^{115TH CONGRESS} **H. R. 5531**

To provide for a comprehensive, multifaceted approach to preventing and treating opioid addiction.

IN THE HOUSE OF REPRESENTATIVES

April 17, 2018

Mr. BUCHANAN (for himself and Mrs. MURPHY of Florida) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, the Budget, Veterans' Affairs, Oversight and Government Reform, and 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

A BILL

To provide for a comprehensive, multifaceted approach to preventing and treating opioid addiction.

- 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; TABLE OF CONTENTS.

- 4 (a) SHORT TITLE.—This Act may be cited as the
- 5 "Opioid Emergency Response Act".
- 6 (b) TABLE OF CONTENTS.—The table of contents for
- 7 this Act is as follows:

Sec. 1. Short title; table of contents. Sec. 2. Alternatives to opioids prescribing.

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- Sec. 3. Opioids and STOP Pain Initiative.
- Sec. 4. Veteran over-medication prevention.
- Sec. 5. Amendment relating to the account for the State response to the opioid abuse crisis.
- Sec. 6. Mental health access improvement.
- Sec. 7. Synthetics Trafficking and Overdose Prevention.
- Sec. 8. Stop the Importation and Trafficking of Synthetic Analogues.

1 SEC. 2. ALTERNATIVES TO OPIOIDS PRESCRIBING.

2 (a) ESTABLISHMENT.—Beginning not later than one 3 year after the date of the enactment of this Act, the Sec-4 retary of Health and Human Services (in this Act referred to as the "Secretary") shall carry out a 5-year demonstra-5 tion project under which payment shall be made under the 6 7 hospital outpatient prospective payment system under part 8 B of title XVIII of the Social Security Act (42 U.S.C. 9 1395j et seq.) to participating hospitals for items and 10 services furnished as alternatives to opioid medications to individuals enrolled under such part to treat conditions 11 designated under subsection (c)(1) for purposes of evalu-12 13 ating the benefits of using, instead of opioid medications, 14 such alternatives to treat in emergency departments such 15 symptoms and conditions.

- 16 (b) Emergency Departments.—
- 17 (1) SELECTION.—The Secretary shall select
 18 from hospitals with emergency departments volun19 tarily submitting applications under paragraph (4),
 20 not fewer than 30 hospitals with emergency depart21 ments, and not more than 50 hospitals with emer-

1	gency departments, for participation in the dem-
2	onstration project.
3	(2) DIVERSITY.—In selecting hospitals with
4	emergency departments, the Secretary shall ensure
5	such hospitals and emergency departments are di-
6	verse in geography and size.
7	(3) VOLUNTARY PARTICIPATION.—Participation
8	in the demonstration project under this section shall
9	be on a voluntary basis.
10	(4) Applications.—
11	(A) IN GENERAL.—To participate in the
12	demonstration project, a hospital with an emer-
13	gency department shall submit to the Secretary
14	an application at such time, in such manner,
15	and containing such information (in addition to
16	the written commitment described in subpara-
17	graph (B)) as specified by the Secretary. The
18	Secretary shall take such measures as is nec-
19	essary to make available such application form
20	to potential participants no later than 180 days
21	after the date of the enactment of this Act.
22	(B) INFORMATION REQUIRED.—Each ap-
23	plication submitted by a hospital under sub-
24	paragraph (A) shall include a binding written
25	commitment to participate in the demonstration

1 project for the duration of the project signed by 2 the Chief Executive Officer of the hospital, the 3 physician medical director of the emergency de-4 partment of the hospital, the nursing director of 5 the emergency department of the hospital, and 6 the pharmacy director of the emergency depart-7 ment of the hospital. 8 (c)ELEMENTS OF DEMONSTRATION PROJECT.-Under the demonstration project, the following shall 9 10 apply: 11 (1) The Secretary shall designate no fewer than 12 five conditions or sets of symptoms that will be mon-13 itored during the demonstration project. 14 (2) The performance during each year of the 15 demonstration project, with respect to such condi-16 tions designated under paragraph (1), of all emer-17 gency departments of hospitals participating in the 18 demonstration project will be measured against the 19 performance of such emergency departments during 20 a base year, which shall represent the most recent 21 set of full year data available before the first date 22 of the demonstration project. 23 (3) The Secretary shall provide hospitals par-24 ticipating in the demonstration project with a de-

scription of clearly defined treatments that are con-

sidered alternatives to opioids to be applied for pur poses of subsection (a).

3 (d) INCENTIVE PAYMENT.—Under the demonstration 4 project, the Secretary shall create a payment structure 5 under which hospitals participating in the demonstration project that increase the use of alternatives to opioids and 6 7 decrease the use of opioids may receive a shared savings 8 bonus in addition to what would otherwise be made for 9 items and services furnished under subsection (a). The 10 amount of such shared savings shall be based on the difference between readmission rates for individuals treated 11 12 with an alternative to opioids at the emergency depart-13 ment of the participating hospital and the average rate of readmissions for individuals treated with opioids and 14 15 discharged from a representative group of emergency departments of hospitals not participating in the demonstra-16 tion project in the same region as the participating hos-17 pital over a period of five years. 18

(e) CLARIFICATION.—Nothing under this section
shall prevent a health care provider from prescribing an
opioid if an opioid is a medically necessary treatment.

22 (f) Reports to Congress.—

(1) INITIAL REPORT.—Not later than 180 days
after the date of the enactment of this Act, the Sec-

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3 (A) the application form described in sub4 section (b)(4)(A) that is to be made available to
5 potential participants; and

6 (B) a progress report with respect to des-7 ignating the conditions under subsection (c)(1)8 and establishing the description of clearly de-9 fined treatments described in subsection (c)(3). 10 (2) PERIODIC DEMONSTRATION REPORTS.—Be-11 ginning after the first year of the demonstration 12 project and annually thereafter for each year of the 13 demonstration project and not later than one year 14 after the completion of the demonstration, the Sec-15 retary shall submit to Congress a report that in-16 cludes the following data for each hospital partici-17 pating under the demonstration project:

18 (A) With respect to each condition or set
19 of symptom designated under subsection (c)(1),
20 the number of individuals treated.

(B) With respect to each such condition,
the number of individuals treated only with an
alternative to opioids.

24 (C) With respect to each such condition,25 the number of individuals treated first with an

1	alternative to opioids, followed by an opioid in
2	the same visit.
3	(D) With respect to each such condition,
4	the number of individuals treated only with an
5	opioid.
6	(E) With respect to each individual de-
7	scribed in subparagraph (A) treated for such a
8	condition or set of symptoms, whether or not
9	the individual involved returned to the emer-
10	gency department of the hospital or an emer-
11	gency department of a different hospital for the
12	same condition or symptoms.
13	(F) The difference in cost between treating
14	an individual with an alternative to opioid
15	versus an opioid.
16	(G) Any additional information the Sec-
17	retary determines necessary.
18	SEC. 3. OPIOIDS AND STOP PAIN INITIATIVE.
19	(a) ESTABLISHMENT.—There is established an
20	Opioids and STOP Pain Initiative, to be administered by
21	the Director of the National Institutes of Health, in co-
22	ordination with other agencies, as appropriate, which shall
23	include efforts to support research on the following:
24	(1) Section 108 of the Comprehensive Addiction
25	and Recovery Act of 2016 (42 U.S.C. 284q-1),

1	known as the STOP Pain Act, which directs the Na-
2	tional Institutes of Health to intensify and coordi-
3	nate fundamental, translational, and clinical re-
4	search with respect to—
5	(A) the understanding of pain;
6	(B) the discovery and development of
7	therapies for chronic pain; and
8	(C) the development of alternatives to
9	opioids for effective pain treatments.
10	(2) Developing improved options and evidence
11	for medication-assisted treatment.
12	(3) Developing improved options and evidence
13	for opioid overdose reversal treatments.
14	(4) The Federal Pain Research Strategy, in-
15	cluding research that focuses on—
16	(A) novel drugs, non-addictive, and non-
17	pharmacological treatments for pain;
18	(B) screening tools and outcome measure
19	for assessments across the continuum of pain;
20	(C) national registries, datasets, and re-
21	search networks;
22	(D) effective models of care delivery for
23	pain management; and
24	(E) precision medicine methodology to pre-
25	vent and treat pain.

1	(5) The components of the Department of
2	Health and Human Services five-point strategy to
3	address the opioid crisis that states: "Providing sup-
4	port for cutting edge research on pain and addic-
5	tion".
6	(6) The pain therapy screening program estab-
7	lished under subsection (c).
8	(7) Other elements that the Secretary of Health
9	and Human Services may designate, in consultation
10	with the Director of the National Institutes of
11	Health.
12	(b) Funding for the Opioids and STOP Pain
13	INITIATIVE.—
14	(1) IN GENERAL.—There is authorized to be
15	appropriated, and there is appropriated,
15 16	
	appropriated, and there is appropriated,
16	appropriated, and there is appropriated, \$500,000,000, to be used during the 5-fiscal-year
16 17	appropriated, and there is appropriated, \$500,000,000, to be used during the 5-fiscal-year period beginning in the fiscal year in which such
16 17 18	appropriated, and there is appropriated, \$500,000,000, to be used during the 5-fiscal-year period beginning in the fiscal year in which such funds are appropriated, to the National Institutes of
16 17 18 19	appropriated, and there is appropriated, \$500,000,000, to be used during the 5-fiscal-year period beginning in the fiscal year in which such funds are appropriated, to the National Institutes of Health Innovation Account to be used to administer
16 17 18 19 20	appropriated, and there is appropriated, \$500,000,000, to be used during the 5-fiscal-year period beginning in the fiscal year in which such funds are appropriated, to the National Institutes of Health Innovation Account to be used to administer the Opioids and STOP Pain Initiative established
 16 17 18 19 20 21 	appropriated, and there is appropriated, \$500,000,000, to be used during the 5-fiscal-year period beginning in the fiscal year in which such funds are appropriated, to the National Institutes of Health Innovation Account to be used to administer the Opioids and STOP Pain Initiative established under subsection (a).
 16 17 18 19 20 21 22 	appropriated, and there is appropriated, \$500,000,000, to be used during the 5-fiscal-year period beginning in the fiscal year in which such funds are appropriated, to the National Institutes of Health Innovation Account to be used to administer the Opioids and STOP Pain Initiative established under subsection (a). (2) EMERGENCY SPENDING.—

1	the Statutory Pay-As-You-Go Act of 2010 (2
2	U.S.C. 933(g)).
3	(B) DESIGNATION IN THE SENATE.—In
4	the Senate, amounts appropriated under sub-
5	section (a) are designated as an emergency re-
6	quirement pursuant to section 403(a) of S.
7	Con. Res. 13 (111th Congress), the concurrent
8	resolution on the budget for fiscal year 2010.
9	(c) PAIN THERAPY SCREENING PROGRAM.—
10	(1) IN GENERAL.—The Secretary of Health and
11	Human Services (referred to in this section as the
12	"Secretary") shall carry out through the National
13	Institutes of Health a program to be known as the
14	"Pain Therapy Screening Program" that focuses on
15	the development of pain therapeutics.
16	(2) GRANTS.—The Secretary shall award
17	grants under the program under paragraph (1) to
18	eligible public and private nonprofit entities to sup-
19	port the development of new pre-clinical models for
20	pain disorders, and the application of these models
21	in drug, device, or other therapy screening.
22	(3) MODEL.—The program under this section
23	shall be modeled after the Epilepsy Therapy Screen-
24	ing Program carried out by the National Institute of

25 Neurological Disorders and Stroke.

1 FEES.—The Secretary of Health and (4)2 Human Services may assess reasonable fees on pri-3 vate pharmaceutical or medical device industry enti-4 ties that utilize the program under this section to 5 screen proprietary molecular compounds and devices. 6 Such fees shall be paid to the Foundation for the 7 National Institutes of Health and transferred to the 8 NIH Innovation Account to be used for the Opioids 9 and STOP Pain Initiative established under sub-10 section (a).

(5) FUNDING.—The Director of the National
Institutes of Health shall determine the amount, and
allocate, funds from the amount appropriated under
subsection (b), to carry out this section.

15 (d) FUNDING PROVISIONS.—

16 (1) SUPPLEMENT NOT SUPPLANT.—Amounts
17 appropriated in this section (including the amend18 ments made by this section) shall be used to supple19 ment, not supplant, current funding for pain and
20 opioid research at the National Institutes of Health.

(2) ACCEPTANCE OF DONATIONS.—Notwithstanding section 1342 of title 31, United States
Code, the Secretary of Health and Human Services
may accept donations (including from the pharmaceutical and medical device industries) to be used to

1	assist in carrying out programs and activities under
2	this section (and the amendments made by this sec-
3	tion). Such donations shall be paid to the Founda-
4	tion for the National Institutes of Health and trans-
5	ferred to the NIH Innovation Account to be used for
6	the Opioids and STOP Pain Initiative established
7	under subsection (a).
8	(3) Inclusion of contribution amounts in
9	BASIC RESEARCH FOR PURPOSES OF RESEARCH
10	CREDIT.—
11	(A) IN GENERAL.—Paragraph (6) of sec-
12	tion 41(e) of the Internal Revenue Code of
13	1986 is amended by adding at the end the fol-
14	lowing new subparagraph:
15	"(E) Opioids and stop pain initia-
16	TIVE.—The National Institutes of Health, if the
17	payment is made in support of the Opioids and
18	STOP Pain Initiative, as established by the
19	Opioids and STOP Pain Initiative Act.".
20	(B) EFFECTIVE DATE.—The amendments
21	made by this subsection shall apply to taxable
22	years beginning after the date of the enactment
23	of this Act.
24	(e) AUTHORITY.—Notwithstanding any other provi-
25	sion of the law, the Director of the National Institutes

of Health may use funds available under subsection (b)
 to enter into transactions (other than contracts, coopera tive agreements, or grants) to carry out research identified
 pursuant to the Opioids and STOP Pain Initiative estab lished under subsection (a).

6 (f) Reports.—

7 (1) ANNUAL REPORTS.—Not later than October 8 1 of each of fiscal years 2019 through 2026, the Di-9 rector of the National Institutes of Health shall sub-10 mit to the Committee on Health, Education, Labor, 11 and Pensions and the Committee on Appropriations 12 of the Senate and the Committee on Energy and 13 Commerce and the Committee on Appropriations of 14 the House of Representatives, a report that in-15 cludes—

16 (A) the amount obligated or expended in
17 the fiscal year prior to the fiscal year in which
18 the report is being submitted for each program
19 or activity described in this section (or an
20 amendment made by this section);

(B) a description of all such programs or
activities carried out using funds provided
under this section (or amendments); and

24 (C) a description of how such programs or25 activities are advancing public health, including

1	the impact on treating pain and addressing
2	opioid misuse in the United States.
3	(2) Additional reports.—At the request of
4	the Committee on Health, Education, Labor, and
5	Pensions or the Committee on Appropriations of the
6	Senate, or the Committee on Energy and Commerce
7	or the Committee on Appropriations of the House of
8	Representatives, the Director of the National Insti-
9	tutes of Health shall provide to the relevant com-
10	mittee an update in the form of testimony and addi-
11	tional reports concerning the allocation of funding
12	under this section (or the amendments made by this
13	section) or the description of the programs and ac-
14	tivities carried out with such funding.
15	SEC. 4. VETERAN OVER-MEDICATION PREVENTION.
16	(a) REVIEW REQUIRED.—
17	(1) IN GENERAL.—Not later than 90 days after
18	the date of the enactment of this Act, the Secretary
19	of Veterans Affairs shall seek to enter into an agree-
20	ment with the National Academies of Sciences, En-
21	gineering, and Medicine under which the National
22	Academies shall conduct a review of the deaths of all
23	covered veterans who died by suicide during the five-
24	year period ending on the date of the enactment of
25	this Act, regardless of whether information relating

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1	to such deaths has been reported by the Centers for
2	Disease Control and Prevention.
3	(2) Elements.—The review required by para-
4	graph (1) shall include the following:
5	(A) The total number of covered veterans
6	who died by suicide during the five-year period
7	ending on the date of the enactment of this Act.
8	(B) The total number of covered veterans
9	who died by a violent death during such five-
10	year period.
11	(C) The total number of covered veterans
12	who died by an accidental death during such
13	five-year period.
14	(D) A description of each covered veteran
15	described in subparagraphs (A) through (C), in-
16	cluding age, gender, race, and ethnicity.
17	(E) A comprehensive list of prescribed
18	medications and legal or illegal substances as
19	annotated on toxicology reports of covered vet-
20	erans described in subparagraphs (A) through
21	(C), specifically listing any medications that
22	carried a black box warning, were prescribed for
23	off-label use, were psychotropic, or carried
24	warnings that included suicidal ideation.

1	(F) A summary of medical diagnoses by
2	physicians of the Department of Veterans Af-
3	fairs or physicians providing services to covered
4	veterans through programs of the Department
5	that led to the prescribing of medications re-
6	ferred to in subparagraph (E) in cases of post-
7	traumatic stress disorder, traumatic brain in-
8	jury, military sexual trauma, and other anxiety
9	and depressive disorders.
10	(G) The number of instances in which a
11	covered veteran described in subparagraph (A),
12	(B), or (C) was concurrently on multiple medi-
13	cations prescribed by physicians of the Depart-
14	ment or physicians providing services to vet-
15	erans through programs of the Department to
16	treat post-traumatic stress disorder, traumatic
17	brain injury, military sexual trauma, other anx-
18	iety and depressive disorders, or instances of
19	comorbidity.
20	(H) The number of covered veterans de-
21	scribed in subparagraphs (A) through (C) who
22	were not taking any medication prescribed by a
23	physician of the Department or a physician pro-
24	viding services to veterans through a program
25	of the Department.

