

117TH CONGRESS  
1ST SESSION

# S. 445

To amend section 303(g) of the Controlled Substances Act (21 U.S.C. 823(g)) to eliminate the separate registration requirement for dispensing narcotic drugs in schedule III, IV, or V, such as buprenorphine, for maintenance or detoxification treatment, and for other purposes.

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## IN THE SENATE OF THE UNITED STATES

FEBRUARY 25, 2021

Ms. HASSAN (for herself and Ms. MURKOWSKI) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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## A BILL

To amend section 303(g) of the Controlled Substances Act (21 U.S.C. 823(g)) to eliminate the separate registration requirement for dispensing narcotic drugs in schedule III, IV, or V, such as buprenorphine, for maintenance or detoxification treatment, 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 “Mainstreaming Addic-  
5 tion Treatment Act of 2021”.

1 **SEC. 2. ELIMINATING SEPARATE REGISTRATION REQUIRE-**  
2 **MENT FOR DISPENSING NARCOTIC DRUGS IN**  
3 **SCHEDULES III, IV, AND V FOR MAINTENANCE**  
4 **OR DETOXIFICATION TREATMENT.**

5 (a) IN GENERAL.—Section 303(g) of the Controlled  
6 Substances Act (21 U.S.C. 823(g)) is amended—

7 (1) by striking paragraph (2);

8 (2) by striking “(g)(1) Except as provided in  
9 paragraph (2), practitioners who dispense narcotic  
10 drugs to individuals for maintenance treatment or  
11 detoxification treatment” and inserting “(g) Practi-  
12 tioners who dispense narcotic drugs (other than nar-  
13 cotic drugs in schedule III, IV, or V) to individuals  
14 for maintenance treatment or detoxification treat-  
15 ment”;

16 (3) by redesignating subparagraphs (A), (B),  
17 and (C) as paragraphs (1), (2), and (3), respectively;  
18 and

19 (4) in paragraph (2), as so redesignated, by re-  
20 designating clauses (i) and (ii) as subparagraphs (A)  
21 and (B), respectively.

22 (b) TECHNICAL AND CONFORMING EDITS.—

23 (1) Section 304 of the Controlled Substances  
24 Act (21 U.S.C. 824) is amended—

1 (A) in subsection (a), by striking  
2 “303(g)(1)” each place it appears and inserting  
3 “303(g)”; and

4 (B) in subsection (d)(1), by striking  
5 “303(g)(1)” and inserting “303(g)”.

6 (2) Section 309A(a) of the Controlled Sub-  
7 stances Act (21 U.S.C. 829a(a)) is amended by  
8 striking paragraph (2) and inserting the following:

9 “(2) the controlled substance—

10 “(A) is a narcotic drug in schedule III, IV,  
11 or V to be administered for the purpose of  
12 maintenance or detoxification treatment; and

13 “(B) is to be administered by injection or  
14 implantation;”.

15 (3) Section 520E–4(c) of the Public Health  
16 Service Act (42 U.S.C. 290bb–36d(c)) is amended,  
17 in the matter preceding paragraph (1), by striking  
18 “information on any qualified practitioner that is  
19 certified to prescribe medication for opioid depend-  
20 ency under section 303(g)(2)(B) of the Controlled  
21 Substances Act” and inserting “information on any  
22 practitioner who prescribes narcotic drugs in sched-  
23 ule III, IV, or V of section 202(c) of the Controlled  
24 Substances Act (21 U.S.C. 812(c)) for the purpose  
25 of maintenance or detoxification treatment”.

1           (4) Section 544(a)(3) of the Public Health  
2           Service Act (42 U.S.C. 290dd-3(a)(3)) is amended  
3           by striking “any practitioner dispensing narcotic  
4           drugs pursuant to section 303(g) of the Controlled  
5           Substances Act” and inserting “any practitioner dis-  
6           pensing narcotic drugs for the purpose of mainte-  
7           nance or detoxification treatment”.

8           (5) Section 1833 of the Social Security Act (42  
9           U.S.C. 1395l) is amended by striking subsection  
10          (bb).

11          (6) Section 1834(o) of the Social Security Act  
12          (42 U.S.C. 1395m(o)) is amended by striking para-  
13          graph (3).

