

119TH CONGRESS
1ST SESSION

H. R. 5316

To amend the Federal Food, Drug, and Cosmetic Act to ensure patients have access to certain shortage and urgent-use compounded medications, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 11, 2025

Mrs. HARSHBARGER (for herself and Mr. CARTER of Georgia) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Federal Food, Drug, and Cosmetic Act to ensure patients have access to certain shortage and urgent-use compounded medications, 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 “Drug Shortage
5 Compounding Patient Access Act of 2025”.

6 **SEC. 2. PHARMACY COMPOUNDING.**

7 (a) COMPOUNDING FOR URGENT ADMINISTRATION
8 TO PATIENTS.—Section 503A(a) of the Federal Food,

1 Drug, and Cosmetic Act (21 U.S.C. 353a(a)) is amend-
2 ed—

3 (1) in paragraph (1), by striking “or” at the
4 end;

5 (2) in paragraph (2)(B)(ii)(II), by striking the
6 period at the end and inserting “; or”; and

7 (3) by adding at the end the following:

8 “(3) notwithstanding the requirement in the
9 matter preceding paragraph (1) that the drug prod-
10 uct is compounded for an identified individual pa-
11 tient based on a valid prescription order or notation
12 described in such matter, is by a licensed pharmacist
13 or licensed physician and the compounded drug
14 product is compounded for distribution in limited
15 quantities to a licensed prescriber for urgent admin-
16 istration to a patient in a hospital or other clinical
17 setting, provided that all of the following are met:

18 “(A) The drug product appeared on the
19 drug shortage list in effect under section 506E
20 at any time during the 60-day period ending on
21 the date of the compounding, distribution, or
22 dispensing of the drug product.

23 “(B) The licensed prescriber certifies by
24 notation on the order to the compounding phar-
25 macist or physician that the licensed prescriber

1 has made reasonable attempts to obtain, and
2 has not been able to obtain, to address the ur-
3 gent medical need a drug product that is com-
4 pounded by an outsourcing facility in accord-
5 ance with section 503B with the same active in-
6 gredient and the same route of administration.

7 “(C) The compounded drug product is la-
8 beled with a beyond-use-date in accordance with
9 applicable United States Pharmacopeia stand-
10 ards.

11 “(D) The licensed pharmacist or licensed
12 physician marks the packaging of the com-
13 pounded drug product with text—

14 “(i) indicating that the drug product
15 is provided to the hospital or other clinical
16 setting only for urgent administration to a
17 patient; and

18 “(ii) requesting that the hospital or
19 other clinical setting provide to the
20 compounding pharmacist or physician the
21 records that identify the patient or pa-
22 tients to whom the drug products were ad-
23 ministered within—

24 “(I) 7 days of each such patient
25 receiving such medication; or

1 “(II) 7 days of each such patient
2 being discharged.

3 “(E) Upon receipt of records requested
4 pursuant to subparagraph (D)(ii), the licensed
5 pharmacist or licensed physician ensures that
6 the patient information in such records is
7 linked with the respective order.

8 “(F) The licensed pharmacist or licensed
9 physician reports adverse events associated with
10 the compounded drug product as soon as pos-
11 sible but not later than 15 days after becoming
12 aware of such events to the MedWatch Adverse
13 Event Reporting program of the Food and
14 Drug Administration (or any successor pro-
15 gram).”.

16 (b) DEFINITION.—Paragraph (2) of section 503A(b)
17 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C.
18 353a(b)(2)) is amended to read as follows:

19 “(2) DEFINITION.—For purposes of paragraph
20 (1)(D), the term ‘essentially a copy of a commer-
21 cially available drug product’ does not include—

22 “(A) a drug product in which there is a
23 change, made for an identified individual pa-
24 tient, which produces for that patient a signifi-
25 cant difference, as determined by the pre-

1 scribing practitioner, between the compounded
2 drug and the comparable commercially available
3 drug product; or

4 “(B) a drug product that meets each of
5 the following conditions:

6 “(i) At any time during the 60-day
7 period ending on the date of the
8 compounding, distribution, or dispensing,
9 the drug product appeared on the drug
10 shortage list in effect under section 506E.

11 “(ii) If the drug product is not com-
12 pounded for an identified individual patient
13 based on a valid prescription order or nota-
14 tion, notwithstanding such requirement in
15 the matter preceding paragraph (1) of sub-
16 section (a), the drug product—

17 “(I) is labeled in accordance sub-
18 paragraphs (C) and (D) of subsection
19 (a)(3); and

20 “(II) is documented by the
21 compounding pharmacist or physician
22 in accordance with subparagraphs (E)
23 and (F) of subsection (a)(3).”.