1	(I) With respect to the treatment of post-
2	traumatic stress disorder, traumatic brain in-
3	jury, military sexual trauma, or other anxiety
4	and depressive disorders, the percentage of cov-
5	ered veterans described in subparagraphs (A)
6	through (C) who received a non-medication
7	first-line treatment compared to the percentage
8	of such veterans who received medication only.
9	(J) With respect to the treatment of cov-
10	ered veterans described in subparagraphs (A)
11	through (C) for post-traumatic stress disorder,
12	traumatic brain injury, military sexual trauma,
13	or other anxiety and depressive disorders, the
14	number of instances in which a non-medication
15	first-line treatment (such as cognitive behav-
16	ioral therapy) was attempted and determined to
17	be ineffective for such a veteran, which subse-
18	quently led to the prescribing of a medication
19	referred to in subparagraph (E).
20	(K) A description and example of how the
21	Department determines and continually updates
22	the clinical practice guidelines governing the
23	prescribing of medications.
24	(L) An analysis of the use by the Depart-
25	ment, including protocols or practices at med-

1	ical facilities of the Department, of systemati-
2	cally measuring pain scores during clinical en-
3	counters under the Pain as the 5th Vital Sign
4	Toolkit of the Department and an evaluation of
5	the relationship between the use of such meas-
6	urements and the number of veterans concur-
7	rently on multiple medications prescribed by
8	physicians of the Department.
9	(M) A description of the efforts of the De-
10	partment to maintain appropriate staffing levels
11	for mental health professionals, such as mental
12	health counselors, marriage and family thera-
13	pists, and other appropriate counselors, includ-
14	ing—
15	(i) a description of any impediments
16	to carry out the education, training, and
17	hiring of mental health counselors and
18	marriage and family therapists under sec-
19	tion 7302(a) of title 38, United States
20	Code, and strategies for addressing those
21	impediments;
22	(ii) a description of the objectives,
23	goals, and timing of the Department with
24	respect to increasing the representation of
25	such counselors and therapists in the be-

1 havioral health workforce of the Depart-2 ment, including— 3 (I) a review of eligibility criteria 4 for such counselors and therapists and 5 a comparison of such criteria to that 6 of other behavioral health professions 7 in the Department; and 8 (II) an assessment of the partici-9 pation of such counselors and thera-10 pists in the mental health profes-11 sionals trainee program of the De-12 partment and any impediments to 13 such participation; 14 (iii) an assessment of the development 15 by the Department of hiring guidelines for 16 mental health counselors, marriage and 17 family therapists, and other appropriate 18 counselors; 19 (iv) a description of how the Depart-20 ment-21 (I) identifies gaps in the supply 22 of mental health professionals; and 23 (II) determines successful staff-24 ing ratios for mental health profes-25 sionals of the Department;

1	(v) a description of actions taken by
2	the Secretary, in consultation with the Di-
3	rector of the Office of Personnel Manage-
4	ment, to create an occupational series for
5	mental health counselors and marriage and
6	family therapists of the Department and a
7	timeline for the creation of such an occu-
8	pational series; and
9	(vi) a description of actions taken by
10	the Secretary to ensure that the national,
11	regional, and local professional standards
12	boards for mental health counselors and
13	marriage and family therapists are com-
14	prised of only mental health counselors and
15	marriage and family therapists and that
16	the liaison from the Department to such
17	boards is a mental health counselor or
18	marriage and family therapist.
19	(N) The percentage of covered veterans de-
20	scribed in subparagraphs (A) through (C) with
21	combat experience or trauma related to combat
22	experience (including military sexual trauma,
23	traumatic brain injury, and post-traumatic
24	stress).

	21
1	(O) An identification of the medical facili-
2	ties of the Department with markedly high pre-
3	scription rates and suicide rates for veterans re-
4	ceiving treatment at those facilities.
5	(P) An analysis, by State, of programs of
6	the Department that collaborate with State
7	Medicaid agencies and the Centers for Medicare
8	and Medicaid Services, including the following:
9	(i) An analysis of the sharing of pre-
10	scription and behavioral health data for
11	veterans.
12	(ii) An analysis of whether Depart-
13	ment staff check with State prescription
14	drug monitoring programs before pre-
15	scribing medications to veterans.
16	(iii) A description of the procedures of
17	the Department for coordinating with pre-
18	scribers outside of the Department to en-
19	sure that veterans are not overprescribed.
20	(iv) A description of actions that the
21	Department takes when a veteran is deter-
22	mined to be overprescribed.
23	(Q) An analysis of the collaboration of
24	medical centers of the Department with medical

1	examiners' offices or local jurisdictions to deter-
2	mine veteran mortality and cause of death.
3	(R) An identification and determination of
4	a best practice model to collect and share vet-
5	eran death certificate data between the Depart-
6	ment of Veterans Affairs, the Department of
7	Defense, States, and tribal entities.
8	(S) A description of how data relating to
9	death certificates of veterans is collected, deter-
10	mined, and reported by the Department of Vet-
11	erans Affairs.
12	(T) An assessment of any patterns appar-
13	ent to the National Academies of Sciences, En-
14	gineering, and Medicine based on the review
15	conducted under paragraph (1).
16	(U) Such recommendations for further ac-
17	tion that would improve the safety and well-
18	being of veterans as the National Academies of
19	Sciences, Engineering, and Medicine determine
20	appropriate.
21	(3) Compilation of data.—
22	(A) FORM OF COMPILATION.—The Sec-
23	retary of Veterans Affairs shall ensure that
24	data compiled under paragraph (2) is compiled
25	in a manner that allows it to be analyzed across

all data fields for purposes of informing and updating clinical practice guidelines of the Department of Veterans Affairs.

4 (B) COMPILATION OF DATA REGARDING 5 COVERED VETERANS.—In compiling data under 6 paragraph (2) regarding covered veterans de-7 scribed in subparagraphs (A) through (C) of 8 such paragraph, data regarding veterans de-9 scribed in each such subparagraph shall be 10 compiled separately and disaggregated by year.

11 (4) COMPLETION OF REVIEW AND REPORT. 12 The agreement entered into under paragraph (1)13 require that the National Academies of shall 14 Sciences, Engineering, and Medicine complete the 15 review under such paragraph and submit to the Sec-16 retary of Veterans Affairs a report containing the 17 results of the review not later than 180 days after 18 entering into the agreement.

(b) REPORT.—Not later than 30 days after the completion by the National Academies of Sciences, Engineering, and Medicine of the review required under subsection
(a), the Secretary of Veterans Affairs shall—

(1) submit to the Committee on Veterans' Affairs of the Senate and the Committee on Veterans'

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1	Affairs of the House of Representatives a report on
2	the results of the review; and
3	(2) make such report publicly available.
4	(c) DEFINITIONS.—In this section:
5	(1) The term "black box warning" means a
6	warning displayed on the label of a prescription drug
7	that is designed to call attention to the serious or
8	life-threatening risk of the prescription drug.
9	(2) The term "covered veteran" means a vet-
10	eran who received hospital care or medical services
11	furnished by the Department of Veterans Affairs
12	during the five-year period preceding the death of
13	the veteran.
14	(3) The term "first-line treatment" means a po-
15	tential intervention that has been evaluated and as-
16	signed a high score within clinical practice guide-
17	lines.
18	(4) The term "State" means each of the States,
19	territories, and possessions of the United States, the
20	District of Columbia, and the Commonwealth of
21	Puerto Rico.

1SEC. 5. AMENDMENT RELATING TO THE ACCOUNT FOR THE2STATE RESPONSE TO THE OPIOID ABUSE CRI-3SIS.

4 Section 1003 of the 21st Century Cures Act (Public
5 Law 114–255; 42 U.S.C. 290ee–3 note) is amended in
6 subsection (b)(3), by adding at the end the following new
7 subparagraph:

"(C) 8 APPROPRIATIONS AFTER FISCAL 9 YEAR 2018.—There is authorized to be appro-10 priated, and there is appropriated, out of any monies in the Treasury not otherwise appro-11 12 priated, to the Account For the State Response 13 to the Opioid Abuse Crisis \$500,000,000 for 14 each of fiscal years 2019 through 2023.".

15 SEC. 6. MENTAL HEALTH ACCESS IMPROVEMENT.

16 (a) COVERAGE OF SERVICES.—

17 (1) IN GENERAL.—Section 1861(s)(2) of the
18 Social Security Act (42 U.S.C. 1395x(s)(2)) is
19 amended—

20 (A) in subparagraph (FF), by striking
21 "and" after the semicolon at the end;
22 (B) in subparagraph (GG), by inserting
23 "and" after the semicolon at the end; and
24 (C) by adding at the end the following new
25 subparagraph:

"(HH) marriage and family therapist services
 (as defined in subsection (jjj)(1)) and mental health
 counselor services (as defined in subsection
 (jjj)(3));".

5 (2) DEFINITIONS.—Section 1861 of the Social
6 Security Act (42 U.S.C. 1395x) is amended by add7 ing at the end the following new subsection:

8 "Marriage and Family Therapist Services; Marriage and
9 Family Therapist; Mental Health Counselor Serv10 ices; Mental Health Counselor

"(jjj)(1) The term 'marriage and family therapist 11 services' means services performed by a marriage and 12 13 family therapist (as defined in paragraph (2)) for the diagnosis and treatment of mental illnesses, which the mar-14 15 riage and family therapist is legally authorized to perform under State law (or the State regulatory mechanism pro-16 vided by State law) of the State in which such services 17 are performed, as would otherwise be covered if furnished 18 by a physician or as an incident to a physician's profes-19 20 sional service, but only if no facility or other provider 21 charges or is paid any amounts with respect to the fur-22 nishing of such services.

