

# Calendar No. 475

115TH CONGRESS  
2D SESSION

# S. 2789

To prevent substance abuse and reduce demand for illicit narcotics.

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## IN THE SENATE OF THE UNITED STATES

APRIL 26, 2018

Mr. CORNYN (for himself, Mrs. FEINSTEIN, Ms. KLOBUCHAR, Mr. TILLIS, Mr. BLUMENTHAL, Mr. GRASSLEY, and Mr. DURBIN) introduced the following bill; which was read twice and referred to the Committee on the Judiciary

JUNE 19, 2018

Reported by Mr. GRASSLEY, with an amendment

[Strike out all after the enacting clause and insert the part printed in italic]

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# A BILL

To prevent substance abuse and reduce demand for illicit narcotics.

- 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 “Substance Abuse Pre-
- 5       vention Act of 2018”.

1   **SEC. 2. REAUTHORIZATION OF THE OFFICE OF NATIONAL**  
2                   **DRUG CONTROL POLICY.**

3               (a) OFFICE OF NATIONAL DRUG CONTROL POLICY

4    REAUTHORIZATION ACT OF 1998.—

5               (1) IN GENERAL.—The Office of National Drug  
6               Control Policy Reauthorization Act of 1998 (21  
7               U.S.C. 1701 et seq.), as in effect on September 29,  
8               2003, and as amended by the laws described in  
9               paragraph (2), is revived and restored.

10              (2) LAWS DESCRIBED.—The laws described in  
11             this paragraph are:

12               (A) The Office of National Drug Control  
13               Policy Reauthorization Act of 2006 (Public  
14               Law 109-469; 125 Stat. 3502).

15               (B) The Presidential Appointment Effi-  
16               ciency and Streamlining Act of 2011 (Public  
17               Law 112-166; 126 Stat. 1283).

18               (b) REAUTHORIZATION.—Section 715(a) of the Of-  
19       fice of National Drug Control Policy Reauthorization Act  
20       of 1998 (21 U.S.C. 1712(a)) is amended by striking  
21       “2010” and inserting “2022”.

22   **SEC. 3. REAUTHORIZATION OF THE DRUG-FREE COMMU-**  
23                   **NITIES PROGRAM.**

24               Section 1024 of the National Narcotics Leadership  
25       Act of 1988 (21 U.S.C. 1524(a)) is amended by striking  
26       subsections (a) and (b) and inserting the following:

1       “(a) IN GENERAL.—There are authorized to be ap-  
2 propriated to the Office of National Drug Control Policy  
3 to carry out this chapter \$99,000,000 for each of fiscal  
4 years 2018 through 2022.

5       “(b) ADMINISTRATIVE COSTS.—Not more than 8  
6 percent of the funds appropriated to carry out this chapter  
7 may be used by the Office of National Drug Control Policy  
8 to pay administrative costs associated with the responsibil-  
9 ities of the Office under this chapter.”.

**10 SEC. 4. REAUTHORIZATION OF THE NATIONAL COMMUNITY  
11 ANTI-DRUG COALITION INSTITUTE.**

12 Section 4(e)(4) of Public Law 107-82 (21 U.S.C.  
13 1521 note) is amended by striking “2008 through 2012”  
14 and inserting “2018 through 2022”.

**15 SEC. 5. REAUTHORIZATION OF THE HIGH-INTENSITY DRUG**

**16 TRAFFICKING AREA PROGRAM.**

17 Section 707(p) of the Office of National Drug Con-  
18 trol Policy Reauthorization Act of 1998 (21 U.S.C.  
19 ~~1706(p))~~ is amended—

20 (1) in paragraph (4), by striking "and" at the  
21 end.

22 (2) in paragraph (5), by striking the period at  
23 the end and inserting “; and”;

24 (2) by adding at the end the following:

1           “(6) \$280,000,000 for each of fiscal years 2018  
2       through 2022.”.

3   **SEC. 6. REAUTHORIZATION OF DRUG COURT PROGRAM.**

4       Section 1001(a)(25)(A) of title I of the Omnibus  
5   Crime Control and Safe Streets Act of 1968 (34 U.S.C.  
6   10261(a)(25)(A)) is amended by striking “Except as pro-  
7   vided” and all that follows and inserting the following:  
8   “Except as provided in subparagraph (C), there are au-  
9   thorized to be appropriated to carry out part EE  
10   \$75,000,000 for each of fiscal years 2018 through 2022.”.

11   **SEC. 7. DRUG COURT TRAINING AND TECHNICAL ASSIST-  
12       ANCE.**

13       Section 1034 of the National Narcotics Leadership  
14   Act of 1988 (21 U.S.C. 1534) is amended by adding at  
15   the end the following—

16       “(c) DRUG COURT TRAINING AND TECHNICAL AS-  
17   SISTANCE PROGRAM.—Using funds appropriated to carry  
18   out this chapter, the Director may make grants to non-  
19   profit organizations for the purpose of providing training  
20   and technical assistance to drug courts.”.

21   **SEC. 8. DRUG OVERDOSE RESPONSE STRATEGY.**

22       Section 707 of the Office of National Drug Control  
23   Policy Reauthorization Act of 1998 (21 U.S.C. 1706) is  
24   amended by adding at the end the following:

1       “(r) DRUG OVERDOSE RESPONSE STRATEGY IMPLI-  
2 MENTATION.—The Director may use funds appropriated  
3 to carry out this section to implement a drug overdose re-  
4 sponse strategy in high intensity drug trafficking areas on  
5 a nationwide basis by—

6           “(1) coordinating multi-disciplinary efforts to  
7 prevent, reduce, and respond to drug overdoses, in-  
8 cluding the uniform reporting of fatal and non-fatal  
9 overdoses to public health and safety officials;

10          “(2) increasing data sharing among public safe-  
11 ty and public health officials concerning drug-related  
12 abuse trends, including new psychoactive substances,  
13 and related crime; and

14          “(3) enabling collaborative deployment of pre-  
15 vention, intervention, and enforcement resources to  
16 address substance use addiction and narcotics traf-  
17 ficking.”.

18 **SEC. 9. PROTECTING LAW ENFORCEMENT OFFICERS FROM**  
19 **ACCIDENTAL EXPOSURE.**

20          Section 707 of the Office of National Drug Control  
21 Policy Reauthorization Act of 1998 (21 U.S.C. 1706) is  
22 amended by adding at the end the following:

23          “(s) SUPPLEMENTAL GRANTS.—The Director is au-  
24 thorized to use not more than \$10,000,000 of the amounts  
25 otherwise appropriated to carry out this section to provide

1 supplemental competitive grants to high intensity drug  
2 trafficking areas that have experienced high seizures of  
3 fentanyl and new psychoactive substances for the purposes  
4 of—

5           “(1) purchasing portable equipment to test for  
6 fentanyl and other substances;

7           “(2) training law enforcement officers and  
8 other first responders on best practices for handling  
9 fentanyl and other substances; and

10          “(3) purchasing protective equipment, including  
11 overdose reversal drugs.”.

12 **SEC. 10. DEA 360 STRATEGY.**

13          (a) IN GENERAL.—For each of fiscal years 2018  
14 through 2022, the Attorney General, acting through the  
15 Director of the Drug Enforcement Administration, and in  
16 coordination with the Director of the Office of National  
17 Drug Control Policy and the Secretary of Health and  
18 Human Services, may implement a DEA 360 Strategy in  
19 pilot cities across the United States as a response to grow-  
20 ing demand for heroin and opioids in the United States.

21          (b) PROGRAM GOALS.—The goals of the DEA 360  
22 Strategy authorized under subsection (a) shall be—

23            (1) preventing the deadly cycle of drug abuse,  
24 including heroin and opioid abuse, by targeting drug  
25 trafficking organizations and street gangs respon-

1       sible for increasing the supply of narcotics in com-  
2       munities;

3           (2) partnering with the healthcare community  
4       to raise awareness of the dangers of heroin abuse  
5       and prescription opioid abuse; and

6           (3) strengthening community organizations that  
7       provide long-term assistance and support for the re-  
8       duction of drug abuse in the community.

9           (e) PROGRAM SPECIFICATIONS.—In carrying out the  
10      DEA 360 strategy authorized under subsection (a), the  
11      Attorney General shall—

12           (1) issue an implementation strategy for each  
13      pilot city that is tailored to the unique drug abuse  
14      problems of the particular city, details specific meas-  
15      ures that will be taken to address the problems,  
16      identifies key community partners, and sets specific  
17      objectives for success;

18           (2) provide dedicated funding for coordinated  
19      law enforcement actions against drug trafficking or-  
20      ganizations, involving Federal, State, and local law  
21      enforcement officials, including the United States  
22      Attorney's office for the relevant district;

23           (3) conduct diversion control enforcement ac-  
24      tions against registrants with the Drug Enforcement

1       Administration who are unlawfully distributing con-  
2       trolled substances;

3              (4) create partnerships with pharmaceutical  
4       drug manufacturers, wholesalers, pharmacies, and  
5       medical practitioners to develop strategies that re-  
6       duce heroin and opioid abuse, including specific ef-  
7       forts to reduce demand for these substances;

8              (5) increase resources for community partner-  
9       ships with nongovernmental organizations that spe-  
10       cialize in drug abuse prevention, awareness, or treat-  
11       ment; and

12              (6) conduct training and educational campaigns  
13       on best practices for reducing heroin and opioid  
14       abuse for governmental agencies and nongovern-  
15       mental organizations in pilot cities.

16       (d) REPORTS.—For each fiscal year in which the At-  
17       torney General carries out the DEA 360 Strategy author-  
18       ized under subsection (a) in a pilot city, the Attorney Gen-  
19       eral shall issue a public report that details the results of  
20       the program in that particular city, including quantitative  
21       measures to show whether or not the program succeeded  
22       in achieving the objectives for success required under sub-  
23       section (e)(1).

24       (e) ADDITIONAL RESOURCES.—The Director of the  
25       Office of National Drug Control Policy and the Secretary

1 of Health and Human Services may use funds otherwise  
2 appropriated for purposes consistent with this section to  
3 assist in the implementation of the DEA 360 Strategy au-  
4 thorized under subsection (a) in pilot cities.

