

Public Law 117–250  
117th Congress

An Act

Dec. 20, 2022  
[S. 2796]

Rural  
Opioid Abuse  
Prevention Act.  
34 USC 10101  
note.

Procedures.

Time period.  
Certification.  
Data.

To amend the Omnibus Crime Control and Safe Streets Act of 1968 to provide for the eligibility of rural community response pilot programs for funding under the Comprehensive Opioid Abuse Grant Program, and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE.**

This Act may be cited as the “Rural Opioid Abuse Prevention Act”.

**SEC. 2. ELIGIBILITY OF RURAL COMMUNITY RESPONSE PILOT PROGRAMS FOR FUNDING UNDER THE COMPREHENSIVE OPIOID ABUSE GRANT PROGRAM.**

Section 3021 of title I of the Omnibus Crime Control and Safe Streets Act of 1968 (34 U.S.C. 10701) is amended—

(1) in subsection (a)(1)—

(A) in subparagraph (F), by striking “and”;

(B) in subparagraph (G), by striking the period at the end and inserting “; and”; and

(C) by adding at the end the following:

“(H) a pilot program for rural areas to implement community response programs that focus on reducing opioid overdose deaths, which may include presenting alternatives to incarceration, as described in subsection (f).”; and

(2) by adding at the end the following:

“(f) RURAL PILOT PROGRAM.—

“(1) IN GENERAL.—The pilot program described under this subsection shall make grants to rural areas to implement community response programs to reduce opioid overdose deaths. Grants issued under this subsection shall be jointly operated by units of local government, in collaboration with public safety and public health agencies or public safety, public health and behavioral health collaborations. A community response program under this subsection shall identify gaps in community prevention, treatment, and recovery services for individuals who encounter the criminal justice system and shall establish treatment protocols to address identified shortcomings. The Attorney General, through the Office of Justice Programs, shall increase the amount provided as a grant under this section for a pilot program by no more than five percent for each of the two years following certification by the Attorney General of the submission of data by the rural area on the prescribing

of schedules II, III, and IV controlled substances to a prescription drug monitoring program, or any other centralized database administered by an authorized State agency, which includes tracking the dispensation of such substances, and providing for interoperability and data sharing with each other such program (including an electronic health records system) in each other State, and with any interstate entity that shares information between such programs.

“(2) RULES OF CONSTRUCTION.—Nothing in this subsection shall be construed to—

- “(A) direct or encourage a State to use a specific interstate data sharing program; or
- “(B) limit or prohibit the discretion of a prescription drug monitoring program for interoperability connections to other programs (including electronic health records systems, hospital systems, pharmacy dispensing systems, or health information exchanges).”.

Approved December 20, 2022.

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LEGISLATIVE HISTORY—S. 2796:

CONGRESSIONAL RECORD:

Vol. 167 (2021): Dec. 8, considered and passed Senate.  
Vol. 168 (2022): Dec. 5, 6, considered and passed House.