23 "(2) The term 'marriage and family therapist' means24 an individual who—

"(A) possesses a master's or doctoral degree
 which qualifies for licensure or certification as a
 marriage and family therapist pursuant to State
 law;

5 "(B) after obtaining such degree has performed
6 at least 2 years of clinical supervised experience in
7 marriage and family therapy; and

8 "(C) in the case of an individual performing 9 services in a State that provides for licensure or cer-10 tification of marriage and family therapists, is li-11 censed or certified as a marriage and family thera-12 pist in such State.

13 "(3) The term 'mental health counselor services' means services performed by a mental health counselor (as 14 15 defined in paragraph (4)) for the diagnosis and treatment of mental illnesses which the mental health counselor is 16 17 legally authorized to perform under State law (or the 18 State regulatory mechanism provided by the State law) of 19 the State in which such services are performed, as would 20 otherwise be covered if furnished by a physician or as inci-21 dent to a physician's professional service, but only if no 22 facility or other provider charges or is paid any amounts 23 with respect to the furnishing of such services.

24 "(4) The term 'mental health counselor' means an25 individual who—

"(A) possesses a master's or doctor's degree in
mental health counseling or a related field;
"(B) after obtaining such a degree has per-
formed at least 2 years of supervised mental health
counselor practice; and
"(C) in the case of an individual performing
services in a State that provides for licensure or cer-
tification of mental health counselors or professional
counselors, is licensed or certified as a mental health
counselor or professional counselor in such State.".
(3) Provision for payment under part
B.—Section 1832(a)(2)(B) of the Social Security
Act (42 U.S.C. $1395k(a)(2)(B)$) is amended by add-
ing at the end the following new clause:
"(v) marriage and family therapist
services (as defined in section 1861(jjj)(1))
and mental health counselor services (as
defined in section 1861(jjj)(3));".
(4) Amount of payment.—Section 1833(a)(1)
of the Social Security Act (42 U.S.C. 1395l(a)(1))
is amended—
(A) by striking "and (BB)" and inserting
"(BB)"; and

24 (B) by inserting before the semicolon at25 the end the following: ", and (CC) with respect

to marriage and family therapist services and
mental health counselor services under section
1861(s)(2)(HH), the amounts paid shall be 80
percent of the lesser of the actual charge for
the services or 75 percent of the amount determined for payment of a psychologist under subparagraph (L)".

8 (5) EXCLUSION OF MARRIAGE AND FAMILY 9 THERAPIST SERVICES AND MENTAL HEALTH COUN-10 SELOR SERVICES FROM SKILLED NURSING FACILITY 11 PROSPECTIVE PAYMENT SYSTEM.—Section 12 1888(e)(2)(A)(ii) of the Social Security Act (42) 13 U.S.C. 1395yy(e)(2)(A)(ii)) is amended by inserting 14 "marriage and family therapist services (as defined 15 in section 1861(jjj)(1), mental health counselor services (as defined in section 1861(jjj)(3))," after 16 17 "qualified psychologist services,".

(6) INCLUSION OF MARRIAGE AND FAMILY
THERAPISTS AND MENTAL HEALTH COUNSELORS AS
PRACTITIONERS FOR ASSIGNMENT OF CLAIMS.—Section 1842(b)(18)(C) of the Social Security Act (42
U.S.C. 1395u(b)(18)(C)) is amended by adding at
the end the following new clauses:

24 "(vii) A marriage and family therapist (as de25 fined in section 1861(jjj)(2)).

"(viii) A mental health counselor (as defined in
 section 1861(jjj)(4)).".

3 (b) COVERAGE OF CERTAIN MENTAL HEALTH SERV4 ICES PROVIDED IN CERTAIN SETTINGS.—

5 (1) RURAL HEALTH CLINICS AND FEDERALLY 6 QUALIFIED HEALTH CENTERS.—Section 7 1861(aa)(1)(B) of the Social Security Act (42) 8 U.S.C. 1395x(aa)(1)(B) is amended by striking "or 9 by a clinical social worker (as defined in subsection (hh)(1))" and inserting ", by a clinical social worker 10 11 (as defined in subsection (hh)(1)), by a marriage 12 and family therapist (as defined in subsection 13 (jjj)(2), or by a mental health counselor (as defined 14 in subsection (jjj)(4))".

15 (2) HOSPICE PROGRAMS.—Section
16 1861(dd)(2)(B)(i)(III) of the Social Security Act (42)
17 U.S.C. 1395x(dd)(2)(B)(i)(III)) is amended by inserting ", marriage and family therapist, or mental
19 health counselor" after "social worker".

(c) AUTHORIZATION OF MARRIAGE AND FAMILY
THERAPISTS AND MENTAL HEALTH COUNSELORS TO
DEVELOP DISCHARGE PLANS FOR POST-HOSPITAL SERVICES.—Section 1861(ee)(2)(G) of the Social Security Act
(42 U.S.C. 1395x(ee)(2)(G)) is amended by inserting ",
including a marriage and family therapist and a mental

health counselor who meets qualification standards estab lished by the Secretary" before the period at the end.

3 (d) EFFECTIVE DATE.—The amendments made by
4 this section shall apply with respect to services furnished
5 on or after January 1, 2019.

6 SEC. 7. SYNTHETICS TRAFFICKING AND OVERDOSE PRE7 VENTION.

8 (a) FORMAL ENTRY REQUIREMENTS—POSTAL
9 SERVICE AS CONSIGNEE.—Subparagraph (B) of section
10 484(a)(2) of the Tariff Act of 1930 (19 U.S.C.
11 1484(a)(2)(B)) is amended to read as follows:

"(B)(i) When an entry of merchandise is made
under this section, the required documentation or information shall be filed or electronically transmitted—

16 "(I) by the owner or purchaser of the mer-17 chandise; or

18 "(II) when appropriately designated by the
19 owner, purchaser, or consignee of the merchan20 dise, by a person holding a valid license under
21 section 641.

"(ii) The Postmaster General shall be deemed
the consignee for merchandise, as defined by section
498(c), imported through the mail, and the Postmaster General shall, at the Postmaster General's

1	sole expense, designate a person holding a valid li-
2	cense under section 641 to file the required docu-
3	mentation or information or ensure that the owner
4	or purchaser of the merchandise or a person holding
5	a valid license under section 641 that is designated
6	by the owner or purchaser files the required docu-
7	mentation or information.
8	"(iii) When a consignee declares on entry that
9	he or she is the owner or purchaser of merchandise,
10	U.S. Customs and Border Protection may, without
11	liability, accept the declaration.
12	"(iv) For the purposes of this Act, the importer
13	of record must be one of the parties who is eligible
14	to file the documentation or information required by
15	this section.".
16	(b) INFORMAL ENTRIES.—Section 498 of the Tariff
17	Act of 1930 (19 U.S.C. 1498) is amended by adding at
18	the end the following:
19	"(c) Application to Postal Shipments.—
20	"(1) DEFINITIONS.—In this subsection:
21	"(A) DOCUMENT.—The term 'document'
22	means a piece of written, drawn, printed, or
23	digital information, excluding objects of mer-
24	chandise, that—

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1	"(i) is conveyed in an envelope that is
2	less than or equal to 165 millimeters in
3	width, 245 millimeters in length, and 5
4	millimeters in depth; and
5	"(ii) weighs 100 grams or less when
6	conveyed.
7	"(B) MERCHANDISE.—The term 'merchan-
8	dise' has the same meaning as that term is de-
9	fined in section 401 but does not include a doc-
10	ument.
11	"(2) REQUIREMENT.—Notwithstanding any
12	other provision of law, for merchandise meeting the
13	requirements of subsection (a), the Postmaster Gen-
14	eral shall comply with the entry requirements of sec-
15	tion 484.
16	"(3) REGULATIONS.—Any regulation issued
17	pursuant to this subsection shall apply identical
18	entry procedures for merchandise imported through
19	the mail as are applied for merchandise imported via
20	a private carrier.".
21	(c) DE MINIMIS SHIPMENTS.—Section 321 of the
22	Tariff Act of 1930 (19 U.S.C. 1321) is amended by add-
23	ing at the end the following:

24 "(c)(1) For imported articles that qualify for the ad-25 ministrative exemption under subsection (a)(2) and that

arrive at international mail facilities in the United States,
 the Postmaster General shall be deemed the consignee for
 such articles that are considered merchandise, as the term
 is defined in section 498(c).

5 "(2) In addition to the parties that are authorized
6 to comply with the entry requirements of sections 498 and
7 484, the Postmaster General, as a consignee, may, using
8 reasonable care, enter such merchandise that qualifies for
9 the administrative exemption under subsection (a)(2).".

10 (d) CUSTOMS FEES.—

(1) IN GENERAL.—Paragraph (6) of section
12 13031(a) of the Consolidated Omnibus Budget Rec13 onciliation Act of 1985 (19 U.S.C. 58c(a)(6)) is
14 amended to read as follows:

"(6)(A) For the arrival of shipments of mer-15 16 chandise (as the term is defined in section 498(c) of 17 the Trade Act of 1930) or any other item that is 18 valued at \$2,000 or less (or such higher amount as 19 the Secretary of the Treasury may set by regulation 20 pursuant to section 498 of the Tariff Act of 1930 21 (19 U.S.C. 1498) and subject to adjustment under 22 subsection (l)) arriving at an international mail facil-23 ity:

1	"(i) \$1 per individual airway bill or bill of
2	lading (subject to adjustment under subsection
3	(l)); or
4	"(ii) if such merchandise is formally en-
5	tered, the fee provided for in paragraph (9), if
6	applicable.