5 **SEC. 11. COPS ANTI-METH PROGRAM.**

6 Section 1701 of the title I of the Omnibus Crime  
7 Control and Safe Streets Act of 1968 (34 U.S.C. 10381)  
8 is amended—

9 (1) by redesignating subsection (k) as sub-  
10 section (l); and

11 (2) by inserting after subsection (j) the fol-  
12 lowing:

13 “(k) COPS ANTI-METH PROGRAM.—The Attorney  
14 General shall use amounts otherwise appropriated to carry  
15 out this section to make competitive grants, in amounts  
16 of not less than \$1,000,000 for a fiscal year, to State law  
17 enforcement agencies with high seizures of precursor  
18 chemicals, finished methamphetamine, laboratories, and  
19 laboratory dump seizures for the purpose of locating or  
20 investigating illicit activities, such as precursor diversion,  
21 laboratories, or methamphetamine traffickers.”.

22 **SEC. 12. COMPREHENSIVE ADDICTION AND RECOVERY ACT**

23 **EDUCATION AND AWARENESS.**

24 (a) AMENDMENT TO CARA.—Section 102(a) of the  
25 Comprehensive Addiction and Recovery Act of 2016 (Pub-

1 lie Law 114-198; 130 Stat. 698) is amended by inserting  
2 “including the Office of National Drug Control Policy,”  
3 after “agencies.”.

4       (b) USE OF FUNDS.—Subchapter I of chapter 2 of  
5 the National Narcotics Leadership Act of 1988 (21 U.S.C.  
6 1531 et seq.) is amended by adding at the end the fol-  
7 lowing:

10        “The Director may use funds made available to carry  
11 out this chapter for the purpose of administering, partici-  
12 pating in, or expanding awareness campaigns and preven-  
13 tion efforts authorized under section 102 of the Com-  
14 prehensive Addiction and Recovery Act of 2016 (Public  
15 Law 114-198; 130 Stat. 698).”.

18       Part D of title V of the Public Health Service Act  
19 (~~42~~ U.S.C. 290dd et seq.) is amended by adding at the  
20 end the following:

21 "SEC. 550. PROTECTING CHILDREN WITH ADDICTED PAR-  
22 ENTS.

23       “(a) **BEST PRACTICES.**—The Secretary, acting  
24 through the Assistant Secretary for Mental Health and  
25 Substance Use and in cooperation with the Commissioner

1 of the Administration on Children, Youth and Families,  
2 shall collect and disseminate best practices for States re-  
3 garding interventions and strategies to keep families af-  
4 feeted by substance use disorder together, when it can be  
5 done safely. Such best practices shall—

6                 “(1) utilize comprehensive family-centered ap-  
7 proaches;

8                 “(2) ensure that families have access to drug  
9 screening, substance use treatment, medication-as-  
10 sisted treatment approved by the Food and Drug  
11 Administration, and parental support; and

12                 “(3) build upon lessons learned from programs  
13 such as the Maternal, Infant, and Early Childhood  
14 Home Visiting programs under section 511 of the  
15 Social Security Act.

16                 “(b) GRANT PROGRAM.—The Secretary, acting  
17 through the Assistant Secretary for Mental Health and  
18 Substance Use, shall award grants for the development of  
19 programs and models designed to keep pregnant and post-  
20 partum women who have a substance use disorder to-  
21 gether with their newborns, including programs and mod-  
22 els that provide for screenings of pregnant and post-  
23 partum women for substance use disorders, treatment  
24 interventions, supportive housing, nonpharmacological  
25 interventions for children born with neonatal abstinence

1 syndrome, medication assisted treatment, and other recov-  
2 ery supports.”.

3 **SEC. 14. REIMBURSEMENT OF SUBSTANCE USE DISORDER**

4 **TREATMENT PROFESSIONALS.**

5 (a) GAO REPORT.—Not later than January 1, 2020,  
6 the Comptroller General of the United States shall submit  
7 to Congress a report examining how substance use dis-  
8 order services are reimbursed.

9 (b) CMS RECOMMENDATIONS.—Not later than Janu-  
10 ary 1, 2019, the Administrator of the Centers for Medi-  
11 care & Medicaid Services shall examine how substance use  
12 disorder services are reimbursed and shall make rec-  
13ommendations to Congress (taking into consideration the  
14 findings made by the Comptroller General of the United  
15 States in the report required under subsection (a)) as to  
16 how to reimburse the treatment of substance use disorders  
17 at a higher rate in order to attract a more talented work  
18 force.

19 (c) GRANTS TO STATES TO EXPLORE WAYS TO IN-  
20 CREAISE MEDICAID REIMBURSEMENT.—The Secretary of  
21 Health and Human Services is authorized to make grants  
22 to States for the purpose of exploring ways to increase  
23 reimbursement of substance use disorder services under  
24 the Medicaid program under title XIX of the Social Secu-  
25 rity Act (42 U.S.C. 1396 et seq.).

(d) GRANTS TO STATES TO SUPPLEMENT MEDICAID REIMBURSEMENT TO CREDENTIALLED SUBSTANCE USE DISORDER PROFESSIONALS.—The Secretary of Health and Human Services is authorized to make grants to States for the purpose of supplementing the reimbursement paid to eredentialled substance use disorder professionals (as defined by the Seeretary) under the Medicaid program under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

10 SEC. 15. TESTING EVIDENCE-BASED MOBILE APPLICATIONS  
11 FOR THE TREATMENT OF SUBSTANCE USE  
12 DISORDERS.

13 Section 1115A(b)(2) of the Social Security Act (42  
14 U.S.C. 1315a(b)(2)) is amended—

15                             (1) in subparagraph (A), by adding at the end  
16                             the following new sentence: “The models selected  
17                             under this subparagraph shall include the model de-  
18                             scribed in subparagraph (D), which shall be imple-  
19                             mented by not later than January 1, 2020.”; and

20 (2) by adding at the end the following new sub-  
21 paragraph:

22                         “(D) EVIDENCE-BASED MOBILE APPLICA-  
23                         TIONS FOR TREATMENT OF SUBSTANCE USE  
24                         DISORDERS.—The model described in this sub-  
25                         paragraph is a model to test the use of evi-

1           dence-based mobile applications for the treat-  
2           ment of substance use disorders.”.

