

Summary of Major H.R. 6 Provisions

Prevention

- ***Appalachian Regional Commission (ARC)***: H.R.6 allows the ARC to provide grants in Appalachia for projects aimed at reducing drug abuse and the negative effects of drug abuse.
- ***Prescription assurance***: The bill deters prescription fraud and diversion by requiring e-prescribing for certain controlled substances covered by Medicare Part D or Medicare Advantage plans starting in 2021. To better inform prescriber decisions, the bill improves states' ability to share Prescription Drug Monitoring Program (PDMP) data with one another and requires Medicaid providers to check relevant prescription drug monitoring programs (PDMPs) before prescribing a Schedule II controlled substance. The bill also encourages Medicaid providers to integrate PDMP usage into a Medicaid provider's clinical workflow and establishes standard criteria that a PDMP must meet to be counted as a qualified PDMP.
- ***Breaking the cycle of addiction***: The legislation requires the Food and Drug Administration (FDA) to ease the path for development of non-addictive medical products intended to treat pain or addiction.
- ***Cracking down on bad actors and pharmaceutical companies***: The bill provides drug manufacturers and distributors with access to anonymized DEA information so they can identify, report, and stop suspicious orders of opioids. The provisions also establish civil and criminal fines for drug manufacturers and distributors who fail to consider the DEA data when determining whether an order for opioids is suspicious and increases civil and criminal penalties for drug manufacturers and distributors who fail to report suspicious orders and keep accurate records.
- ***Protecting women and infants***: H.R. 6 requires the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Centers for Disease Control (CDC) to develop educational materials for clinicians to use with pregnant women for shared decision-making regarding pain management during pregnancy.
- ***Mail safety and drug trafficking***: The bill requires the U.S. Postal Service (USPS) to transmit advance data on incoming international mail and to refuse shipments for which data is not furnished starting in 2021. This will help prevent shipment of illicitly produced fentanyl and other drugs through the mail system. To aid manual inspections, the bill directs the Customs & Border Protection (CBP) and USPS to identify and develop technology that will improve the detection of synthetic opioids and other narcotics entering the United States by mail.
- ***Medication safety***: The bill allows FDA to require safer packaging for certain prescription medications and authorizes state grants to increase participation in drug-disposal programs.
- ***First responders***: The legislation expands a grant program allowing first responders to administer a drug or device, like naloxone, to treat an opioid overdose.
- ***Enhances community-based response to youth drug abuse***: The bill reauthorizes the Drug-Free Communities Program to mobilize communities to prevent youth substance use and extends the National Community Anti-Drug Coalition Institute.

Treatment

- ***Bolstering the treatment workforce***: The bill includes a provision Congressman Rogers co-authored that provides \$25 million each year in student loan repayment to medical professionals specializing in substance use disorder treatment. This new program will attract and retain these professionals in areas most in need of their skills.
- ***Promoting telehealth***: This bill directs the Centers for Medicare and Medicaid (CMS) to guide states' use of telehealth services to address substance use disorders under Medicaid, including reimbursement options for those services. It also eliminates unnecessary regulatory barriers to such telehealth treatment.
- ***Enhancing access to non-opioid treatment options***: The legislation directs CMS to inform states of their options to treat and manage beneficiaries' pain through non-opioid pain treatment and management options under Medicaid.
- ***Treating women and infants***: The bill requires agencies to improve care for infants with neonatal abstinence syndrome (NAS) and their mothers, identifies gaps in Medicaid coverage for pregnant and postpartum women with substance use disorders, and ensures access to these services under the Children's Health Insurance Program.
- ***Increasing access to inpatient treatment***: The bill allows state Medicaid programs to receive federal reimbursement for up to 30 total days of inpatient treatment in certain facilities during a 12-month period for eligible individuals.
- ***Medicare treatment grants***: H.R. 6 provides grants to certain community and rural health centers to help offset the cost of training providers to dispense medications for treatment of opioid use disorder.
- ***Cracking down on fraud***: The legislation creates new civil penalties for unfair or deceptive acts with respect to substance use disorder treatment services or treatment and also makes it illegal to pay or receive kickbacks in return for referring a patient to recovery homes or clinical treatment facilities.

Recovery

- ***Innovative recovery housing***: The bill directs the Department of Health and Human Services (HHS) to support states' housing-related services under Medicaid and care coordination services for Medicaid enrollees with substance use disorders. It also requires HHS to issue best practices for entities operating recovery housing facilities. H.R. 6 also authorizes a pilot program to provide individuals in recovery from a substance use disorder with stable, temporary housing.
- ***Peer support***: This legislation reauthorizes and expands the Building Communities of Recovery program, which provides long-term recovery support services and modifies the program to include peer support networks. The bill also requires HHS to establish centers to assist and support recovery community organizations and peer support networks providing peer support services related to substance use disorder. Finally, it directs the Department of Veterans Affairs to increase the number of female peer counselors so that female veterans who are separating or newly separated from military service can receive support from other female veterans.
- ***Centers of excellence in substance use disorder education***: The bill requires HHS to establish regional centers to support the improvement of health professional training resources related to substance use disorder prevention, treatment, and recovery.
- ***Workforce reintegration***: H.R. 6 requires HHS to continue or establish a program to support individuals in recovery from a substance use disorder transition to independent living and the workforce.