"(B) Notwithstanding section 451 of the Tariff 7 8 Act of 1930 (19 U.S.C. 1451), the payment required 9 by subparagraph (A) shall be the only payment re-10 quired for reimbursement of U.S. Customs and Bor-11 der Protection in connection with the processing of 12 an individual airway bill or bill of lading in accord-13 ance with such subparagraph and for providing serv-14 ices at international mail facilities, except that U.S. 15 Customs and Border Protection may require such 16 facilities to cover expenses of the agency for ade-17 quate office space, equipment, furnishings, supplies, 18 and security.

"(C) The payment required by subparagraphs
(A) and (B) shall be paid on a quarterly basis by the
Postmaster General in accordance with regulations
prescribed by the Secretary of the Treasury. The
payments shall be allocated as follows:

24 "(i) 50 percent of the amount of payments25 received in this paragraph shall, in accordance

1	with section 524 of the Tariff Act of 1930 (19
2	U.S.C. 1524), be deposited in the Customs
3	User Fee Account and shall be used to directly
4	reimburse each appropriation for the amount
5	paid out of that appropriation for the costs in-
6	curred in providing services to international
7	mail facilities. Amounts deposited in accordance
8	with the preceding sentence shall be available
9	until expended for the provision of customs
10	services to international mail facilities.
11	"(ii) Notwithstanding section 524 of the
12	Tariff Act of 1930 (19 U.S.C. 1524), 50 per-
13	cent of the amount of payments received under
14	this paragraph shall be paid to the Secretary of
15	the Treasury, which is in lieu of the payment
16	of fees under paragraph (10).".
17	(2) TECHNICAL AMENDMENTS.—Paragraph
18	(10) of section 13031(a) of the Consolidated Omni-
19	bus Budget Reconciliation Act of 1985 (19 U.S.C.
20	58c(a)(10)) is amended—
21	(A) by striking "or" in subparagraph (B);
22	(B) by striking the period at the end of
23	subparagraph (C)(iii) and inserting a comma
24	and "or";
1	(C) by inserting after subparagraph
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2	(C)(iii) the following:
3	"(D) an international mail facility."; and
4	(D) in the undesignated material at the
5	end by striking the period and inserting "or re-
6	ferred to in subparagraph (D) see paragraph
7	(6).".
8	(e) Mandatory Advanced Electronic Informa-
9	TION FOR POSTAL SHIPMENTS.—Subparagraph (K) of
10	section 343(a)(3) of the Trade Act of 2002 (Public Law
11	107–210; 19 U.S.C. 2071 note) is amended to read as
12	follows:
13	"(K) The Secretary shall require the Post-
14	master General to transmit or to ensure the
15	transmission of the information required in
16	paragraphs (1) and (2) to U.S. Customs and
17	Border Protection for all shipments by the
18	United States Postal Service which includes
18 19	United States Postal Service which includes shipments that the United States Postal Service
19	shipments that the United States Postal Service
19 20	shipments that the United States Postal Service receives from foreign postal operators (ship-
19 20 21	shipments that the United States Postal Service receives from foreign postal operators (ship- ments from foreign postal operators may be

on the United States Postal Service and private
 carriers.".

3 (f) MANIFEST PENALTIES APPLIED TO THE UNITED
4 STATES POSTAL SERVICE.—

5 (1) PENALTIES FOR VIOLATIONS OF THE AR6 RIVAL, REPORTING, ENTRY, AND CLEARANCE RE7 QUIREMENTS.—Section 436 of the Tariff Act of
8 1930 (19 U.S.C. 1436) is amended by adding at the
9 end the following new subsection:

"(e) CIVIL PENALTIES ARISING FROM VIOLATIONS
FOR POSTAL SHIPMENTS.—With respect to civil penalties
provided for in subsections (b) and (d), the Postmaster
General shall be liable for the penalty if the violation was
caused by a foreign postal operator or the United States
Postal Service.".

16 (2) PENALTIES FOR FALSITY OR LACK OF
17 MANIFEST.—Section 584 of the Tariff Act of 1930
18 (19 U.S.C. 1584) is amended by adding at the end
19 the following new subsection:

"(c) PERSON DIRECTLY OR INDIRECTLY RESPONSIBLE SHALL INCLUDE THE POSTMASTER GENERAL.—
For purposes of subsection (a), the Postmaster General
may be the person directly or indirectly responsible for a
discrepancy if the discrepancy is the result of—

1	"(1) an omission by a foreign postal operator or
2	the United States Postal Service; or
3	((2)) false information regarding the shipment
4	that was provided to the carrier by a foreign postal
5	operator or the United States Postal Service.".
6	(g) Limitation on International Postal Ar-
7	RANGEMENTS.—
8	(1) EXISTING AGREEMENTS.—
9	(A) IN GENERAL.—In the event that any
10	provision in this section is found to be in viola-
11	tion of obligations of the United States under
12	the Universal Postal Union, the Secretary of
13	State shall negotiate to amend the relevant pro-
14	visions of the agreement so that the United
15	States is no longer in violation of the agree-
16	ment.
17	(B) CONSTRUCTION.—Nothing in this sub-
18	section may be construed to require or permit
19	any delay in the implementation of this section.
20	(2) FUTURE AGREEMENTS.—The Secretary of
21	State may not conclude any international postal ar-
22	rangement pursuant to the authority set out in sec-
23	tion 407 of title 39, United States Code, that is in-
24	consistent with this section or any amendment made
25	by this section.

40

(h) Application of Other Customs Laws.—

1

2 (1) IN GENERAL.—U.S. Customs and Border 3 Protection shall ensure that all merchandise, as that 4 term is defined in subsection (c) of section 498 of 5 the Tariff Act of 1930 (19 U.S.C. 1498), imported 6 to the United States through the mail shall be sub-7 ject to the same import procedures, legal restric-8 tions, and certifications as merchandise imported by 9 private carriers.

10 (2) REGULATIONS.—The Secretary of the
11 Treasury shall issue regulations pursuant to this
12 section to ensure that merchandise imported through
13 the mail is in accordance with Federal law.

(i) COST RECOUPMENT.—The Postmaster General
shall ensure that all costs associated with complying with
this section, as well as all penalties assessed against the
Postmaster General, are charged directly to foreign shippers, foreign postal operators, or United States ultimate
consignees.

20 (j) Effective Date; Regulations.—

(1) EFFECTIVE DATE.—This section shall become effective upon the date of the enactment of
this Act.

24 (2) REGULATIONS.—Not later than 1 year after
25 the date of the enactment of this Act, the Secretary

1	shall prescribe all regulations required under this
2	section.
3	SEC. 8. STOP THE IMPORTATION AND TRAFFICKING OF
4	SYNTHETIC ANALOGUES.
5	(a) Establishment of Schedule A.—Section 202
6	of the Controlled Substances Act (21 U.S.C. 812) is
7	amended—
8	(1) in subsection (a), by striking "five schedules
9	of controlled substances, to be known as schedules I,
10	II, III, IV, and V" and inserting "six schedules of
11	controlled substances, to be known as schedules I,
12	II, III, IV, V, and A";
13	(2) in subsection (b), by adding at the end the
14	following:
15	"(6) Schedule A.—
16	"(A) IN GENERAL.—The drug or substance—
17	"(i) has—
18	"(I) a chemical structure that is sub-
19	stantially similar to the chemical structure
20	of a controlled substance in schedule I, II,
21	III, IV, or V; and
22	"(II) an actual or predicted stimulant,
23	depressant, or hallucinogenic effect on the
24	central nervous system that is substantially
25	similar to or greater than the stimulant,

1	depressant, or hallucinogenic effect on the
2	central nervous system of a controlled sub-
3	stance in schedule I, II, III, IV, or V; and
4	"(ii) is not—
5	"(I) listed or otherwise included in
6	any other schedule in this section or by
7	regulation of the Attorney General; and
8	"(II) with respect to a particular per-
9	son, subject to an exemption that is in ef-
10	fect for investigational use, for that person,
11	under section 505 of the Federal Food,
12	Drug, and Cosmetic Act (21 U.S.C. 355)
13	to the extent conduct with respect to such
14	substance is pursuant to such exemption.
15	"(B) Predicted stimulant, depressant, or
16	HALLUCINOGENIC EFFECT.—For purpose of this
17	paragraph, a predicted stimulant, depressant, or hal-
18	lucinogenic effect on the central nervous system may
19	be based on—
20	"(i) the chemical structure, structure activ-
21	ity relationships, binding receptor assays, or
22	other relevant scientific information about the
23	substance;
24	"(ii)(I) the current or relative potential for
25	abuse of the substance; and