3   **SEC. 16. MEDICARE HOSPITAL REQUIREMENT TO PROVIDE**  
4           **NALOXONE AS PART OF THE DISCHARGE**  
5           **PROTOCOL TO INDIVIDUALS BEING DIS-**  
6           **CHARGED AFTER SUFFERING AN OPIOID**  
7           **OVERDOSE.**

8       (a) IN GENERAL.—Section 1866(a)(1) of the Social  
9       Security Act (42 U.S.C. 1395ee(a)(1)) is amended—

10           (1) in subparagraph (X), by striking “and” at  
11           the end;

12           (2) in subparagraph (Y), by striking the period  
13           at the end and inserting “, and”; and

14           (3) by inserting after subparagraph (Y), the fol-  
15           lowing new subparagraph:

16           “(Z) in the case of a hospital or critical access  
17           hospital, to provide naloxone and treatment referral  
18           options as part of the discharge protocol to individ-  
19           uals being discharged after suffering an opioid over-  
20           dose.”.

21       (b) EFFECTIVE DATE.—The amendments made by  
22       subsection (a) shall apply to contracts entered into or re-  
23       newed on or after the date of the enactment of this Act.

## 1 SEC. 17. EDUCATIONAL OUTREACH AND ACCESS TO ABUSE-

## 2 DETERRENT OPIOIDS.

## 3 (a) ACCESS TO ABUSE-DETERRENT OPIOIDS.—

4 (1) ACCESS UNDER MEDICARE PART D.—Section  
5 1860D-4(c) of the Social Security Act (42  
6 U.S.C. 1395w-104(c)) is amended by adding at the  
7 end the following new paragraph:

## 8 “(7) ACCESS TO ABUSE-DETERRENT OPIOIDS.—

9 “(A) IN GENERAL.—The Secretary shall  
10 work with PDP sponsors of prescription drug  
11 plans to—

12 “(i) ensure appropriate access to  
13 abuse-deterrent opioids on plan formu-  
14 laries;

15 “(ii) provide advanced abuse-deterrent  
16 opioid targeting (as determined by the Sec-  
17 retary) for beneficiaries identified as at-  
18 risk for opioid abuse under the drug man-  
19 agement program under paragraph (5) or  
20 any other opioid risk management program  
21 established by the sponsor; and

22 “(iii) encourage access to non-opioid  
23 alternatives when medically appropriate.

24 “(B) PROHIBITION ON REQUIRING FAIL  
25 FIRST SCHEMES.—The Secretary shall prohibit  
26 PDP sponsors from requiring fail first schemes,

1           also known as step therapy, with respect to  
2           abuse-deterrent opioids.

3           **“(C) ENCOURAGING EQUAL ACCESS.”**—The  
4           Secretary shall encourage plans to provide equal  
5           access to abuse-deterrent opioids on formulary  
6           tiers and patient cost-sharing.

7           **“(D) ABUSE-DETERRENT OPIOID DEFINED.”**—In this paragraph, the term ‘abuse-deterrent opioid’ means an abuse-deterrent formulation of an opioid, as determined by the Secretary.”.

12           **(2) ACCESS UNDER PRIVATE HEALTH PLANS.**  
13           Subpart H of title XXVII of the Public Health Service Act (42 U.S.C. 300gg–11 et seq.) is amended by  
14           adding at the end the following:

16           **“SEC. 2729. ACCESS TO ABUSE-DETERRENT OPIODS.**

17           **“(a) IN GENERAL.”**—A group health plan and a health  
18           insurance issuer offering group or individual health insurance coverage shall—

20           “(1) ensure appropriate access to abuse-deterrent opioids as a prescription drug health benefit under such plan or coverage;

23           “(2) provide advanced abuse-deterrent opioid targeting (as determined by the Secretary) for en-

1       rollees in the plan or coverage who are identified as  
2       at-risk for opioid abuse; and

3               “(3) encourage access to non-opioid alternatives  
4       when medically appropriate.

5       **“(b) PROHIBITION ON REQUIRING FAIL FIRST  
6 SCHEMES.**—The Secretary shall prohibit a group health  
7 plan and a health insurance issuer offering group or indi-  
8 vidual health insurance coverage from requiring fail first  
9 schemes, also known as step therapy, with respect to  
10 abuse-deterrent opioids.

11       **“(c) ABUSE-DETERRENT OPIOID DEFINED.**—In this  
12 section, the term ‘abuse-deterrent opioid’ means an abuse-  
13 deterrent formulation of an opioid, as determined by the  
14 Secretary.”.

15               **(3) EFFECTIVE DATE.**—The amendments made  
16 by this subsection shall apply with respect to plan  
17 years beginning on or after January 1, 2019.