1 **SEC. 3. MITIGATING DRUG SHORTAGES THROUGH IM-**
2 **PROVED REPORTING.**

3 Section 506C of the Federal Food, Drug, and Cos-
4 metic Act (21 U.S.C. 356c) is amended—

5 (1) in the section heading, by inserting **“OR**
6 **SURGE IN DEMAND FOR”** after **“PRODUCTION**
7 **OF”**;

8 (2) in subsection (a), in the matter following
9 paragraph (2)—

10 (A) by striking “or an interruption of the
11 manufacture of the drug” and inserting “, an
12 interruption of the manufacture of the drug, or
13 a surge in demand for the drug”;

14 (B) by striking “such discontinuance or
15 interruption” and inserting “such discontinu-
16 ance, interruption, or surge in demand”;

17 (C) by striking “the discontinuation or
18 interruption” and inserting “the discontinu-
19 ation, interruption, or surge in demand”;

20 (D) by striking “such discontinuation or
21 interruption, the source” and inserting “such
22 discontinuation, interruption, or surge in de-
23 mand, the source”; and

24 (E) by striking “such discontinuation or
25 interruption; the expected duration of the inter-
26 ruption;” and inserting “such discontinuation,

1 interruption, or surge in demand; the expected
2 duration of the interruption or surge in de-
3 mand”;

4 (3) in subsection (b), by striking paragraphs
5 (1) and (2) and inserting the following:

6 “(1) in the case of a notice of a discontinuance
7 or interruption in the manufacture of a drug—

8 “(A) at least 6 months prior to the date of
9 the discontinuance or interruption; or

10 “(B) if compliance with subparagraph (A)
11 is not possible, as soon as practicable; or

12 “(2) in the case of a notice of a surge in de-
13 mand for a drug, as soon as practicable.”;

14 (4) in subsection (c)—

15 (A) by striking “discontinuance or inter-
16 ruption” and inserting “discontinuance, inter-
17 ruption, or surge in demand”; and

18 (B) by inserting “and outsourcing facilities
19 (as defined in section 503B(d))” after “patient
20 organizations”; and

21 (5) in subsection (h)—

22 (A) in paragraph (1), by striking “and
23 that is subject to section 503(b)(1)” and insert-
24 ing “or the active pharmaceutical ingredient of
25 such a drug”;

1 (B) by amending paragraph (2) to read as
 2 follows:

3 “(2) the term ‘drug shortage’ or ‘shortage’,
 4 with respect to a drug, means a period of time with
 5 the demand or projected demand for the drug within
 6 the United States exceeds the supply of the drug,
 7 taking into consideration—

8 “(A) how the drug is prepared or dis-
 9 pensed, including the route of administration
 10 and dosage form; and

11 “(B) information reported by manufactur-
 12 ers, health care professionals, and patients;”.

13 (C) in paragraph (3)(B), by striking the
 14 period at the end and inserting “; and”; and

15 (D) by adding at the end the following:

16 “(4) the term ‘surge’ means an increase in de-
 17 mand or projected demand for a drug that the man-
 18 ufacturer likely will be unable to meet without mean-
 19 ingful shortfall or delay.”.

20 **SEC. 4. OUTSOURCING FACILITY COMPOUNDING.**

21 Section 503B of the Federal Food, Drug, and Cos-
 22 metic Act (21 U.S.C. 353b) is amended—

23 (1) in subsection (a)(2)(A)(ii)—

24 (A) by striking “appears” and inserting
 25 “appeared”; and

1 (B) by striking “at the time of” and in-
 2 serting “at any time during the 180-day period
 3 ending on the date of”;

4 (2) in subsection (a)(10)(A)(iii)—

5 (A) in subclause (VIII), by striking the
 6 semicolon at the end and inserting “; and”;

7 (B) by striking subclause (IX); and

8 (C) by redesignating subclause (X) as sub-
 9 clause (IX);

10 (3) by redesignating the 2 subsections (d) (re-
 11 lating to definitions and relating to obligation to pay
 12 fees) as subsections (e) and (f), respectively; and

13 (4) by inserting after subsection (c) the fol-
 14 lowing:

15 “(d) LIST OF IDENTIFIED BULK DRUG SUB-
 16 STANCES.—The Secretary shall make publicly available
 17 annual updates on the evaluation of bulk drug substances
 18 for purposes of the list maintained under subsection
 19 (a)(2)(A)(i).”;

20 **SEC. 5. CLARIFYING PROVISIONS; LABELING REQUIRE-**
 21 **MENT.**

22 Section 503A of the Federal Food, Drug, and Cos-
 23 metic Act (21 U.S.C. 353a) is amended—

1 (1) by striking subsection (b)(3)(B) and the
2 matter following such subsection and inserting the
3 following:

4 “(B) such drug product is labeled as fol-
5 lows: ‘This medication has been compounded
6 for dispensing to an individual patient and has
7 not been approved by the Food and Drug Ad-
8 ministration’.”; and

9 (2) in subsection (b)(1)(A)(i)(I) by striking
10 “National Formulary monograph” and inserting
11 “National Formulary drug or dietary supplement
12 monograph”.

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