

117TH CONGRESS  
2D SESSION

# H. R. 7681

To amend the Public Health Service Act to reauthorize certain programs to reduce opioid overdose deaths, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 6, 2022

Mr. HILL (for himself and Mrs. DINGELL) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend the Public Health Service Act to reauthorize certain programs to reduce opioid overdose deaths, 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 “Preventing Overdoses  
5 and Saving Lives Act 2.0”.

6 **SEC. 2. REAUTHORIZATION OF GRANTS FOR REDUCING**  
7 **OVERDOSE DEATHS.**

8 (a) GRANTS.—

9 (1) REPEAL OF MAXIMUM GRANT AMOUNT.—

10 Paragraph (2) of section 544(a) of the Public

1 Health Service Act (42 U.S.C. 290dd–3(a)) is here-  
2 by repealed.

3 (2) ELIGIBLE ENTITY; SUBGRANTS.—Section  
4 544(a) of the Public Health Service Act (42 U.S.C.  
5 290dd–3(a)) is amended by striking paragraph (3)  
6 and inserting the following:

7 “(2) ELIGIBLE ENTITY.—For purposes of this  
8 section, the term ‘eligible entity’ means a State, Ter-  
9 ritory, locality, Indian Tribe, Tribal organization, or  
10 Urban Indian organization.

11 “(3) SUBGRANTS.—For the purposes for which  
12 a grant is awarded under this section, the eligible  
13 entity receiving the grant may award subgrants to a  
14 Federally qualified health center (as defined in sec-  
15 tion 1861(aa) of the Social Security Act), an opioid  
16 treatment program (as defined in section 8.2 of title  
17 42, Code of Federal Regulations (or any successor  
18 regulations)), any practitioner dispensing narcotic  
19 drugs pursuant to section 303(g) of the Controlled  
20 Substances Act, or any nonprofit organization that  
21 the Secretary deems appropriate.”.

22 (3) PRESCRIBING.—Section 544(a)(4) of the  
23 Public Health Service Act (42 U.S.C. 290dd–  
24 3(a)(4)) is amended—

1 (A) in subparagraph (A), by inserting “,  
2 including patients prescribed with both an  
3 opioid and a benzodiazepine” before the semi-  
4 colon at the end; and

5 (B) in subparagraph (D), by striking  
6 “drug overdose” and inserting “substance over-  
7 dose”.

8 (4) USE OF FUNDS.—Paragraph (5) of section  
9 544(c) of the Public Health Service Act (42 U.S.C.  
10 290dd–3(c)) is amended to read as follows:

11 “(5) To establish protocols to connect patients  
12 who have experienced an overdose with appropriate  
13 treatment, including overdose reversal medications,  
14 medication assisted treatment, and appropriate  
15 counseling and behavioral therapies.”.

16 (5) WAIVER.—Section 544 of the Public Health  
17 Service Act (42 U.S.C. 290dd–3) is amended—

18 (A) by redesignating subsections (d)  
19 through (f) as subsections (e) through (g), re-  
20 spectively;

21 (B) in subsection (f), as so redesignated,  
22 by striking “subsection (d)” and inserting “sub-  
23 section (e)”;

24 (C) by inserting after subsection (c) the  
25 following:

1       “(d) WAIVER.—If the laws, regulations, or orders of  
2 a grantee under this section conflict in any respect with  
3 the requirements of the grant, the Secretary shall waive  
4 such requirements to the extent necessary to allow the  
5 grantee to carry out the activities described in subsection  
6 (c).”.

7           (6) AUTHORIZATION OF APPROPRIATIONS.—  
8 Section 544(g) of the Public Health Service Act (42  
9 U.S.C. 290dd–3), as redesignated, is amended by  
10 striking “fiscal years 2017 through 2021” and in-  
11 serting “fiscal years 2023 through 2027”.

12           (7) TECHNICAL AMENDMENT.—Section 544 of  
13 the Public Health Service Act (42 U.S.C. 290dd–3),  
14 as amended, is further amended by striking “ap-  
15 proved or cleared” each place it appears and insert-  
16 ing “approved, cleared, or otherwise authorized”.