18       **(b) EDUCATIONAL OUTREACH.**—The Secretary of  
19 Health and Human Services shall educate health insur-  
20 ance issuers, Medicare Advantage plans under part C of  
21 title XVIII of the Social Security Act (42 U.S.C. 1395w-  
22 21 et seq.), and prescription drug plans under part D of  
23 such title (42 U.S.C. 1395w-101 et seq.) on opioid abuse  
24 prevention, including the use of abuse-deterrent opioids

1 (as such term is defined in section 2729 of the Public  
2 Health Service Act, as added by subsection (a)(2)).

3 **SEC. 18. GRANT PROGRAM TO PROVIDE SUPPORT FOR**  
4 **MEDICATION ASSISTED TREATMENT.**

5 (a) TRAINING GRANTS.—The Secretary of Health  
6 and Human Services shall award grants to States for the  
7 purpose of training non-physician health care profes-  
8 sionals in the use of medication-assisted treatment ap-  
9 proved by the Food and Drug Administration and related  
10 best practices.

11 (b) REFERRAL SYSTEM GRANTS.—The Secretary of  
12 Health and Human Services shall award grants to States  
13 for the purpose of improving referral systems and ensur-  
14 ing that such systems are current and accurate, in order  
15 to better enable practitioners to refer patients who are  
16 prescribed medication assisted treatment to cognitive ther-  
17 apy.

18 **SEC. 19. SOBRIETY TREATMENT AND RECOVERY TEAMS**  
19 **(START).**

20 Title III of the Comprehensive Addiction and Recov-  
21 ery Act of 2016 (Public Law 114–198; 130 Stat. 717)  
22 is amended by adding at the end the following:

23 **“SEC. 304. SOBRIETY TREATMENT AND RECOVERY TEAMS.**

24 “(a) IN GENERAL.—The Director of the Office of  
25 National Drug Control Policy, in coordination with the

1     Secretary of Health and Human Services, may make  
2     grants to States, units of local government, or tribal gov-  
3     ernments to establish or expand Sobriety Treatment And  
4     Recovery Team (referred to in this section as ‘START’)  
5     programs to determine the effectiveness of pairing social  
6     workers and mentors with families that are struggling  
7     with substance abuse and child abuse or neglect in order  
8     to help provide peer support, intensive treatment, and  
9     child welfare services.

10       “(b) ALLOWABLE USES.—A grant awarded under  
11     this section may be used for one or more of the following  
12     activities:

13           “(1) Training eligible staff, including social  
14     workers, social services coordinators, child welfare  
15     specialists, substance use disorder treatment profes-  
16     sionals, and mentors.

17           “(2) Expanding access to substance use dis-  
18     order treatment services and drug testing.

19           “(3) Enhancing data sharing with law enforce-  
20     ment agencies and child welfare agencies.

21           “(4) Program evaluation.

22       “(e) PROGRAM REQUIREMENTS.—A family may be  
23     eligible to participate in a START program that receives  
24     funding under this section only if—

1           “(1) there is a substantiated record or finding  
2       of child abuse or neglect within the family; and

3           “(2) substance abuse was the primary reason  
4       for the record or finding described in paragraph (1).

5           **“(d) AUTHORIZATION OF APPROPRIATIONS.**—For  
6       each of fiscal years 2018 through 2022, the Director of  
7       the Office of National Drug Control Policy, in consultation  
8       with the Secretary of Health and Human Services, is au-  
9       thorized to award not more than \$10,000,000 of amounts  
10      otherwise appropriated for comprehensive opioid abuse re-  
11      duction activities for purposes of carrying out this sec-  
12      tion.”.

13 **SEC. 20. PROVIDER EDUCATION.**

14       Not later than 90 days after the date of enactment  
15   of this Act, the Attorney General, in consultation with the  
16   Secretary of Health and Human Services, shall complete  
17   the plan related to medical registration coordination re-  
18   quired by Senate Report 114-239, which accompanied the  
19   Veterans Care Financial Protection Act of 2017 (Public  
20   Law 115-131, 132 Stat. 334), including through the  
21   issuance of necessary rules or regulations.

22 **SECTION 1. SHORT TITLE.**

23       *This Act may be cited as the “Substance Abuse Preven-*  
24   *tion Act of 2018”.*

1   **SEC. 2. REAUTHORIZATION OF THE OFFICE OF NATIONAL**2                   **DRUG CONTROL POLICY.**3               (a) *OFFICE OF NATIONAL DRUG CONTROL POLICY RE-*4 *AUTHORIZATION ACT OF 1998.—*

5               (1) *IN GENERAL.—The Office of National Drug*  
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7 *U.S.C. 1701 et seq.), as in effect on September 29,*  
8 *2003, and as amended by the laws described in para-*  
9 *graph (2), is revived and restored.*

10             (2) *LAWS DESCRIBED.—The laws described in*  
11 *this paragraph are:*

12             (A) *The Office of National Drug Control*  
13 *Policy Reauthorization Act of 2006 (Public Law*  
14 *109–469; 120 Stat. 3502).*

15             (B) *The Presidential Appointment Effi-*  
16 *ciency and Streamlining Act of 2011 (Public*  
17 *Law 112–166; 126 Stat. 1283).*

18             (b) *REAUTHORIZATION.—Section 715(a) of the Office*  
19 *of National Drug Control Policy Reauthorization Act of*  
20 *1998 (21 U.S.C. 1712(a)) is amended by striking “2010”*  
21 *and inserting “2022”.*

22   **SEC. 3. REAUTHORIZATION OF THE DRUG-FREE COMMU-**  
23                   **NITIES PROGRAM.**

24             *Section 1024 of the National Narcotics Leadership Act*  
25 *of 1988 (21 U.S.C. 1524(a)) is amended by striking sub-*  
26 *sections (a) and (b) and inserting the following:*

1       “(a) *IN GENERAL.*—There are authorized to be appro-  
2 priated to the Office of National Drug Control Policy to  
3 carry out this chapter \$99,000,000 for each of fiscal years  
4 2018 through 2022.

