

115TH CONGRESS
1ST SESSION

H. R. 3832

To direct the Secretary of Veterans Affairs to enter into a memorandum of understanding with the executive director of a national network of State-based prescription monitoring programs under which Department of Veterans Affairs health care providers shall query such network, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 26, 2017

Mr. DUNN (for himself, Ms. TENNEY, Mr. POLIQUIN, Mr. ARRINGTON, and Mr. TONKO) introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to enter into a memorandum of understanding with the executive director of a national network of State-based prescription monitoring programs under which Department of Veterans Affairs health care providers shall query such network, 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 “Veterans Opioid Abuse
5 Prevention Act”.

1 **SEC. 2. DEPARTMENT OF VETERANS AFFAIRS PARTICIPA-**
2 **TION IN NATIONAL NETWORK OF STATE-**
3 **BASED PRESCRIPTION DRUG MONITORING**
4 **PROGRAMS.**

5 (a) MEMORANDUM OF UNDERSTANDING.—The Sec-
6 retary of Veterans Affairs shall enter into a memorandum
7 of understanding with the executive director of a national
8 network of State-based prescription drug monitoring pro-
9 grams under which Department of Veterans Affairs health
10 care providers shall query such network to support the
11 safe and effective prescribing of controlled substances to
12 covered patients. Under such memorandum of under-
13 standing—

14 (1) Department health care providers practicing
15 in a State that participates in such network shall
16 query such network in accordance with the agree-
17 ment between that State’s prescription drug moni-
18 toring program and such network in accordance with
19 applicable Veterans Health Administration policies;
20 and

21 (2) Department health care providers practicing
22 in States that do not participate in such network
23 shall query such network through the drug moni-
24 toring program of the participating State that is in
25 closest proximity to the State where the provider is
26 practicing.

1 (b) COVERED PATIENTS.—For purposes of this sec-
2 tion, a covered patient is a patient who—

3 (1) receives a prescription for a controlled sub-
4 stance for a period of 90 days or longer; and

5 (2) is not receiving palliative care or enrolled in
6 hospice care.

7 (c) EXCEPTION.—The memorandum of under-
8 standing under subsection (a) shall provide for an excep-
9 tion to ensure that Department health care providers are
10 not obligated to comply with the provisions of the memo-
11 randum of understanding if such provisions are in viola-
12 tions of applicable State law.

13 (d) DEFINITIONS.—In this section:

14 (1) The term “controlled substance” has the
15 meaning given such term in paragraph (6) of section
16 102 of the Controlled Substances Act (21 U.S.C.
17 802(6)).

18 (2) The term “national network of State-based
19 prescription monitoring programs” means an inter-
20 connected nationwide system that facilitates the
21 transfer of State prescription drug monitoring pro-
22 gram data across State lines.

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