17           (b) IMPROVING ACCESS TO OVERDOSE TREAT-  
18 MENT.—Paragraph (1) of section 107(b) of the Com-  
19 prehensive Addiction and Recovery Act of 2016 (Public  
20 Law 114–198) is amended—

21           (1) in the matter preceding subparagraph (A),  
22 by striking “Not later than 180 days after the date  
23 of enactment of this Act;”;

24           (2) by amending subparagraph (A) to read as  
25 follows:

1           “(A) The Secretary of Health and Human  
2           Services may provide information to States,  
3           Territories, localities, Indian Tribes, Tribal or-  
4           ganizations, and Urban Indian organizations on  
5           best practices for prescribing or co-prescribing  
6           a drug or device approved, cleared, or otherwise  
7           authorized under the Federal Food, Drug, and  
8           Cosmetic Act (21 U.S.C. 301 et seq.) for emer-  
9           gency treatment of known or suspected opioid  
10          overdose, including for patients receiving chron-  
11          ic opioid therapy and patients being treated for  
12          opioid use disorders.”; and

13          (3) in subparagraphs (B) and (C), by striking  
14          “approved or cleared” and inserting “approved,  
15          cleared, or otherwise authorized”.

16 **SEC. 3. REAUTHORIZATION OF OPIOID OVERDOSE REVER-**  
17 **SAL MEDICATION ACCESS, EDUCATION, AND**  
18 **CO-PRESCRIBING GRANT PROGRAMS.**

19          (a) GRANTS.—Section 545 of the Public Health Serv-  
20          ice Act (42 U.S.C. 290ee) is amended—

21                 (1) in the section heading, by striking “**AC-**  
22                 **CESS, AND EDUCATION GRANT PROGRAMS**” and  
23                 inserting “**ACCESS, EDUCATION, AND CO-PRE-**  
24                 **SCRIBING GRANT PROGRAMS**”;

1           (2) in the heading of subsection (a), by striking  
2           “GRANTS TO STATES” and inserting “GRANTS”;

3           (3) in subsection (a), by striking “shall make  
4           grants to States” and inserting “shall make grants  
5           to States, Territories, localities, Indian Tribes, Trib-  
6           al organizations, and Urban Indian organizations”;

7           (4) in subsection (a)(1), by striking “implement  
8           strategies for pharmacists to dispense a drug or de-  
9           vice” and inserting “implement strategies that in-  
10          crease access to drugs or devices”;

11          (5) by redesignating paragraphs (3) and (4) as  
12          paragraphs (4) and (5), respectively; and

13          (6) by inserting after paragraph (2) the fol-  
14          lowing:

15                 “(3) encourage health care providers to co-pre-  
16                 scribe, as appropriate, drugs or devices approved,  
17                 cleared, or otherwise authorized under the Federal  
18                 Food, Drug, and Cosmetic Act for emergency treat-  
19                 ment of known or suspected opioid overdose;”.

20          (b) GRANT PERIOD.—Section 545(d)(2) of the Public  
21          Health Service Act (42 U.S.C. 290ee(d)(2)) is amended  
22          by striking “3 years” and inserting “5 years”.

23          (c) LIMITATION.—Paragraph (3) of section 545(d) of  
24          the Public Health Service Act (42 U.S.C. 290ee(d)) is  
25          amended to read as follows:

1           “(3) LIMITATIONS.—A State—

2                   “(A) may use not more than 10 percent of  
3 a grant under this section for educating the  
4 public pursuant to subsection (a)(5); and

5                   “(B) shall use at least 20 percent of a  
6 grant under this section to offset cost-sharing  
7 for distribution and dispensing of drugs or de-  
8 vices approved, cleared, or otherwise authorized  
9 under the Federal Food, Drug, and Cosmetic  
10 Act for emergency treatment of known or sus-  
11 pected opioid overdose.”.

12           (d) WAIVER.—Section 545 of the Public Health Serv-  
13 ice Act (42 U.S.C. 290ee) is amended—

14                   (1) by redesignating subsections (f) through (h)  
15 as subsections (g) through (i), respectively; and

16                   (2) by inserting after subsection (e) the fol-  
17 lowing:

18                   “(f) WAIVER.—If the laws, regulations, or orders of  
19 an applicant for a grantee under this section conflict in  
20 any respect with the requirements of the grant, the Sec-  
21 retary shall waive such requirements to the extent nec-  
22 essary to allow the grantee to carry out the activities de-  
23 scribed in subsection (a).”.

24           (e) AUTHORIZATION OF APPROPRIATIONS.—Section  
25 545(i)(1) of the Public Health Service Act, as redesi-

1 nated, is amended by striking “fiscal years 2017 through  
2 2019” and inserting “fiscal years 2023 through 2027”.

3 (f) TECHNICAL AMENDMENT.—Section 545 of the  
4 Public Health Service Act (42 U.S.C. 290ee), as amended,  
5 is further amended by striking “approved or cleared” each  
6 place it appears and inserting “approved, cleared, or oth-  
7 erwise authorized”.

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