1	"(II) the clandestine importation, manu-
2	facture, or distribution, or diversion from legiti-
3	mate channels, of the substance; or
4	"(iii) the capacity of the substance to
5	cause a state of dependence, including physical
6	or psychological dependence that is similar to or
7	greater than that of a controlled substance in
8	schedule I, II, III, IV, or V."; and
9	(3) in subsection (c)—
10	(A) in the matter preceding schedule I, by
11	striking "IV, and V" and inserting "IV, V, and
12	A"; and
13	(B) by adding at the end the following:
14	"SCHEDULE A
14 15	"SCHEDULE A "(a) Unless specifically excepted or unless listed in
15	"(a) Unless specifically excepted or unless listed in
15 16	"(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as
15 16 17	"(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as scheduled in accordance with section 201(k)(5):
15 16 17 18	 "(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as scheduled in accordance with section 201(k)(5): "(1) 4-fluoroisobutyryl fentanyl.
15 16 17 18 19	 "(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as scheduled in accordance with section 201(k)(5): "(1) 4-fluoroisobutyryl fentanyl. "(2) Valeryl fentanyl.
15 16 17 18 19 20	 "(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as scheduled in accordance with section 201(k)(5): "(1) 4-fluoroisobutyryl fentanyl. "(2) Valeryl fentanyl. "(3) 4-methoxybutyryl fentanyl.
 15 16 17 18 19 20 21 	 "(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as scheduled in accordance with section 201(k)(5): "(1) 4-fluoroisobutyryl fentanyl. "(2) Valeryl fentanyl. "(3) 4-methoxybutyryl fentanyl. "(4) 4-methylphenethyl acetyl fentanyl.
 15 16 17 18 19 20 21 22 	 "(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as scheduled in accordance with section 201(k)(5): "(1) 4-fluoroisobutyryl fentanyl. "(2) Valeryl fentanyl. "(3) 4-methoxybutyryl fentanyl. "(4) 4-methylphenethyl acetyl fentanyl. "(5) 3-furanyl fentanyl.
 15 16 17 18 19 20 21 22 23 	 "(a) Unless specifically excepted or unless listed in another schedule, any of the following substances, as scheduled in accordance with section 201(k)(5): "(1) 4-fluoroisobutyryl fentanyl. "(2) Valeryl fentanyl. "(3) 4-methoxybutyryl fentanyl. "(4) 4-methylphenethyl acetyl fentanyl. "(5) 3-furanyl fentanyl. "(6) Ortho-fluorofentanyl.

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1	"(10) Methoxyacetyl fentanyl.
2	"(11) Meta-fluorofentanyl.
3	"(12) Isobutyryl fentanyl.
4	"(13) Acryl fentanyl.".
5	(b) Temporary and Permanent Scheduling of
6	Schedule A Substances.—Section 201 of the Con-
7	trolled Substances Act (21 U.S.C. 811) is amended by
8	adding at the end the following:
9	"(k) Temporary and Permanent Scheduling of
10	Schedule A Substances.—
11	"(1) The Attorney General may issue a tem-
12	porary order adding a drug or substance to schedule
13	A if the Attorney General finds that—
14	"(A) the drug or other substance satisfies
15	the criteria for being considered a schedule A
16	substance; and
17	"(B) adding such drug or substance to
18	schedule A will assist in preventing abuse or
19	misuse of the drug or other substance.
20	"(2) A temporary scheduling order issued under
21	paragraph (1) shall not take effect until 30 days
22	after the date of the publication by the Attorney
23	General of a notice in the Federal Register of the in-
24	tention to issue such order and the grounds upon
25	which such order is to be issued. The temporary

1 scheduling order shall expire not later than 5 years 2 after the date it becomes effective, except that the 3 Attorney General may, during the pendency of pro-4 ceedings under paragraph (5), extend the temporary 5 scheduling order for up to 180 days. 6 "(3) A temporary scheduling order issued under paragraph (1) shall be vacated upon the issuance of 7 8 a permanent order issued under paragraph (5) with 9 regard to the same substance, or upon the subse-10 quent issuance of any scheduling order under this 11 section. "(4) A temporary scheduling order issued under 12 13 paragraph (1) shall not be subject to judicial review. 14 "(5) The Attorney General may, by rule, issue 15 a permanent order adding a drug or other substance 16 to schedule A if such drug or substance satisfies the 17 criteria for being considered a schedule A substance. 18 Such rulemaking may be commenced simultaneously 19 with the issuance of the temporary scheduling order 20 issued under paragraph (1) with regard to the same substance. 21 22 "(6) Before initiating proceedings under para-

22 "(6) Before initiating proceedings under para23 graph (1) or (5), the Attorney General shall trans24 mit notice of an order proposed to be issued to the
25 Secretary of Health and Human Services. In issuing

1 an order under paragraph (1) or (5), the Attorney 2 General shall take into consideration any comments 3 submitted by the Secretary of Health and Human 4 Services in response to a notice transmitted pursu-5 ant to this paragraph. 6 "(7) On the date of the publication of a notice 7 in the Federal Register pursuant to paragraph (2), 8 the Attorney General shall transmit the same notice 9 to Congress. The temporary scheduling order shall 10 take effect according to paragraph (2), except that 11 the temporary scheduling order may be disapproved 12 by Act of Congress within 180 days from the date 13 of publication of the notice in the Federal Reg-14 ister.". 15 (c) PENALTIES.— 16 (1) CONTROLLED SUBSTANCES ACT.—The Con-17 trolled Substances Act (21 U.S.C. 801 et seq.) is 18 amended-19 401(b)(1)(21) (\mathbf{A}) in section U.S.C. 20 841(b)(1), by adding at the end the following: "(F)(i) In the case of any controlled substance in 21 22 schedule A, such person shall be sentenced to a term of 23 imprisonment of not more than 10 years and if death or 24 serious bodily injury results from the use of such substance shall be sentenced to a term of imprisonment of 25

not more than 15 years, a fine not to exceed the greater
 of that authorized in accordance with the provisions of
 title 18, United States Code, or \$500,000 if the defendant
 is an individual or \$2,500,000 if the defendant is other
 than an individual, or both.

6 "(ii) If any person commits such a violation after a 7 prior conviction for a felony drug offense has become final, 8 such person shall be sentenced to a term of imprisonment 9 of not more than 20 years and if death or serious bodily 10 injury results from the use of such substance shall be sentenced to a term of imprisonment of not more than 30 11 years, a fine not to exceed the greater of twice that author-12 13 ized in accordance with the provisions of title 18, United States Code, or \$1,000,000 if the defendant is an indi-14 15 vidual or \$5,000,000 if the defendant is other than an individual, or both. 16

17 "(iii) Any sentence imposing a term of imprisonment 18 under this subparagraph shall, in the absence of such a 19 prior conviction, impose a term of supervised release of 20 not less than 2 years in addition to such term of imprison-21 ment and shall, if there was such a prior conviction, im-22 pose a term of supervised release of not less than 4 years 23 in addition to such term of imprisonment.";

24 (B) in section 403(a) (21 U.S.C.
25 843(a))—

1	(i) in paragraph (8), by striking "or"
2	at the end;
3	(ii) in paragraph (9), by striking the
4	period at the end and inserting "; or"; and
5	(iii) by inserting after paragraph (9)
6	the following:
7	((10) to export a substance in violation of the
8	controlled substance laws of the country to which
9	the substance is exported."; and
10	(C) in section 404 (21 U.S.C. 844), by in-
11	serting after subsection (a) the following:
12	"(b) A person shall not be subject to a criminal or
13	civil penalty under this title or under any other Federal
14	law solely for possession of a schedule A controlled sub-
15	stance.".
16	(2) Controlled substances import and
17	EXPORT ACT.—Section 1010(b) of the Controlled
18	Substances Import and Export Act (21 U.S.C.
19	960(b)) is amended by adding at the end the fol-
20	lowing:
21	"(8) In the case of a violation under subsection (a)
22	involving a controlled substance in schedule A, the person
23	committing such violation shall be sentenced to a term of
24	imprisonment of not more than 20 years and if death or
25	serious bodily injury results from the use of such sub-

stance shall be sentenced to a term of imprisonment of 1 2 not more than life, a fine not to exceed the greater of that 3 authorized in accordance with the provisions of title 18, 4 United States Code, or \$1,000,000 if the defendant is an 5 individual or \$5,000,000 if the defendant is other than 6 an individual, or both. If any person commits such a viola-7 tion after a prior conviction for a felony drug offense has 8 become final, such person shall be sentenced to a term 9 of imprisonment of not more than 30 years and if death 10 or serious bodily injury results from the use of such substance shall be sentenced to not more than life imprison-11 ment, a fine not to exceed the greater of twice that author-12 13 ized in accordance with the provisions of title 18, United States Code, or \$2,000,000 if the defendant is an indi-14 vidual or \$10,000,000 if the defendant is other than an 15 individual, or both. Notwithstanding section 3583 of title 16 18, United States Code, any sentence imposing a term of 17 imprisonment under this paragraph shall, in the absence 18 19 of such a prior conviction, impose a term of supervised release of not less than 3 years in addition to such term 20 21 of imprisonment and shall, if there was such a prior con-22 viction, impose a term of supervised release of not less 23 than 6 years in addition to such term of imprisonment. 24 Notwithstanding the prior sentence, and notwithstanding 25 any other provision of law, the court shall not place on

probation or suspend the sentence of any person sentenced
 under the provisions of this paragraph which provide for
 a mandatory term of imprisonment if death or serious
 bodily injury results.".

