCE OF CONTROLLED
5 SUBSTANCE OVERDOSE GRANTS.—

6 “(1) IN GENERAL.—The Director of the Cen-
7 ters for Disease Control and Prevention may—

8 “(A) to the extent practicable, carry out
9 any controlled substance overdose surveillance
10 activity described in paragraph (2);

11 “(B) provide training and technical assist-
12 ance to States for purposes of carrying out any
13 such activity; and

14 “(C) award grants to States for purposes
15 of carrying out any such activity.

16 “(2) CONTROLLED SUBSTANCE OVERDOSE SUR-
17 VEILLANCE ACTIVITIES.—A controlled substance
18 overdose surveillance activity described in this para-
19 graph is any of the following activities:

20 “(A) Enhancing the timeliness of reporting
21 data to the public, including data on fatal and
22 nonfatal overdoses of controlled substances.

23 “(B) Enhancing comprehensiveness of data
24 on controlled substances overdoses by collecting
25 information on such overdoses from appropriate

1 sources such as toxicology reports, death scene
2 investigations, and other risk factors.

3 “(C) Using data to help identify risk fac-
4 tors associated with controlled substances
5 overdoses.

6 “(D) With respect to a State, supporting
7 entities involved in providing information to in-
8 form efforts within the State, such as by coro-
9 ners and medical examiners, to improve accu-
10 rate testing and reporting of causes and con-
11 tributing factors to controlled substances
12 overdoses.

13 “(E) Working to enable information shar-
14 ing regarding controlled substances overdoses
15 among data sources.

16 “(c) CONTROLLED SUBSTANCE DEFINED.—In this
17 section, the term ‘controlled substance’ has the meaning
18 given that term in section 102 of the Controlled Sub-
19 stances Act.

20 “(d) AUTHORIZATION OF APPROPRIATIONS.—For
21 purposes of carrying out this section, there is authorized
22 to be appropriated **【\$_____】** for each of fiscal years
23 2019 through 2023.”.