14          (7) Section 1866F(c)(3) of the Social Security  
15          Act (42 U.S.C. 1395cc-6(c)(3)) is amended—

16                (A) in subparagraph (A), by inserting  
17                “and” at the end;

18                (B) in subparagraph (B), by striking “;  
19                and” and inserting a period; and

20                (C) by striking subparagraph (C).

21          (8) Section 1903(aa)(2)(C) of the Social Secu-  
22          rity Act (42 U.S.C. 1396b(aa)(2)(C)) is amended—

23                (A) in clause (i), by inserting “and” at the  
24                end;

25                (B) by striking clause (ii); and

1 (C) by redesignating clause (iii) as clause  
2 (ii).

3 **SEC. 3. NATIONAL EDUCATION CAMPAIGN.**

4 (a) IN GENERAL.—The Secretary of Health and  
5 Human Services, acting through the Assistant Secretary  
6 for Mental Health and Substance Use, shall conduct a na-  
7 tional campaign to educate practitioners with respect to  
8 the elimination of the separate registration requirement  
9 under section 303(g) of the Controlled Substances Act (21  
10 U.S.C. 823(g)), as in effect on the day before the date  
11 of enactment of this Act, for dispensing narcotic drugs in  
12 schedule III, IV, and V for maintenance or detoxification  
13 treatment.

14 (b) REQUIRED COMPONENTS.—The national edu-  
15 cation campaign under subsection (a) shall—

16 (1) encourage practitioners to integrate sub-  
17 stance use treatment into their practices; and

18 (2) include education on publicly available edu-  
19 cational resources and training modules that can as-  
20 sist practitioners in treating patients with a sub-  
21 stance use disorder.

1 **SEC. 4. COMMUNITY HEALTH AIDES AND COMMUNITY**  
2 **HEALTH PRACTITIONERS.**

3 (a) PRACTICE OF TELEMEDICINE.—Section 102 of  
4 the Controlled Substances Act (21 U.S.C. 802) is amend-  
5 ed—

6 (1) in paragraph (54)(A), by striking clause (i)  
7 and inserting the following:

8 “(i) while the patient is—

9 “(I) being treated by, and physically  
10 located in, a hospital or clinic registered  
11 under section 303(f); or

12 “(II) for purposes of section 302(h),  
13 being treated by a community health aide  
14 or community health practitioner; and”;

15 (2) by redesignating paragraph (58) as para-  
16 graph (59);

17 (3) by redesignating the second paragraph des-  
18 igned as paragraph (57) (relating to the definition  
19 of “serious drug felony”) as paragraph (58);

20 (4) by moving paragraphs (57), (58) (as so re-  
21 designated), and (59) (as so redesignated) 2 ems to  
22 the left; and

23 (5) by adding at the end the following:

24 “(60) The terms ‘community health aide’ and ‘com-  
25 munity health practitioner’ have the meanings within the

1 meaning of section 119 of the Indian Health Care Im-  
2 provement Act (25 U.S.C. 1616l).”.

3 (b) DISPENSATION OF NARCOTIC DRUGS IN SCHED-  
4 ULE III, IV, OR V.—Section 302 of the Controlled Sub-  
5 stances Act (21 U.S.C. 822) is amended by adding at the  
6 end the following:

7 “(h) DISPENSATION OF NARCOTIC DRUGS IN SCHED-  
8 ULE III, IV, OR V BY CERTAIN PRACTITIONERS.—

9 “(1) IN GENERAL.—Notwithstanding subsection  
10 (a)(2), a community health aide or community  
11 health practitioner may dispense a narcotic drug in  
12 schedule III, IV, or V, such as buprenorphine, or a  
13 combination of such drugs, to an individual for  
14 maintenance treatment or detoxification treatment  
15 (or both) without being registered under this title if  
16 the drug is prescribed by a practitioner through the  
17 practice of telemedicine.

18 “(2) PREEMPTION.—Notwithstanding section  
19 708, a State may not require a community health  
20 aide or community health practitioner to be licensed  
21 by the State in order to dispense narcotic drugs in  
22 accordance with paragraph (1) of this subsection.”.

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