

Editorial Notes

AMENDMENTS

2021—Pub. L. 116-315 substituted “certain” for “catastrophically disabled” in section catchline, designated existing provisions as subsec. (a) and inserted heading, substituted “a covered veteran” for “a veteran who is catastrophically disabled, as defined by the Secretary,” and added subsec. (b).

Statutory Notes and Related Subsidiaries

EFFECTIVE DATE OF 2021 AMENDMENT

Pub. L. 116-315, title III, § 3002(c), Jan. 5, 2021, 134 Stat. 4991, provided that: “The amendments made by this section [amending this section] shall take effect on the day that is one year after the date of the enactment of this Act [Jan. 5, 2021].”

§ 1730B. Access to State prescription drug monitoring programs

(a) ACCESS TO PROGRAMS.—(1) Any licensed health care provider or delegate of such a provider shall be considered an authorized recipient or user for the purpose of querying and receiving data from the national network of State-based prescription drug monitoring programs, or any individual State or regional prescription drug monitoring program, to support the safe and effective prescribing of controlled substances to covered patients.

(2) Under the authority granted by paragraph (1)—

(A) licensed health care providers or delegates of such providers shall query the national network of State-based prescription monitoring programs, or, if providing care in a State that does not participate in such national network, an individual State or regional prescription drug monitoring program, in accordance with applicable regulations and policies of the Veterans Health Administration; and

(B) notwithstanding any general or specific provision of law, rule, or regulation of a State, no State may restrict the access of licensed health care providers or delegates of such providers from accessing that State’s prescription drug monitoring programs.

(3) No State shall deny or revoke the license, registration, or certification of a licensed health care provider or delegate who otherwise meets that State’s qualifications for holding the license, registration, or certification on the basis that the licensed health care provider or delegate queried or received data, or attempted to query or receive data, from the national network of State-based prescription drug monitoring programs, or any individual State or regional prescription drug monitoring program, under this section.

(b) COVERED PATIENTS.—For purposes of this section, a covered patient is a patient who—

(1) receives a prescription for a controlled substance; and

(2) is not receiving palliative care or enrolled in hospice care.

(c) DEFINITIONS.—In this section:

(1) The term “controlled substance” has the meaning given such term in section 102(6) of the Controlled Substances Act (21 U.S.C. 802(6)).

(2) The term “delegate” means a person or automated system accessing the national network of State-based prescription monitoring programs, or any individual State or regional prescription drug monitoring program, at the direction or under the supervision of a licensed health care provider.

(3) The term “licensed health care provider” means a health care provider employed by the Department who is licensed, certified, or registered within any State to fill or prescribe medications within the scope of his or her practice as a Department employee.

(4) The term “national network of State-based prescription monitoring programs” means an interconnected nation-wide system that facilitates the transfer to State prescription drug monitoring program data across State lines.

(5) The term “State” means a State, as defined in section 101(20) of this title, or a political subdivision of a State.

(Added Pub. L. 115-182, title I, § 134(a), June 6, 2018, 132 Stat. 1428; amended Pub. L. 115-251, title II, § 206, Sept. 29, 2018, 132 Stat. 3173.)

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AMENDMENTS

2018—Subsec. (a)(1). Pub. L. 115-251, § 206(1)(A), inserted “, or any individual State or regional prescription drug monitoring program,” after “programs”.

Subsec. (a)(2)(A). Pub. L. 115-251, § 206(1)(B), substituted “the national network of State-based prescription monitoring programs, or, if providing care in a State that does not participate in such national network, an individual State or regional prescription drug monitoring program,” for “such network”.

Subsec. (a)(3). Pub. L. 115-251, § 206(1)(C), which directed “inserting ‘, or any individual State or regional prescription drug monitoring program,’ after programs”, was executed by inserting the quoted text after “programs” as if that word had been enclosed in quotation marks in the directory language, to reflect the probable intent of Congress.

Subsec. (c)(2). Pub. L. 115-251, § 206(2), inserted “, or any individual State or regional prescription drug monitoring program,” after “programs”.

§ 1730C. Licensure of health care professionals providing treatment via telemedicine

(a) IN GENERAL.—Notwithstanding any provision of law regarding the licensure of health care professionals, a covered health care professional may practice the health care profession of the health care professional at any location in any State, regardless of where the covered health care professional or the patient is located, if the covered health care professional is using telemedicine to provide treatment to an individual under this chapter.

(b) COVERED HEALTH CARE PROFESSIONALS.—For purposes of this section, a covered health care professional is any of the following individuals:

(1) A health care professional who—

(A) is an employee of the Department appointed under section 7306, 7401, 7405, 7406, or 7408 of this title or under title 5;

(B) is authorized by the Secretary to provide health care under this chapter;

(C) is required to adhere to all standards for quality relating to the provision of