

117TH CONGRESS
2D SESSION

S. 4794

To amend the Public Health Service Act with respect to opioid overdose reversal medication access, education, and co-prescribing grant programs, and for other purposes.

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 7, 2022

Ms. BALDWIN introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend the Public Health Service Act with respect to opioid overdose reversal medication access, education, and co-prescribing grant programs, 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 “Naloxone Education
5 and Access Act”.

1 **SEC. 2. OPIOID OVERDOSE REVERSAL MEDICATION AC-**
 2 **CESS, EDUCATION, AND CO-PRESCRIBING**
 3 **GRANT PROGRAMS.**

4 Section 545 of the Public Health Service Act (42
 5 U.S.C. 290ee) is amended—

6 (1) in the section heading, by striking “**AC-**
 7 **CESS AND EDUCATION**” and inserting “**ACCESS,**
 8 **EDUCATION, AND CO-PRESCRIBING**”;

9 (2) in subsection (a)—

10 (A) in the subsection heading, by striking
 11 “**TO STATES**”;

12 (B) in the matter preceding paragraph (1),
 13 by striking “States” and inserting “eligible en-
 14 tities”;

15 (C) in paragraph (1), by striking “for
 16 pharmacists to dispense a drug or device ap-
 17 proved or cleared” and inserting “that increase
 18 access to drugs and devices approved, cleared,
 19 or otherwise legally marketed”;

20 (D) by redesignating paragraphs (3) and
 21 (4) as paragraphs (5) and (6), respectively;

22 (E) by inserting after paragraph (2) the
 23 following:

24 “(3) encourage health care providers to co-pre-
 25 scribe, as appropriate, drugs or devices approved,
 26 cleared, or otherwise legally marketed under the

1 Federal Food, Drug, and Cosmetic Act for emer-
 2 gency treatment of known or suspected opioid over-
 3 dose;

4 “(4) support innovative community-based dis-
 5 tribution programs of drugs or devices approved,
 6 cleared, or otherwise legally marketed under the
 7 Federal Food, Drug, and Cosmetic Act for emer-
 8 gency treatment of known or suspected opioid over-
 9 dose;”;

10 (F) in paragraphs (5) and (6), as so redes-
 11 ignated, by striking “approved or cleared” each
 12 place it appears and inserting “approved,
 13 cleared, or otherwise legally marketed”;

14 (3) in subsection (b)—

15 (A) by striking “State” and inserting “eli-
 16 gible entity”; and

17 (B) by striking “approved or cleared” and
 18 inserting “approved, cleared, or otherwise le-
 19 gally marketed”;

20 (4) in subsection (c)—

21 (A) in the matter preceding paragraph (1),
 22 by striking “States” and inserting “eligible en-
 23 tities”; and

1 (B) by striking “approved or cleared” each
 2 place it appears and inserting “approved,
 3 cleared, or otherwise legally marketed”;
 4 (5) in subsection (d)—

5 (A) in paragraph (1), by striking “A
 6 State” and inserting “An eligible entity”;

7 (B) in paragraph (2), by striking “3” and
 8 inserting “5”; and

9 (C) by amending paragraph (3) to read as
 10 follows:

11 “(3) LIMITATION.—An eligible entity may
 12 use—

13 “(A) not more than 10 percent of a grant
 14 under this section for educating the public pur-
 15 suant to subsection (a)(6); and

16 “(B) not less than 20 percent of a grant
 17 under this section to offset cost-sharing for dis-
 18 tribution and dispensing of drugs or devices ap-
 19 proved, cleared, or otherwise legally marketed
 20 under the Federal Food, Drug, and Cosmetic
 21 Act for emergency treatment of known or sus-
 22 pected opioid overdose.”;

23 (6) in subsection (e), by striking “a State” and
 24 inserting “an eligible entity”;

25 (7) in subsection (f)—

1 (A) by striking “A State” and inserting
 2 “An eligible entity”;

3 (B) by striking “in the State” and insert-
 4 ing “in the jurisdiction of the eligible entity”;
 5 and

6 (C) by striking “approved or cleared” and
 7 inserting “approved, cleared, or otherwise le-
 8 gally marketed”;

9 (8) by amending subsection (g) to read as fol-
 10 lows:

11 “(g) DEFINITIONS.—In this section:

12 “(1) ELIGIBLE ENTITY.—The term ‘eligible en-
 13 tity’ means a State, locality, Indian Tribe, Tribal or-
 14 ganization, or Urban Indian organization.

15 “(2) INDIAN TRIBE.—The term ‘Indian Tribe’
 16 has the meaning given the term in section 4 of the
 17 Indian Self-Determination and Education Assistance
 18 Act.

19 “(3) STANDING ORDER.—The term ‘standing
 20 order’ means a document prepared by a person au-
 21 thorized to prescribe medication that permits an-
 22 other person to acquire, dispense, or administer
 23 medication without a person-specific prescription.

24 “(4) TRIBAL ORGANIZATION.—The term ‘Tribal
 25 organization’ has the meaning given the term in sec-

1 tion 4 of the Indian Self-Determination and Edu-
2 cation Assistance Act.

3 “(5) URBAN INDIAN ORGANIZATION.—The term
4 ‘Urban Indian organization’ has the meaning given
5 the term in section 4 of the Indian Health Care Im-
6 provement Act.”; and

7 (9) in subsection (h)(1)—

8 (A) by striking “\$5,000,000” and inserting
9 “\$10,000,000”; and

10 (B) by striking “2017 through 2019” and
11 inserting “2023 through 2027”.

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