

1 istration, Commissioner of Food and Drugs, Direc-
2 tor of the Centers for Disease Control and Preven-
3 tion, and Assistant Secretary for Mental Health and
4 Substance Use, shall develop and disseminate not
5 later than 1 year after the date of enactment of this
6 Act, and update periodically thereafter”.

7 (2) MATERIALS INCLUDED.—Section 3212(b) of
8 the SUPPORT for Patients and Communities Act
9 (21 U.S.C. 829 note) is amended—

10 (A) by redesignating paragraphs (1) and
11 (2) as paragraphs (2) and (3), respectively; and

12 (B) by inserting before paragraph (2), as
13 so redesignated, the following new paragraph:

14 “(1) pharmacists on how to verify the identity
15 of the patient;”.

16 (3) MATERIALS FOR TRAINING ON PATIENT
17 VERIFICATION .—Section 3212 of the SUPPORT
18 for Patients and Communities Act (21 U.S.C. 829
19 note) is amended by adding at the end the following
20 new subsection:

21 “(d) MATERIALS FOR TRAINING ON VERIFICATION
22 OF IDENTITY.—Not later than 1 year after the date of
23 enactment of this subsection, the Secretary of Health and
24 Human Services, after seeking stakeholder input in ac-
25 cordance with subsection (c), shall—

1 “(1) update the materials developed under sub-
2 section (a) to include information for pharmacists on
3 how to verify the identity the patient; and

4 “(2) disseminate, as appropriate, the updated
5 materials.”.

6 (b) INCENTIVIZING STATES TO FACILITATE RESPON-
7 SIBLE, INFORMED DISPENSING OF CONTROLLED SUB-
8 STANCES.—

9 (1) IN GENERAL.—Section 392A of the Public
10 Health Service Act (42 U.S.C. 280b–1) is amend-
11 ed—

12 (A) by redesignating subsections (c) and
13 (d) as subsections (d) and (e), respectively; and

14 (B) by inserting after subsection (b) the
15 following new subsection:

16 “(c) PREFERENCE.—In determining the amounts of
17 grants awarded to States under subsections (a) and (b),
18 the Director of the Centers for Disease Control and Pre-
19 vention may give preference to States in accordance with
20 such criteria as the Director may specify and may choose
21 to give preference to States that—

22 “(1) maintain a prescription drug monitoring
23 program;

24 “(2) require prescribers of controlled substances
25 in schedule II, III, or IV to issue such prescriptions

1 electronically, and make such requirement subject to
2 exceptions in the cases listed in section 1860D–
3 4(e)(7)(B) of the Social Security Act; and

4 “(3) require dispensers of such controlled sub-
5 stances to enter certain information about the pur-
6 chase of such controlled substances into the respec-
7 tive State’s prescription drug monitoring program,
8 including—

9 “(A) the National Drug Code or, in the
10 case of compounded medications, compound
11 identifier;

12 “(B) the quantity dispensed;

13 “(C) the patient identifier; and

14 “(D) the date filled.”.

15 (2) DEFINITIONS.—

16 (A) IN GENERAL.—Subsection (d) of sec-
17 tion 392A of the Public Health Service Act (42
18 U.S.C. 280b–1), as redesignated by paragraph
19 (1)(A), is amended to read as follows:

20 “(d) DEFINITIONS.—In this section:

21 “(1) CONTROLLED SUBSTANCE.—The term
22 ‘controlled substance’ has the meaning given that
23 term in section 102 of the Controlled Substances
24 Act.

1 “(2) DISPENSER.—The term ‘dispenser’ means
2 a physician, pharmacist, or other person that dis-
3 penses a controlled substance to an ultimate user.

4 “(3) INDIAN TRIBE.—The term ‘Indian Tribe’
5 has the meaning given that term in section 4 of the
6 Indian Self-Determination and Education Assistance
7 Act.”.

8 (B) CONFORMING CHANGE.—Section 392A
9 of the Public Health Service Act (42 U.S.C.
10 280b–1) is amended by striking “Indian tribes”
11 each place it appears and inserting “Indian
12 Tribes”.

