

HR 2038

Budgeting for Opioid Addiction Treatment Act

Congress: 115 (2017–2019, Ended)

Chamber: House

Policy Area: Health

Introduced: Apr 6, 2017

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Apr 7, 2017)

Official Text: <https://www.congress.gov/bill/115th-congress/house-bill/2038>

Sponsor

Name: Rep. Larson, John B. [D-CT-1]

Party: Democratic • State: CT • Chamber: House

Cosponsors (3 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Blumenauer, Earl [D-OR-3]	D · OR		May 22, 2017
Rep. Ryan, Tim [D-OH-13]	D · OH		Jul 13, 2017
Rep. Khanna, Ro [D-CA-17]	D · CA		Apr 10, 2018

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Apr 7, 2017
Ways and Means Committee	House	Referred To	Apr 6, 2017

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
115 S 523	Identical bill	Mar 2, 2017: Read twice and referred to the Committee on Finance.

Budgeting for Opioid Addiction Treatment Act

This bill amends the Internal Revenue Code, with respect to excise taxes on manufacturers, to impose a one cent per milligram fee on the sale of active opioids by the manufacturer, producer, or importer. The fee excludes prescription drugs used exclusively for the treatment of opioid addiction as part of a medically assisted treatment effort.

The Department of Health and Human Services (HHS) must establish a program to provide rebates or discounts to cancer and hospice patients to ensure that they do not pay the fee.

The bill amends the Public Health Service Act to require any increase in federal revenues from the fee after rebates and discounts are subtracted to be distributed to states under the Substance Abuse Prevention and Treatment Block Grant program. The states must use the funds exclusively for substance abuse (including opioid abuse) efforts in the states, including: (1) specified treatment programs, and (2) the recruitment and training of substance use disorder professionals to work in rural and medically underserved communities.

HHS must report to Congress on the impact of this bill on the retail cost of opioids and patient access to opioid medication, the effectiveness of the discount or rebate for cancer and hospice patients, how the funds are being used to improve substance abuse treatment efforts, and suggestions for improving access to opioids for cancer and hospice patients and substance abuse treatment efforts.

Actions Timeline

- **Apr 7, 2017:** Referred to the Subcommittee on Health.
- **Apr 6, 2017:** Introduced in House
- **Apr 6, 2017:** Referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.