



H.R. 5046—Comprehensive Opioid Reduction Act of 2016 (Rep. Sensenbrenner, R-WI)

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FLOOR SCHEDULE:

Expected to be considered on May 12, under a structured [rule](#).

TOPLINE SUMMARY:

[H.R. 5046](#) would establish a comprehensive opioid abuse grant program using both new and existing programs, including providing training to first responders, criminal investigation for the distribution of opioids, resident treatment centers, and drug courts.

COST:

The Congressional Budget Office (CBO) [estimates](#) that H.R. 3046 would “authorize the appropriation of \$103 million annually over the 2017-2021 period for the Department of Justice (DOJ) to make grants to state, local, and tribal governments for programs to combat opioid abuse. This amount would be fully offset for cut-go purposes. \$20 million would be offset through a reduction in the authorization for the Emergency Federal Law Enforcement Assistance Program. The remainder would be offset through reauthorizing and leveraging existing grant programs, including the Prescription Drug Monitoring Program, the Residential Substance Abuse Treatment for State Prisoners Program, Drug Court grants, Mental Health Courts and Adult and Juvenile Collaboration Program Grants, and Veterans Treatment Court grants.

CONSERVATIVE CONCERNS:

- **Expand the Size and Scope of the Federal Government?** Yes, the legislation authorizes several new opioid abuse programs.
- **Encroach into State or Local Authority?** No.
- **Delegate Any Legislative Authority to the Executive Branch?** No.
- **Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits?** No.

DETAILED SUMMARY AND ANALYSIS:

America is currently experiencing an epidemic of opioid and heroin use, with roughly 47,000 Americans dying from a drug overdose in 2014. [Roughly](#) 21.5 million Americans ages 12 and older suffered from a substance abuse problem in 2014, of which 1.9 million individuals had a substance use disorder involving prescription pain medicine, and 586,000 had a disorder involving the abuse of heroin.

H.R. 5046 seeks to curb the opioid epidemic by authorizing an opioid abuse grant program using new and existing programs. The bill would authorize a funding level of \$103 million annually, which is offset.

The grant funds may be used broadly by states to address the opioid epidemic within their borders. Allowable uses for grant funds include: (1) programs providing alternatives to incarceration; (2) collaboration between criminal justice agencies and substance abuse organizations; (3) first responder training in relation to opioid overdose reversal drugs, including naloxone; (4) investigative purposes; (5) medication-assisted treatment provided by criminal justice agencies; (6) prescription drug monitoring programs; (7) programs pertaining to juvenile opioid abuse; and (8) jurisdiction for states to develop their own opioid abuse reduction programs. This legislation would also permit grantees to make sub-awards to local non-profits, including faith-based organizations.

This bill would require applications for grants to include: (1) a certification that the federal funds would not be used to supplant state and local funds, but would serve as additional resources; (2) assurance that applicants will maintain and report data, as well as keep any records that the Attorney General may require; (3) certification that funded programs meet all requirements and are coordinated with relevant agencies; and (4) assurance that applicants will work with the Drug Enforcement Administration in creating a strategy.

This legislation would prohibit the Attorney General from rejecting an application without giving applicants a notice of deficiencies in their application and a chance to correct them. It would require the Attorney General to distribute funds in a geographically equitable fashion.

This bill would also require the DOJ Inspector General to conduct audits to locate waste and fraud, at will. It would require non-profits to disclose compensation received by their board of directors. It would also prohibit awarded funds from being used to lobby state, federal, or local representatives regarding grant awards. If an awardee engages in such lobbying, they would be required to pay back the entirety of the grant.

This legislation would define “qualified veterans” for veterans’ treatment courts, as individuals who have served in active duty in the military, discharged under conditions other than dishonorable. It would also delineate a framework for the treatment court programs, requiring them to provide qualified veterans with judicial supervision and case management, a broad spectrum of treatment services, incarceration alternatives, and any other appropriate alternative. Grants could be awarded to Veterans Assistance Programs that establish treatment court programs, peer-to-peer services, or those that provide treatment and training.

Finally, this legislation would amend the Emergency Federal Law Enforcement Assistance Program to authorize \$20 million annually for the program, commencing in FY2022.

The Committee Report can be found [here](#).

AMENDMENTS:

1. [Bishop \(R-MI\)](#) —This amendment would add an “allowable use” to the grant program, to develop, implement, or expand the use of programs that utilize secure containers for prescription drugs.
2. [Davis \(D-IL\), Young \(R-IN\)](#) —This amendment would clarify that grants that address treatment alternatives to incarceration could include a focus on parents whose incarceration may result in children going to foster care.
3. [Keating \(D-MA\), Rothfus \(R-PA\)](#) —This amendment would add drug take-back programs to the list of authorized uses for grant funds made available.
4. [Israel \(D-NY\), McKinley \(R-WV\)](#) —This amendment would direct the Attorney General to consider community need based on the rate of opioid abuse and deaths, when awarding grants.
5. [Rothfus \(R-PA\)](#) —This amendment would expand the list of “allowable uses” to include efforts to develop, implement, or expand programs targeted at opioid abuse by veterans.
6. [Clark \(D-MA\)](#) —This amendment would direct the GAO to produce a report on DOJ programs and research pertaining to substance use amongst adolescents and young adults.

7. [Donovan \(R-NY\)](#) —This amendment would amend the “allowable uses” to include treatment programs that provide alternatives to incarceration for pregnant women as eligible for family-based substance abuse treatment grants.
8. [Guinta \(R-NH\), Kuster \(D-NH\)](#) —This amendment would add treatment and recovery to the list of “allowable uses” specified by this legislation.
9. [DeSaulnier \(D-CA\), Carter \(R-GA\)](#) —This amendment would clarify that grants made under this legislation could be used for multi-state interoperable prescription drug monitoring programs.
10. [Lynch \(D-MA\)](#) —This amendment would allow grant funding to be used to develop, implement, or expand programs that would ensure the security of opioids in medical facilities.
11. [DelBene \(D-WA\)](#) —This amendment would clarify that treatment alternatives to incarceration programs could include community-based substance use diversion programs that are sponsored by law enforcement agencies.

COMMITTEE ACTION:

H.R. 5046 was introduced on April 25, 2016 and was referred to the House Committee on the Judiciary where it was ordered to be reported favorably by voice vote on April 27, 2016.

ADMINISTRATION POSITION:

A Statement of Administration Policy is not available.

CONSTITUTIONAL AUTHORITY:

Congress has the power to enact this legislation pursuant to the following: Article I, Section 8, Clause 1.

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