5       “(b) *ADMINISTRATIVE COSTS.*—Not more than 8 per-  
6 cent of the funds appropriated to carry out this chapter  
7 may be used by the Office of National Drug Control Policy  
8 to pay administrative costs associated with the responsibil-  
9 ities of the Office under this chapter.”.

10 **SEC. 4. REAUTHORIZATION OF THE NATIONAL COMMUNITY**

11                   **ANTI-DRUG COALITION INSTITUTE.**

12       Section 4(c)(4) of Public Law 107–82 (21 U.S.C. 1521  
13 note) is amended by striking “2008 through 2012” and in-  
14 serting “2018 through 2022”.

15 **SEC. 5. REAUTHORIZATION OF THE HIGH-INTENSITY DRUG**

16                   **TRAFFICKING AREA PROGRAM.**

17       Section 707(p) of the Office of National Drug Control  
18 Policy Reauthorization Act of 1998 (21 U.S.C. 1706(p)) is  
19 amended—

20                  (1) in paragraph (4), by striking “and” at the  
21 end;

22                  (2) in paragraph (5), by striking the period at  
23 the end and inserting “; and”; and

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

1           “(6) \$280,000,000 for each of fiscal years 2018  
2       through 2022.”.

3   **SEC. 6. REAUTHORIZATION OF DRUG COURT PROGRAM.**

4       *Section 1001(a)(25)(A) of title I of the Omnibus Crime  
5     Control and Safe Streets Act of 1968 (34 U.S.C.  
6     10261(a)(25)(A)) is amended by striking “Except as pro-  
7     vided” and all that follows and inserting the following:  
8     “Except as provided in subparagraph (C), there are author-  
9     ized to be appropriated to carry out part EE \$75,000,000  
10   for each of fiscal years 2018 through 2022.”.*

11   **SEC. 7. DRUG COURT TRAINING AND TECHNICAL ASSIST-  
12       ANCE.**

13       *Section 705 of the Office of National Drug Control Pol-  
14     icy Reauthorization Act of 1998 (21 U.S.C. 1704) is amend-  
15     ed by adding at the end the following—*

16       “*(e) DRUG COURT TRAINING AND TECHNICAL ASSIST-  
17       ANCE PROGRAM.—Using funds appropriated to carry out  
18     this title, the Director may make grants to nonprofit orga-  
19     nizations for the purpose of providing training and tech-  
20     nical assistance to drug courts.”.*

21   **SEC. 8. DRUG OVERDOSE RESPONSE STRATEGY.**

22       *Section 707 of the Office of National Drug Control Pol-  
23     icy Reauthorization Act of 1998 (21 U.S.C. 1706) is amend-  
24     ed by adding at the end the following:*

1       “(r) *DRUG OVERDOSE RESPONSE STRATEGY IMPLEMENTATION.*—The Director may use funds appropriated to  
2 carry out this section to implement a drug overdose re-  
3 sponse strategy in high intensity drug trafficking areas on  
4 a nationwide basis by—

5             “(1) coordinating multi-disciplinary efforts to  
6 prevent, reduce, and respond to drug overdoses, in-  
7 cluding the uniform reporting of fatal and non-fatal  
8 overdoses to public health and safety officials;

9             “(2) increasing data sharing among public safe-  
10 ty and public health officials concerning drug-related  
11 abuse trends, including new psychoactive substances,  
12 and related crime; and

13             “(3) enabling collaborative deployment of preven-  
14 tion, intervention, and enforcement resources to ad-  
15 dress substance use addiction and narcotics traf-  
16 ficking.”.

17       **SEC. 9. PROTECTING LAW ENFORCEMENT OFFICERS FROM  
18 ACCIDENTAL EXPOSURE.**

19       Section 707 of the Office of National Drug Control Pol-  
20 icy Reauthorization Act of 1998 (21 U.S.C. 1706), as  
21 amended by section 8, is amended by adding at the end  
22 the following:

23             “(s) *SUPPLEMENTAL GRANTS.*—The Director is au-  
24 thorized to use not more than \$10,000,000 of the amounts

1 otherwise appropriated to carry out this section to provide  
2 supplemental competitive grants to high intensity drug  
3 trafficking areas that have experienced high seizures of  
4 fentanyl and new psychoactive substances for the purposes  
5 of—

6           “(1) purchasing portable equipment to test for  
7 fentanyl and other substances;

8           “(2) training law enforcement officers and other  
9 first responders on best practices for handling  
10 fentanyl and other substances; and

11           “(3) purchasing protective equipment, including  
12 overdose reversal drugs.”.

