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(Original Signature of Member)

117TH CONGRESS  
1ST SESSION

**H. R.** \_\_\_\_\_

To amend the Public Health Service Act to authorize grants to eligible entities to develop strategic response plans with respect to the opioid crisis, and to require health care practitioners prescribing an opioid for certain patients to also prescribe an opioid overdose reversal drug, and for other purposes.

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IN THE HOUSE OF REPRESENTATIVES

Mr. HILL introduced the following bill; which was referred to the Committee  
on \_\_\_\_\_

\_\_\_\_\_  
**A BILL**

To amend the Public Health Service Act to authorize grants to eligible entities to develop strategic response plans with respect to the opioid crisis, and to require health care practitioners prescribing an opioid for certain patients to also prescribe an opioid overdose reversal drug, 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,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Preventing Overdoses  
3 and Saving Lives Act of 2021”.

4 **SEC. 2. STATE DEMONSTRATION GRANTS FOR COM-**  
5 **PREHENSIVE OPIOID ABUSE DATA.**

6 Title III of the Public Health Service Act (42 U.S.C.  
7 241 et seq.) is amended by inserting after section 317U  
8 of such Act (42 U.S.C. 247b–23) the following:

9 **“SEC. 317V. STATE DEMONSTRATION GRANTS FOR COM-**  
10 **PREHENSIVE OPIOID ABUSE DATA.**

11 “(a) IN GENERAL.—The Secretary, in conjunction  
12 with the Director of the Centers for Disease Control and  
13 Prevention, may award grants to eligible entities—

14 “(1) to conduct research and develop a strategic  
15 response plan with respect to the opioid crisis; and

16 “(2) to establish and implement a co-pre-  
17 scribing program.

18 “(b) AMOUNT OF GRANTS.—

19 “(1) IN GENERAL.—The Secretary shall deter-  
20 mine the amount of each grant awarded under this  
21 section on an annual basis. In allocating such  
22 amounts across grantees for a fiscal year, the Sec-  
23 retary shall award—

24 “(A) a minimum amount to each grantee  
25 in accordance with paragraph (2); and

1                   “(B) an additional amount to each grantee  
2                   in accordance with paragraph (3).

3                   “(2) MINIMUM AMOUNT.—The Secretary  
4 shall—

5                   “(A) determine the basis for determining  
6                   the minimum amount of a grant under para-  
7                   graph (1)(A); and

8                   “(B) apply such basis consistently across  
9                   all grantees under this section.

10                  “(3) ADDITIONAL AMOUNT.—In allocating addi-  
11                  tional amounts across all grantees under this section  
12                  for a fiscal year, the Secretary shall give priority in  
13                  setting such amounts to grantees with the highest  
14                  opioid dispensing rates as determined by the Centers  
15                  for Disease Control and Prevention.

16                  “(c) PRIORITY IN SELECTION.—In selecting grantees  
17                  under this section, the Secretary shall give priority to eligi-  
18                  ble entities with the highest opioid dispensing rates as de-  
19                  termined by the Centers for Disease Control and Preven-  
20                  tion.

21                  “(d) ALLOCATION OF FUNDS BY A GRANTEE.—A  
22                  grantee under this section shall allocate the funds received  
23                  through the grant as follows:

24                         “(1) Not more than 80 percent of the funds re-  
25                         ceived through the grant shall be used to conduct re-

1 search and develop a strategic plan in accordance  
2 with subsection (e).

3 “(2) At least 20 percent of the grant shall be  
4 used by the grantee to administer a co-prescribing  
5 program in accordance with subsection (f).

6 “(e) RESEARCH; STRATEGIC PLAN.—

7 “(1) IN GENERAL.—Subject to subsection (d), a  
8 grantee under this section shall use the grant  
9 funds—

10 “(A) to conduct research on the impacts of  
11 the opioid crisis within the jurisdiction of the  
12 grantee; and

13 “(B) to develop a strategic plan to respond  
14 to the opioid crisis within such jurisdiction.

15 “(2) STRATEGIC PLAN CONTENTS.—A strategic  
16 plan required by paragraph (1)(B) shall include  
17 plans for—

18 “(A) increasing public awareness about the  
19 opioid crisis within the jurisdiction of the grant-  
20 ee;

21 “(B) full-spectrum prevention within such  
22 jurisdiction;

23 “(C) intervention within such jurisdiction;

24 “(D) treatment and recovery within such  
25 jurisdiction; and

1                   “(E) coordinating with law enforcement  
2                   within such jurisdiction.

