

115TH CONGRESS
1ST SESSION

H. R. 1375

To amend the Public Health Service Act to authorize the Secretary of Health of Human Services to award grants to States (or collaborations of States) to establish, expand, or maintain a comprehensive regional, State, or municipal system to provide training, education, consultation, and other resources to prescribers relating to patient pain, substance misuse, and substance abuse disorders, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 7, 2017

Ms. CLARK of Massachusetts (for herself and Mr. JENKINS of West Virginia) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

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

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Prescriber Support Act
3 of 2017”.

4 **SEC. 2. RESOURCES FOR PRESCRIBERS ON PATIENT PAIN,
5 SUBSTANCE MISUSE, AND SUBSTANCE ABUSE
6 DISORDERS.**

7 The Public Health Service Act is amended by insert-
8 ing after section 3990 of such Act (42 U.S.C. 280g–3)
9 the following:

10 **“SEC. 3990–1. RESOURCES FOR PRESCRIBERS ON PATIENT
11 PAIN, SUBSTANCE MISUSE, AND SUBSTANCE
12 ABUSE DISORDERS.**

13 “(a) GRANTS.—The Secretary may award grants to
14 States (or collaborations of States) to establish, expand,
15 or maintain a comprehensive regional, State, or municipal
16 system to provide training, education, consultation, and
17 other resources to enable prescribers—

18 “(1) to effectively and appropriately treat and
19 manage patient pain; and

20 “(2) to prevent, identify, and respond to patient
21 substance misuse and substance abuse disorders.

22 “(b) SYSTEM IMPLEMENTATION.—A system funded
23 through this section may provide the training, education,
24 consultation, and other resources described in subsection
25 (a) directly or through a professional association, an insti-

1 tution of higher education, a nonprofit organization, or an-
2 other appropriate entity.

3 “(c) NUMBER.—Subject to the availability of appro-
4 priations, the Secretary shall make grants under this sec-
5 tion to not fewer than 3 States (or collaborations of
6 States).

7 “(d) PRIORITY.—In making grants under this sec-
8 tion, the Secretary shall give priority to applications to
9 States (or collaborations of States) demonstrating the
10 greatest lack of, and need for, the training, education, con-
11 sultation, and other resources described in subsection (a).

12 “(e) EVALUATION.—Not later than 3 years after the
13 date on which a State (or collaboration of States) receives
14 a grant under this section, the State (or collaboration)
15 shall submit to the Secretary an evaluation of the extent
16 to which the system funded through the grant has been
17 effective in—

18 “(1) improving the treatment and management
19 of pain; and

20 “(2) preventing, identifying, and responding to
21 substance misuse and substance abuse disorders.

22 “(f) MINIMUM REQUIREMENTS.—To be eligible for
23 assistance under this section, a system described in sub-
24 section (a) shall include—

1 “(1) a peer-to-peer consultation program that
2 enables prescribers to receive real-time expert con-
3 sultation (in person or remotely) with a pain or ad-
4 diction specialist to aid in the individualized treat-
5 ment and management of patient pain and in re-
6 sponding to patients who are exhibiting signs of sub-
7 stance misuse or substance abuse disorders;

8 “(2) coordination with community-based re-
9 sources and services, including mental health and
10 substance abuse resources, pain and addiction spe-
11 cialists, primary care resources, and support groups;
12 and

13 “(3) a dedicated website to collect and dissemi-
14 nate information for prescribers, including—

15 “(A) information on the consultation pro-
16 gram under paragraph (1);

17 “(B) a detailed and continuously updated
18 guide to the community-based resources and
19 services identified and coordinated under para-
20 graph (2), including information on the services
21 provided and the populations served; and

22 “(C) appropriate training and educational
23 materials, such as appropriate prescribing
24 guidelines and information on the treatment
25 and management of chronic pain, alternatives

1 to opioid-based pain treatment, substance abuse
2 screening, and follow-up support.

3 “(g) APPLICATION.—To seek a grant under this sec-
4 tion, a State (or collaboration of States) shall submit an
5 application to the Secretary at such time, in such manner,
6 and containing such information as the Secretary may re-
7 quire.

8 “(h) PRESCRIBER DEFINED.—In this section, the
9 term ‘prescriber’ means a health care professional author-
10 ized under State law to prescribe drugs.

11 “(i) AUTHORIZATION OF APPROPRIATIONS.—To
12 carry out this section, there is authorized to be appro-
13 priated \$15,000,000 for each of fiscal years 2018 through
14 2022.”.

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