H. Res. __

H.R. 4641 - To provide for the establishment of an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, and for other purposes.

H.R. 5046 - Comprehensive Opioid Abuse Reduction Act of 2016

2. Provides one hour of general debate equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce.
3. Waives all points of order against consideration of the bill.
4. Makes in order as original text for the purpose of amendment the amendment in the nature of a substitute recommended by the Committee on Energy and Commerce now printed in the bill and provides that it shall be considered as read.
5. Waives all points of order against that amendment in the nature of a substitute.
6. Makes in order only those further amendments printed in part A of the Rules Committee report. Each such amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question.
7. Waives all points of order against the amendments printed in part A of the report.
8. Provides one motion to recommit with or without instructions.
10. Provides one hour of general debate equally divided and controlled by the chair and ranking minority member of the Committee on the Judiciary.
11. Waives all points of order against consideration of the bill.
12. Makes in order as original text for the purpose of amendment an 
amendment in the nature of a substitute consisting of the text of Rules 
Committee Print 114-52 and provides that it shall be considered as read.

13. Waives all points of order against that amendment in the nature of a 
substitute.

14. Makes in order only those further amendments printed in part B of the 
Rules Committee report. Each such amendment may be offered only in 
the order printed in the report, may be offered only by a Member 
designated in the report, shall be considered as read, shall be debatable 
for the time specified in the report equally divided and controlled by the 
proponent and an opponent, shall not be subject to amendment, and shall 
not be subject to a demand for division of the question.

15. Waives all points of order against the amendments printed in part B of 
the report.

16. Provides one motion to recommit with or without instructions.

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RESOLUTION

Resolved, That at any time after adoption of this resolution the Speaker 
may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the 
Committee of the Whole House on the state of the Union for consideration of the 
bill (H.R. 4641) to provide for the establishment of an inter-agency task force to 
review, modify, and update best practices for pain management and prescribing 
pain medication, and for other purposes. The first reading of the bill shall be 
dispensed with. All points of order against consideration of the bill are waived. 
General debate shall be confined to the bill and shall not exceed one hour 
equally divided and controlled by the chair and ranking minority member of the 
Committee on Energy and Commerce. After general debate the bill shall be 
considered for amendment under the five-minute rule. It shall be in order to 
consider as an original bill for the purpose of amendment under the five-minute 
rule the amendment in the nature of a substitute recommended by the 
Committee on Energy and Commerce now printed in the bill. The committee 
amendment in the nature of a substitute shall be considered as read. All points 
of order against the committee amendment in the nature of a substitute are 
waived. No amendment to the committee amendment in the nature of a 
substitute shall be in order except those printed in part A of the report of the 
Committee on Rules accompanying this resolution. Each such amendment may 
be offered only in the order printed in the report, may be offered only by a 
Member designated in the report, shall be considered as read, shall be 
debatable for the time specified in the report equally divided and controlled by
the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against such amendments are waived. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. Any Member may demand a separate vote in the House on any amendment adopted in the Committee of the Whole to the bill or to the committee amendment in the nature of a substitute. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.

Sec. 2. At any time after adoption of this resolution the Speaker may, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 5046) to amend the Omnibus Crime Control and Safe Streets Act of 1968 to authorize the Attorney General to make grants to assist State and local governments in addressing the national epidemic of opioid abuse, and for other purposes. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived. General debate shall be confined to the bill and shall not exceed one hour equally divided and controlled by the chair and ranking minority member of the Committee on the Judiciary. After general debate the bill shall be considered for amendment under the five-minute rule. It shall be in order to consider as an original bill for the purpose of amendment under the five-minute rule an amendment in the nature of a substitute consisting of the text of Rules Committee Print 114-52. That amendment in the nature of a substitute shall be considered as read. All points of order against that amendment in the nature of a substitute are waived. No amendment to that amendment in the nature of a substitute shall be in order except those printed in part B of the report of the Committee on Rules accompanying this resolution. Each such amendment may be offered only in the order printed in the report, may be offered only by a Member designated in the report, shall be considered as read, shall be debatable for the time specified in the report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against such amendments are waived. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. Any Member may demand a separate vote in the House on any amendment adopted in the Committee of the Whole to the bill or to the amendment in the nature of a substitute made in order as original text. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions.
**SUMMARY OF AMENDMENTS TO H.R. 4641 IN PART A PROPOSED TO BE MADE IN ORDER**

(summaries derived from information provided by sponsors)

