

S 480

National All Schedules Prescription Electronic Reporting Reauthorization Act of 2016

Congress: 114 (2015–2017, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Feb 12, 2015

Current Status: Placed on Senate Legislative Calendar under General Orders. Calendar No. 440.

Latest Action: Placed on Senate Legislative Calendar under General Orders. Calendar No. 440. (Apr 27, 2016)

Official Text: <https://www.congress.gov/bill/114th-congress/senate-bill/480>

Sponsor

Name: Sen. Shaheen, Jeanne [D-NH]

Party: Democratic • **State:** NH • **Chamber:** Senate

Cosponsors (12 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Brown, Sherrod [D-OH]	D · OH		Feb 12, 2015
Sen. Durbin, Richard J. [D-IL]	D · IL		Feb 12, 2015
Sen. Feinstein, Dianne [D-CA]	D · CA		Feb 12, 2015
Sen. Gillibrand, Kirsten E. [D-NY]	D · NY		Feb 12, 2015
Sen. Manchin, Joe, III [D-WV]	D · WV		Feb 12, 2015
Sen. Markey, Edward J. [D-MA]	D · MA		Feb 12, 2015
Sen. Schumer, Charles E. [D-NY]	D · NY		Feb 12, 2015
Sen. Sessions, Jeff [R-AL]	R · AL		Feb 12, 2015
Sen. Toomey, Patrick [R-PA]	R · PA		Feb 12, 2015
Sen. Warren, Elizabeth [D-MA]	D · MA		Feb 12, 2015
Sen. Blumenthal, Richard [D-CT]	D · CT		Oct 6, 2015
Sen. Collins, Susan M. [R-ME]	R · ME		Mar 15, 2016

Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Reported By	Apr 27, 2016

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
114 HR 1725	Related bill	Sep 9, 2015: Received in the Senate and Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
114 S 636	Related bill	Mar 3, 2015: Read twice and referred to the Committee on Health, Education, Labor, and Pensions.

Summary (as of Apr 27, 2016)

National All Schedules Prescription Electronic Reporting Reauthorization Act of 2016

(Sec. 3) This bill amends the Public Health Service Act to revise and extend through FY2021 the controlled substance monitoring program, including to:

- allow grants to be used to maintain existing state controlled substance monitoring programs;
- require the Department of Health and Human Services (HHS) to redistribute any funds that are returned among the remaining grantees;
- require states to report on the interoperability of their programs with federal programs and health information technology systems and whether their programs provide automatic, up-to-date, or daily information about a patient upon request;
- require states to provide HHS with aggregate data and other information to enable HHS to evaluate the success of state programs; and
- expand the program to include any commonwealth or territory of the United States.

The Drug Enforcement Administration, HHS, a state Medicaid program, a state health department, or a state substance abuse agency receiving nonidentifiable information from a controlled substance monitoring database for research purposes may make that information available to other entities for research purposes.

HHS is no longer required to give preference for grants related to drug abuse to states with controlled substance monitoring programs.

A state receiving a grant for a controlled substance monitoring program must: (1) facilitate prescriber and dispenser use of the controlled substance monitoring system, and (2) educate prescribers and dispensers on the benefits of the system.

Actions Timeline

- **Apr 27, 2016:** Committee on Health, Education, Labor, and Pensions. Reported by Senator Alexander with an amendment in the nature of a substitute. Without written report.
- **Apr 27, 2016:** Placed on Senate Legislative Calendar under General Orders. Calendar No. 440.
- **Mar 16, 2016:** Committee on Health, Education, Labor, and Pensions. Ordered to be reported with an amendment in the nature of a substitute favorably.
- **Feb 12, 2015:** Introduced in Senate
- **Feb 12, 2015:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions.