

115TH CONGRESS  
1ST SESSION

# H. R. 3964

To amend the Controlled Substances Act to establish additional registration requirements for prescribers of opioids, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

OCTOBER 5, 2017

Mr. ROE of Tennessee (for himself, Ms. KUSTER of New Hampshire, Mr. MACARTHUR, Mrs. RADEWAGEN, and Miss GONZÁLEZ-COLÓN of Puerto Rico) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend the Controlled Substances Act to establish additional registration requirements for prescribers of opioids, 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 “Opioid Addiction Pre-  
5 vention Act of 2017”.

1 **SEC. 2. REGISTRATION REQUIREMENTS FOR PRESCRIBERS.**

2 Section 303 of the Controlled Substances Act (21  
3 U.S.C. 823) is amended by adding at the end the fol-  
4 lowing:

5 “(k)(1) The Attorney General shall not register, or  
6 renew the registration of, a practitioner under subsection  
7 (f) who is licensed under State law to prescribe controlled  
8 substances in schedule II, III, or IV, unless the practi-  
9 tioner submits to the Attorney General, for each such reg-  
10 istration or renewal request, a certification that the practi-  
11 tioner, during the applicable registration period, will not  
12 prescribe, for the initial treatment of acute pain, any  
13 schedule II, III, or IV opioid, other than an opioid pre-  
14 scription described in paragraph (3)—

15 “(A) without firstly or concomitantly pre-  
16 scribing one or more non-opioid analgesics, if there  
17 are no contraindications to such analgesics;

18 “(B) without clearly stating on the prescription  
19 the diagnosis for which the opioid is prescribed;

20 “(C) unless the prescribed opioid dose is the  
21 lowest effective dose;

22 “(D) an extended release or long acting formu-  
23 lation of the opioid; and

24 “(E) in an amount in excess of the lesser of—

25 “(i) a 10-day supply (for which no refill is  
26 available); or

1                   “(ii) an opioid prescription limit estab-  
2                   lished under State law.

3                   “(2) In this subsection, the term ‘acute pain’—

4                   “(A) means pain with abrupt onset and caused  
5                   by a discrete injury, surgical procedure, or other ill-  
6                   ness of limited duration; and

7                   “(B) does not include—

8                   “(i) chronic pain;

9                   “(ii) pain being treated as part of cancer  
10                  care;

11                  “(iii) hospice or other end-of-life care; or

12                  “(iv) pain being treated as part of pallia-  
13                  tive care.

14                  “(3) An opioid prescription described in this para-  
15                  graph is a prescription—

16                  “(A) for a schedule II, III, or IV opioid drug  
17                  approved by the Food and Drug Administration for  
18                  an indication for the treatment of addiction; and

19                  “(B) that is for the treatment of addiction.”.

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