3                   “(f) CO-PRESCRIBING PROGRAM.—

4                   “(1) IN GENERAL.—Subject to subsection (d), a  
5                   grantee under this section shall use funds received  
6                   through the grant to carry out a co-prescribing pro-  
7                   gram under which the grantee requires—

8                   “(A) health care practitioners in the juris-  
9                   diction of the grantee who prescribe an opioid  
10                  for any patient to also prescribe an opioid over-  
11                  dose reversal drug for such patient if—

12                  “(i) the opioid dosage prescribed is  
13                  equal to or in excess of 50 morphine milli-  
14                  gram equivalents per day;

15                  “(ii) the practitioner prescribes a  
16                  benzodiazepine for the patient or knows or  
17                  reasonably should know a benzodiazepine  
18                  has been prescribed for the patient in the  
19                  past;

20                  “(iii) the practitioner prescribes medi-  
21                  cation-assisted treatment for the patient or  
22                  knows or reasonably should know medica-  
23                  tion assisted treatment has been prescribed  
24                  for the patient in the past; or

1                   “(iv) the practitioner knows or rea-  
2                   sonably should know the patient has a his-  
3                   tory of substance use disorder;

4                   “(B) such health care practitioners to com-  
5                   plete continuing education on opioid pre-  
6                   scribing; and

7                   “(C) coroners in the jurisdiction of the  
8                   grantee to complete continuing education on  
9                   recognizing fatalities attributable to an opioid  
10                  overdose.

11                  “(2) WAIVER.—If the laws, regulations, or or-  
12                  ders of an applicant for a grant under this section  
13                  conflict in any respect with the requirements of sub-  
14                  paragraph (A), (B), or (C) of paragraph (1), the  
15                  Secretary shall waive such requirements to the ex-  
16                  tent necessary to allow the grantee to carry out a co-  
17                  prescribing program under this section.

18                  “(g) SUPPLEMENT, NOT SUPPLANT.—Grant funds  
19                  under this section shall be used to supplement, not sup-  
20                  plant, funding from other sources for the activities funded  
21                  through the grant.

22                  “(h) APPLICATION.—To seek a grant under this sec-  
23                  tion, an eligible entity shall submit an application at such  
24                  time, in such manner, and containing such information  
25                  and assurances as the Secretary may require.

1           “(i) REPORTING.—Not later than the end of each of  
2 fiscal years 2024 and 2026, a grantee under this section  
3 shall submit to the Secretary, the Director of the Centers  
4 for Disease Control and Prevention, and the appropriate  
5 congressional committees, and make publicly available, a  
6 report on the activities funded through the grant for each  
7 fiscal year covered by the report, including—

8                   “(1) the allocation of funds for activities under  
9 subsection (e) versus activities under subsection (f);

10                   “(2) a description of the research conducted by  
11 the grantee under subsection (e)(1)(A), including the  
12 results of such research;

13                   “(3) an up-to-date version of the strategic plan  
14 developed under subsection (e)(1)(B); and

15                   “(4) a description of the co-prescribing program  
16 under subsection (f), including an analysis of the ef-  
17 fectiveness of the program.

18           “(j) DEFINITIONS.—In this section:

19                   “(1) APPROPRIATE CONGRESSIONAL COMMIT-  
20 TEES.—The term ‘appropriate congressional com-  
21 mittees’ means the Committee on Energy and Com-  
22 merce of the House of Representatives and the Com-  
23 mittee on Housing, Education, Labor, and Pensions  
24 of the Senate.

1           “(2) ELIGIBLE ENTITY.—The term ‘eligible en-  
2           tity’ means any State, any Indian Tribe, the District  
3           of Columbia, or any territory of the United States.

4           “(3) INDIAN TRIBE.—The term ‘Indian Tribe’  
5           has the meaning given to such term in section 4 of  
6           the Indian Self-Determination and Education Assist-  
7           ance Act.

8           “(4) OPIOID OVERDOSE REVERSAL DRUG.—The  
9           term ‘opioid overdose reversal drug’ means—

10                   “(A) naloxone; or

11                   “(B) any other emergency opioid antago-  
12                   nist approved by the Food and Drug Adminis-  
13                   tration to treat an opioid overdose.

14           “(k) AUTHORIZATION OF APPROPRIATIONS.—To  
15           carry out this section, there are authorized to be appro-  
16           priated such sums as may be necessary for each of fiscal  
17           years 2022 through 2026.”.