13 **SEC. 10. COPS ANTI-METH PROGRAM.**

14       Section 1701 of title I of the Omnibus Crime Control  
15 and Safe Streets Act of 1968 (34 U.S.C. 10381) is amend-  
16 ed—

17           (1) by redesignating subsection (k) as subsection  
18 (l); and

19           (2) by inserting after subsection (j) the following:

20       “(k) COPS ANTI-METH PROGRAM.—The Attorney  
21 General shall use amounts otherwise appropriated to carry  
22 out this section to make competitive grants, in amounts of  
23 not less than \$1,000,000 for a fiscal year, to State law en-  
24 forcement agencies with high seizures of precursor chemi-  
25 cals, finished methamphetamine, laboratories, and labora-

1 *tory dump seizures for the purpose of locating or inves-*  
2 *tigating illicit activities, such as precursor diversion, lab-*  
3 *oratories, or methamphetamine traffickers.”.*

4 **SEC. 11. COPS ANTI-HEROIN TASK FORCE PROGRAM.**

5 *Section 1701 of title I of the Omnibus Crime Control*  
6 *and Safe Streets Act of 1968 (34 U.S.C. 10381) is amend-*  
7 *ed—*

8 *(1) by redesignating subsection (l), as so redesign-*  
9 *nated by section 10, as subsection (m); and*

10 *(2) by inserting after subsection (k), as added by*  
11 *section 10, the following:*

12 *“(l) COPS ANTI-HEROIN TASK FORCE PROGRAM.—The*  
13 *Attorney General shall use amounts otherwise appropriated*  
14 *to carry out this section, or other amounts as appropriated,*  
15 *to make competitive grants to State law enforcement agen-*  
16 *cies in States with high per capita rates of primary treat-*  
17 *ment admissions, for the purpose of locating or inves-*  
18 *tigating illicit activities, through Statewide collaboration,*  
19 *relating to the distribution of heroin, fentanyl, or*  
20 *carfentanil or relating to the unlawful distribution of pre-*  
21 *scription opioids.”.*

1 **SEC. 12. COMPREHENSIVE ADDICTION AND RECOVERY ACT**2 **EDUCATION AND AWARENESS.**

3       *Part D of title V of the Public Health Service Act (42  
4 U.S.C. 290dd et seq.) is amended by adding at the end the  
5 following:*

6 **“SEC. 550. SERVICES FOR FAMILIES AND PATIENTS IN CRI-**7 **SIS.**

8       “(a) *IN GENERAL.—The Secretary may make grants  
9 to entities that focus on addiction and substance use dis-  
10 orders and specialize in family and patient services, advo-  
11 cacy for patients and families, and educational informa-  
12 tion.*

13       “(b) *ALLOWABLE USES.—A grant awarded under this  
14 section may be used for 1 or more of the following activities:*

15           “(1) *To expand phone line or call center services  
16 with professional, clinical staff that provide, for fami-  
17 lies and individuals impacted by a substance use dis-  
18 order, support, access to treatment resources, brief as-  
19 sessments, medication and overdose prevention edu-  
20 cation, compassionate listening services, recovery sup-  
21 port or peer specialists, bereavement and grief sup-  
22 port, and case management.*

23           “(2) *Continued development of health informa-  
24 tion technology systems that leverage new and upcom-  
25 ing technology and techniques for prevention, inter-*

1 vention, and filling resource gaps in communities  
2 that are underserved.

3 “(3) To enhance and operate treatment and re-  
4 covery resources, easy-to-read scientific and evidence-  
5 based education on addiction and substance use dis-  
6 orders, and other informational tools for families and  
7 individuals impacted by a substance use disorder and  
8 community stakeholders, such as law enforcement  
9 agencies.

10 “(4) To provide training and technical assist-  
11 ance to State and local governments, law enforcement  
12 agencies, health care systems, research institutions,  
13 and other stakeholders.

14 “(5) To expand upon and implement educational  
15 information using evidence-based information on sub-  
16 stance use disorders.

17 “(6) To expand the training of community stake-  
18 holders, law enforcement officers, and families across  
19 a broad-range of addiction, health, and related topics  
20 on substance use disorders, local issues and commu-  
21 nity-specific issues related to the drug epidemic.

22 “(7) Program evaluation.

23 “(c) AUTHORIZATION OF APPROPRIATIONS.—For each  
24 of fiscal years 2018 through 2022, the Secretary is author-  
25 ized to award not more than \$10,000,000 of amounts other-

1 wise appropriated to the Secretary for comprehensive opioid  
2 abuse reduction activities for purposes of carrying out this  
3 section.”.

4 **SEC. 13. PROTECTING CHILDREN WITH ADDICTED PAR-**  
5 **ENTS.**

6 *Part D of title V of the Public Health Service Act (42*  
7 *U.S.C. 290dd et seq.), as amended by section 12, is further*  
8 *amended by adding at the end the following:*

9 **“SEC. 551. PROTECTING CHILDREN WITH ADDICTED PAR-**  
10 **ENTS.**

11 “(a) *BEST PRACTICES.—The Secretary, acting*  
12 *through the Assistant Secretary and in cooperation with the*  
13 *Commissioner of the Administration on Children, Youth*  
14 *and Families, shall collect and disseminate best practices*  
15 *for States regarding interventions and strategies to keep*  
16 *families affected by a substance use disorder together, when*  
17 *it can be done safely. Such best practices shall—*