5 (d) False Labeling of Schedule A Controlled6 Substances.—

7 (1) IN GENERAL.—Section 305 of the Con8 trolled Substances Act (21 U.S.C. 825) is amended
9 by adding at the end the following:

10 "(f) False Labeling of Schedule A Con-11 TROLLED SUBSTANCES.—

"(1) It shall be unlawful to import, export, 12 13 manufacture, distribute, dispense, or possess with 14 intent to manufacture, distribute, or dispense, a 15 schedule A substance or product containing a sched-16 ule A substance, unless the substance or product 17 bears a label clearly identifying a schedule A sub-18 stance or product containing a schedule A substance 19 by the nomenclature used by the International 20 Union of Pure and Applied Chemistry (IUPAC).

21 "(2)(A) A product described in subparagraph
22 (B) is exempt from the International Union of Pure
23 and Applied Chemistry nomenclature requirement of
24 this subsection if such product is labeled in the man-

1	ner required under the Federal Food, Drug, and
2	Cosmetic Act.
3	"(B) A product is described in this subpara-
4	graph if the product—
5	"(i) is the subject of an approved applica-
6	tion as described in section 505(b) or (j) of the
7	Federal Food, Drug, and Cosmetic Act; or
8	"(ii) is exempt from the provisions of sec-
9	tion 505 of such Act relating to new drugs be-
10	cause—
11	"(I) it is intended solely for investiga-
12	tional use as described in section 505(i) of
13	such Act; and
14	"(II) such product is being used ex-
15	clusively for purposes of a clinical trial
16	that is the subject of an effective investiga-
17	tional new drug application.".
18	(2) Penalties.—Section 402 of the Controlled
19	Substances Act (21 U.S.C. 842) is amended—
20	(A) in subsection (a)(16), by inserting "or
21	subsection (f)" after "subsection (e)"; and
22	(B) in subsection $(c)(1)(D)$, by inserting
23	"or a schedule A substance" after "anabolic
24	steroid".

(e) REGISTRATION REQUIREMENTS FOR HANDLERS
 OF SCHEDULE A SUBSTANCES.—

3 (1) CONTROLLED SUBSTANCES ACT.—Section
4 303 of the Controlled Substances Act (21 U.S.C.
5 823) is amended by adding at the end the following:
6 "(k)(1) The Attorney General shall register an appli7 cant to manufacture schedule A substances if—

8 "(A) the applicant demonstrates that the sched-9 ule A substances will be used for research, analyt-10 ical, or industrial purposes approved by the Attorney 11 General; and

12 "(B) the Attorney General determines that such 13 registration is consistent with the public interest and 14 with the United States obligations under inter-15 national treaties, conventions, or protocols in effect 16 on the date of enactment of this subsection.

17 "(2) In determining the public interest under para-18 graph (1)(B), the Attorney General shall consider—

19 "(A) maintenance of effective controls against 20 diversion of particular controlled substances and any 21 controlled substance in schedule A compounded 22 therefrom into other than legitimate medical, sci-23 entific, research, or industrial channels, by limiting 24 the importation and bulk manufacture of such con-25 trolled substances to a number of establishments

1	which can produce an adequate and uninterrupted
2	supply of these substances under adequately com-
3	petitive conditions for legitimate medical, scientific,
4	research, and industrial purposes;
5	"(B) compliance with applicable State and local
6	law;
7	"(C) promotion of technical advances in the art
8	of manufacturing substances described in subpara-
9	graph (A) and the development of new substances;
10	"(D) prior conviction record of applicant under
11	Federal and State laws relating to the manufacture,
12	distribution, or dispensing of substances described in
13	paragraph (A);
14	"(E) past experience in the manufacture of con-
15	trolled substances, and the existence in the establish-
16	ment of effective control against diversion; and
17	"(F) such other factors as may be relevant to
18	and consistent with the public health and safety.
19	"(3) If an applicant is registered to manufacture con-
20	trolled substances in schedule I or II under subsection (a),
21	the applicant shall not be required to apply for a separate
22	registration under this subsection.
23	``(l)(1) The Attorney General shall register an appli-
24	cant to distribute schedule A substances—

1	"(A) if the applicant demonstrates that the
2	schedule A substances will be used for research, ana-
3	lytical, or industrial purposes approved by the Attor-
4	ney General; and
5	"(B) unless the Attorney General determines
6	that the issuance of such registration is inconsistent
7	with the public interest.
8	"(2) In determining the public interest under para-
9	graph (1)(B), the Attorney General shall consider—
10	"(A) maintenance of effective control against
11	diversion of particular controlled substances into
12	other than legitimate medical, scientific, and indus-
13	trial channels;
14	"(B) compliance with applicable State and local
15	law;
16	"(C) prior conviction record of applicant under
17	Federal or State laws relating to the manufacture,
18	distribution, or dispensing of substances described in
19	subparagraph (A);
20	"(D) past experience in the distribution of con-
21	trolled substances; and
22	"(E) such other factors as may be relevant to
23	and consistent with the public health and safety.
24	"(3) If an applicant is registered to distribute a con-
25	trolled substance in schedule I or II under subsection (b),

the applicant shall not be required to apply for a separate
 registration under this subsection.

3 "(m)(1) Not later than 90 days after the date on
4 which a substance is placed in schedule A, any practitioner
5 who was engaged in research on the substance before the
6 placement of the substance in schedule A and any manu7 facturer or distributor who was handling the substance be8 fore the placement of the substance in schedule A shall
9 register with the Attorney General.

"(2)(A) Not later than 60 days after the date on
which the Attorney General receives an application for
registration to conduct research on a schedule A substance, the Attorney General shall—

14 "(i) grant, or initiate proceedings under section
15 304(c) to deny, the application; or

16 "(ii) request supplemental information from the17 applicant.

"(B) Not later than 30 days after the date on which
the Attorney General receives supplemental information
requested under subparagraph (A)(ii) in connection with
an application described in subparagraph (A), the Attorney General shall grant or deny the application.

23 "(n)(1) The Attorney General shall register a sci24 entific investigator or a qualified research institution to
25 conduct research with controlled substances in schedule A

in accordance with this subsection. In evaluating applica tions for such registration, the Attorney General shall
 apply the criteria set forth in subsection (f) of this section
 that apply to practitioners seeking a registration to con duct research with a schedule I controlled substance, ex cept that the applicant shall not be required to submit a
 research protocol.

8 "(2) If the applicant is not currently registered under 9 subsection (f) to conduct research with a schedule I con-10 trolled substance, the Attorney General shall refer the ap-11 plication to the Secretary, who shall determine whether 12 the applicant will be engaged in bona fide research and 13 is qualified to conduct such research.

14 "(3) If the applicant is currently registered under 15 subsection (f) to conduct research with a schedule I controlled substance, the applicant will be considered qualified 16 to conduct research with controlled substances in schedule 17 A and the Attorney General shall modify the applicant's 18 19 registration to include schedule A controlled substances in accordance with this paragraph. The applicant shall notify 2021 the Attorney General of his intent to conduct research 22 with a controlled substance in schedule A. Upon receiving 23 such notification, the Attorney General shall modify the 24 practitioner's existing registration to authorize research 25 with schedule A controlled substances, unless the Attorney General determines that the registration modification
 would be inconsistent with the public interest based on the
 criteria of subsection (f).

4 "(4) Registrations issued under this subsection to a
5 qualified research institution will apply to all agents and
6 employees of that institution acting within the scope of
7 their professional practice.

8 "(5) At least thirty days prior to conducting any re-9 search with a controlled substance in schedule A, the reg-10 istrant shall provide the Attorney General with written no-11 tification of the following:

12 "(A) The name of and drug code for each sub-13 stance.

14 "(B) The name of each individual with access15 to each substance.

16 "(C) The amount of each substance.

17 "(D) Other similar information the Attorney18 General may require.

19 "(6) The quantity of a schedule A controlled sub-20 stance possessed by a person registered under this sub-21 section shall be appropriate for the research being con-22 ducted, subject to the additional limitations set forth in 23 this paragraph. To reduce the risk of diversion, the Attor-24 ney General may establish limitations on the quantity of 25 schedule A controlled substances that may be manufac-

tured or possessed for purposes of research under this sub-1 2 section and shall publish such limitations on the website 3 of the Drug Enforcement Administration. A person reg-4 istered under this subsection may, based on legitimate re-5 search needs, apply to the Attorney General to manufacture or possess an amount greater than that so specified 6 7 by the Attorney General. The Attorney General shall 8 specify the manner in which such applications shall be 9 submitted. The Attorney General shall act on an applica-10 tion filed under this subparagraph within 30 days of receipt of such application. If the Attorney General fails to 11 12 act within 30 days, the registrant shall be allowed to man-13 ufacture and possess up to the amount requested. The Attorney General shall have the authority to reverse the in-14 15 crease for cause.

16 "(7) The Attorney General shall by regulation specify
17 the manner in which applications for registration under
18 this subsection shall be submitted.