18 “(1) *utilize comprehensive family-centered ap-*  
19 *proaches;*

20 “(2) *ensure that families have access to drug*  
21 *screening, substance use disorder treatment, medica-*  
22 *tion-assisted treatment approved by the Food and*  
23 *Drug Administration, and parental support; and*

24 “(3) *build upon lessons learned from programs*  
25 *such as the maternal, infant, and early childhood*

1       *home visiting program under section 511 of the So-*  
2       *cial Security Act.*

3       “*(b) GRANT PROGRAM.—The Secretary shall award*  
4       *grants to States, units of local government, and tribal gov-*  
5       *ernments to—*

6           “(1) *develop programs and models designed to*  
7       *keep pregnant and post-partum women who have a*  
8       *substance use disorder together with their newborns,*  
9       *including programs and models that provide for*  
10      *screenings of pregnant and post-partum women for*  
11      *substance use disorders, treatment interventions, sup-*  
12      *portive housing, nonpharmacological interventions for*  
13      *children born with neonatal abstinence syndrome,*  
14      *medication assisted treatment, and other recovery*  
15      *supports; and*

16           “(2) *support the attendance of children who have*  
17      *a family member living with a substance use disorder*  
18      *at therapeutic camps or other therapeutic programs*  
19      *aimed at addiction prevention education and delay-*  
20      *ing the onset of first use, providing trusted mentors*  
21      *and education on coping strategies that these children*  
22      *can use in their daily lives, and family support ini-*  
23      *tiatives aimed at keeping these families together.”.*

1   **SEC. 14. REIMBURSEMENT OF SUBSTANCE USE DISORDER**

2                   **TREATMENT PROFESSIONALS.**

3         *(a) GAO REPORT.—Not later than January 1, 2020,*  
4     *the Comptroller General of the United States shall submit*  
5     *to Congress a report examining how substance use disorder*  
6     *services are reimbursed.*

7         *(b) GRANTS TO STATES TO SUPPLEMENT MEDICAID*  
8     *REIMBURSEMENT TO CREDENTIALLED SUBSTANCE USE*  
9     *DISORDER PROFESSIONALS.—The Secretary of Health and*  
10   *Human Services is authorized to make grants to States for*  
11   *the purpose of supplementing the reimbursement paid to*  
12   *credentialed substance use disorder professionals (as defined*  
13   *by the Secretary) under the Medicaid program under title*  
14   *XIX of the Social Security Act (42 U.S.C. 1396 et seq.).*

15   **SEC. 15. SOBRIETY TREATMENT AND RECOVERY TEAMS**  
16                   **(START).**

17         *Title V of the Public Health Service Act (42 U.S.C.*  
18   *290dd et seq.), as amended by section 13, is further amend-*  
19   *ed by adding at the end the following:*

20   **“SEC. 552. SOBRIETY TREATMENT AND RECOVERY TEAMS.**

21         *“(a) IN GENERAL.—The Secretary may make grants*  
22   *to States, units of local government, or tribal governments*  
23   *to establish or expand Sobriety Treatment And Recovery*  
24   *Team (referred to in this section as ‘START’) programs*  
25   *to determine the effectiveness of pairing social workers and*  
26   *mentors with families that are struggling with a substance*

1   *use disorder and child abuse or neglect in order to help pro-*  
2   *vide peer support, intensive treatment, and child welfare*  
3   *services.*

4         “(b) *ALLOWABLE USES.*—A grant awarded under this  
5    *section may be used for one or more of the following activi-*  
6   *ties:*

7             “(1) *Training eligible staff, including social*  
8   *workers, social services coordinators, child welfare*  
9   *specialists, substance use disorder treatment profes-*  
10   *sionals, and mentors.*

11             “(2) *Expanding access to substance use disorder*  
12   *treatment services and drug testing.*

13             “(3) *Enhancing data sharing with law enforce-*  
14   *ment agencies and child welfare agencies.*

15             “(4) *Program evaluation.*

16         “(c) *PROGRAM REQUIREMENTS.*—A family may be eli-  
17   *gible to participate in a START program that receives*  
18   *funding under this section only if—*

19             “(1) *there is a substantiated record or finding of*  
20   *child abuse or neglect within the family; and*

21             “(2) *substance use disorder was the primary rea-*  
22   *son for the record or finding described in paragraph*  
23   *(1).*

24         “(d) *AUTHORIZATION OF APPROPRIATIONS.*—For each

25   *of fiscal years 2018 through 2022, the Secretary is author-*

1 ized to award not more than \$10,000,000 of amounts other-  
2 wise appropriated to the Secretary for comprehensive opioid  
3 abuse reduction activities for purposes of carrying out this  
4 section.”.

5 **SEC. 16. PROVIDER EDUCATION.**

6 Not later than 60 days after the date of enactment of  
7 this Act, the Attorney General, in consultation with the Sec-  
8 retary of Health and Human Services, shall complete the  
9 plan related to medical registration coordination required  
10 by Senate Report 114–239, which accompanied the Veterans  
11 Care Financial Protection Act of 2017 (Public Law 115–  
12 131; 132 Stat. 334).

**Calendar No. 475**

115<sup>TH</sup> CONGRESS  
2D SESSION  
**S. 2789**

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**A BILL**

To prevent substance abuse and reduce demand for  
illicit narcotics.

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JUNE 19, 2018

Reported with an amendment