19 "(8) Registrants authorized under this subsection 20 may manufacture and possess schedule A controlled sub-21 stances up to the approved amounts only for use in their 22 own research setting or institution. Manufacturing for use 23 in any other setting or institution shall require a manufac-24 turer's registration under section 303(a).".

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1	(2) Controlled substances import and
2	EXPORT ACT.—Section 1008 of the Controlled Sub-
3	stances Import and Export Act (21 U.S.C. 958) is
4	amended by adding at the end the following:
5	((j)(1) The Attorney General shall register an appli-
6	cant to import or export a schedule A substance if—
7	"(A) the applicant demonstrates that the sched-
8	ule A substances will be used for research, analyt-
9	ical, or industrial purposes approved by the Attorney
10	General; and
11	"(B) the Attorney General determines that such
12	registration is consistent with the public interest and
13	with the United States obligations under inter-
14	national treaties, conventions, or protocols in effect
15	on the date of enactment of this subsection.
16	"(2) In determining the public interest under para-
17	graph (1)(B), the Attorney General shall consider the fac-
18	tors described in subparagraphs (A) through (F) of sec-
19	tion $303(k)(2)$.
20	"(3) If an applicant is registered to import or export
21	a controlled substance in schedule I or II under subsection
22	(a), the applicant shall not be required to apply for a sepa-
23	rate registration under this subsection.".
24	

24 (f) Additional Conforming Amendments.—

1	(1) Controlled substances act.—The Con-
2	trolled Substances Act (21 U.S.C. 801 et seq.) is
3	amended—
4	(A) in section 303(c) (21 U.S.C. 823(c))—
5	(i) by striking "subsections (a) and
6	(b)" and inserting "subsection (a), (b), (k),
7	or (l)"; and
8	(ii) by striking "schedule I or II" and
9	inserting "schedule I, II, or A";
10	(B) in section 306 (21 U.S.C. 826)—
11	(i) in subsection (a), in the first sen-
12	tence, by striking "schedules I and II" and
13	inserting "schedules I, II, and A";
14	(ii) in subsection (b), in the second
15	sentence, by striking "schedule I or II"
16	and inserting "schedule I, II, or A";
17	(iii) in subsection (c), in the first sen-
18	tence, by striking "schedules I and II" and
19	inserting "schedules I, II, and A";
20	(iv) in subsection (d), in the first sen-
21	tence, by striking "schedule I or II" and
22	inserting "schedule I, II, or A";
23	(v) in subsection (e), in the first sen-
24	tence, by striking "schedule I or II" and
25	inserting "schedule I, II, or A"; and

1	(vi) in subsection (f), in the first sen-
2	tence, by striking "schedules I and II" and
3	inserting "schedules I, II, and A";
4	(C) in section 308(a) (21 U.S.C. 828(a)),
5	by striking "schedule I or II" and inserting
6	"schedule I, II, or A";
7	(D) in section 402(b) (21 U.S.C. 842(b)),
8	in the matter preceding paragraph (1), by strik-
9	ing "schedule I or II" and inserting "schedule
10	I, II, or A'';
11	(E) in section $403(a)(1)$ (21 U.S.C.
12	843(a)(1)), by striking "schedule I or II" and
13	inserting "schedule I, II, or A"; and
14	(F) in section 511(f) (21 U.S.C. 881(f)),
15	by striking "schedule I or II" each place it ap-
16	pears and inserting "schedule I, II, or A".
17	(2) Controlled substances import export
18	ACT.—The Controlled Substances Import and Ex-
19	port Act (21 U.S.C. 951 et seq.) is amended—
20	(A) in section 1002(a) (21 U.S.C.
21	952(a))—
22	(i) in the matter preceding paragraph
23	(1), by striking "schedule I or II" and in-
24	serting "schedule I, II, or A"; and

1	(ii) in paragraph (2), by striking
2	"schedule I or II" and inserting "schedule
3	I, II, or A'';
4	(B) in section 1003 (21 U.S.C. 953)—
5	(i) in subsection (c), in the matter
6	preceding paragraph (1), by striking
7	"schedule I or II" and inserting "schedule
8	I, II, or A"; and
9	(ii) in subsection (d), by striking
10	"schedule I or II" and inserting "schedule
11	I, II, or A'';
12	(C) in section 1004(1) (21 U.S.C. 954(1)),
13	by striking "schedule I" and inserting "sched-
14	ule I or A";
15	(D) in section 1005 (21 U.S.C. 955), by
16	striking "schedule I or II" and inserting
17	"schedule I, II, or A"; and
18	(E) in section 1009(a) (21 U.S.C. 959(a)),
19	by striking "schedule I or II" and inserting
20	"schedule I, II, or A".
21	(g) Controlled Substance Analogues.—Section
22	102 of the Controlled Substances Act (21 U.S.C. 802) is
23	amended—
24	(1) in paragraph (6), by striking "or V" and in-
25	serting "V, or A";

1 (2) in paragraph (14)—

2	(A) by striking "schedule I(c) and" and in-	
3	serting "schedule I(c), schedule A, and"; and	
4	(B) by striking "schedule I(c)," and insert-	
5	ing "schedule I(c) and schedule A,"; and	
6	(3) in paragraph (32)(A), by striking "(32)(A)"	
7	and all that follows through clause (iii) and inserting	
8	the following:	
9	"(32)(A) Except as provided in subparagraph (C),	
10	the term 'controlled substance analogue' means a sub-	
11	stance whose chemical structure is substantially similar to	
12	the chemical structure of a controlled substance in sched-	
13	ule I or II—	
14	"(i) which has a stimulant, depressant, or hal-	
15	lucinogenic effect on the central nervous system that	
16	is substantially similar to or greater than the stimu-	
17	lant, depressant, or hallucinogenic effect on the cen-	
18	tral nervous system of a controlled substance in	
19	schedule I or II; or	
20	"(ii) with respect to a particular person, which	
21	such person represents or intends to have a stimu-	
22	lant, depressant, or hallucinogenic effect on the cen-	
23	tral nervous system that is substantially similar to	
24	or greater than the stimulant, depressant, or hallu-	

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cinogenic effect on the central nervous system of a
 controlled substance in schedule I or II.".

3 (h) AMENDMENT TO THE SENTENCING GUIDE-4 LINES.—Section 2D1.1 of the Federal Sentencing Guidelines is amended, in Application Note 6 (Analogues and 5 Controlled Substances Not Referenced in this Guideline) 6 of the Commentary, by striking "In determining the most 7 8 closely related controlled substance, the court shall, to the 9 extent practicable, consider the following:" and inserting the following: "In determining the most closely related 10 11 controlled substance and the applicable guideline or drug 12 equivalence, the court shall—

13 "(A) if Attorney General has provided 14 guidance on the appropriate sentencing equiva-15 lency or ratio to a controlled substance that is 16 referenced in the guidelines through publication 17 in the Federal Register (whether such guidance 18 is included in or separate from any notice of 19 proposed temporary or permanent scheduling of 20 such substance under section 201 of the Con-21 trolled Substances Act (21 U.S.C. 811)), apply 22 any such sentencing equivalency or ratio; and

23 "(B) in the absence of guidance with re24 spect to a substance or group of substances as
25 described in paragraph (A), use equivalencies

for the following structural classes of sub stances as if they were included on the Drug
 Equivalency Tables:

"Drug Class	Marihuana Equivalency of 1 gm of subject substance
Synthetic Opioids Synthetic Cannabinoids Synthetic Cathinones Tryptamine Phenethylamines Piperazines Benzofurans	1 gm = 167 gm 1 gm = 380 gm 1 gm = 80 gm 1 gm = 2.5 kg 1 gm = 2 kg
Arylcyclohexylamines (PCP-like substances) Methylphenidate analogs Benzodiazepines	1 gm = 1 kg 1 gm = 100 gm 1 'unit' (as defined in Note (F) to the Drug Quantity Table in 2D1.1) = 0.0625 gm

4 In the case of a substance for which paragraphs (A) 5 and (B) above are not applicable, the court shall de-6 termine an equivalency or ratio by considering the 7 following factors, to the extent practicable:". 8 (i) RULES OF CONSTRUCTION.—Nothing in this sec-9 tion, or the amendments made by this section, may be con-10 strued to limit— 11 (1) the prosecution of offenses involving con-

trolled substance analogues under the Controlled
Substances Act (21 U.S.C. 801 et seq.); or

14 (2) the authority of the Attorney General to
15 temporarily or permanently schedule, reschedule, or
16 decontrol controlled substances under provisions of
17 section 201 of the Controlled Substances Act (21
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U.S.C. 811) that are in effect on the day before the
 date of enactment of this Act.

(j) STUDY BY COMPTROLLER GENERAL.—Not later
than 2 years after the date of enactment of this Act, the
Comptroller General of the United States shall complete
a study and submit a report to the Committees on the
Judiciary of the House of Representatives and of the Sena te regarding the costs associated with the amendments
made by subsection (c), including—

10 (1) the annual amounts expended by Federal11 agencies in carrying out the amendments;

(2) the costs associated with arrests, trials, convictions, imprisonment, or imposition of other sanctions in accordance with the amendments; and

(3) the impact (including the fiscal impact) of
the amendments on existing correctional facilities
and the likelihood that those amendments will create
a need for additional capacity for housing prisoners.

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