<table>
<thead>
<tr>
<th>Sponsor</th>
<th>#</th>
<th>Description</th>
<th>Debate Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Brownley</td>
<td>#3</td>
<td>Adds the Office of Women's Health.</td>
<td>(10 minutes)</td>
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<td>(CA)</td>
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<tr>
<td>2. Carter,</td>
<td>#14</td>
<td>Requires that any physician, dentists, non-physician prescriber or pharmacist who becomes a member of the Pain Management Best Practices Inter-Agency Task Force shall currently be licensed and practicing in their appropriate State.</td>
<td>(10 minutes)</td>
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<tr>
<td>Buddy (GA)</td>
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<tr>
<td>3. Grayson</td>
<td>#20</td>
<td>Ensures that “first responders” are included for membership on the Pain Management Best Practices Inter-Agency Task Force.</td>
<td>(10 minutes)</td>
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<tr>
<td>(FL)</td>
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<tr>
<td>4. Clark,</td>
<td>#9 (REVISED)</td>
<td>Adds to the Task Force an expert in adolescent and young adult addiction, and a person in recovery from addiction to medication for chronic pain whose addiction began in adolescence or adulthood, and directs the Task Force to consider the distinct needs of adolescents and young adults in its development of best practices.</td>
<td>(10 minutes)</td>
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<tr>
<td>Katherine</td>
<td></td>
<td></td>
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<tr>
<td>(MA)</td>
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<tr>
<td>5. Moulton</td>
<td>#22</td>
<td>Adds representatives of Veteran Service Organizations to the Pain Management Best Practices Inter-Agency Task Force.</td>
<td>(10 minutes)</td>
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<tr>
<td>(MA), Zeldin</td>
<td></td>
<td></td>
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<tr>
<td>(NY), Walz</td>
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<td>(MN)</td>
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<td>6. Nolan</td>
<td>#16</td>
<td>Inserts a representative on the task force for active duty military, armed forces personnel, and veteran health and prescription opioid addiction.</td>
<td>(10 minutes)</td>
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<td>(MN)</td>
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<td>7. Watson</td>
<td>#12 (REVISED)</td>
<td>Inserts a minority health expert as a representative to the Pain Management Best Practices Inter-Agency Task Force established by this bill.</td>
<td>(10 minutes)</td>
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<td>Coleman (NJ)</td>
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<td>8. Kuster,</td>
<td>#21</td>
<td>Requires that the task force research addiction trends in communities with high rates of prescription drug abuse.</td>
<td>(10 minutes)</td>
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<tr>
<td>Ann (NH),</td>
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<tr>
<td>Guinta (NH)</td>
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<td>9. Schiff (CA)</td>
<td>#2 (REVISED)</td>
<td>Requires the Inter-Agency Task Force, as part of its duties to review and update best practices for pain management strategies, to also take into</td>
<td>(10 minutes)</td>
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consideration the coordination of information collected from State prescription drug monitoring programs for the purpose of preventing the diversion of pain medication.

10. Clark, Katherine (MA)

#10 Directs the Task Force to consider work done and any public comments submitted regarding electronic prescribing of opioids and its potential benefits, in the course of developing best practices.

11. Rothfus (PA), Keating (MA)

#4 (REVISED) Requires the inter-agency task force, as part of its review and update of best practices for pain management and prescribing pain medication, to also take into consideration the practice of co-prescribing the overdose reversal drug naloxone.

12. Clark, Katherine (MA)

#7 (REVISED) Directs the Task Force to consider, in the course of developing best practices, Federal agency programs and research relative to substance use and substance use disorders among adolescents and young adults, as well as any gaps identified by Federal government programs or researchers in the prevention of, treatment for, and recovery from substance use by and substance use disorders among adolescents and young adults.

13. Esty (CT), Knight (CA)

#25 Requires the inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication, specifically as it pertains to physician education and consumer education.

14. Welch (VT), McKinley (WV)

#23 Expands the task force report to include information and recommendations on developing new non-opioid forms of pain relief.

15. Sessions (TX)

#28 (LATE) Ensures the task force takes into consideration existing private sector, State, and local government efforts related to pain management and prescribing pain medication.

**SUMMARY OF AMENDMENTS TO H.R. 5046 IN PART B PROPOSED TO BE MADE IN ORDER**

(summaries derived from information provided by sponsors)

<table>
<thead>
<tr>
<th>Sponsor</th>
<th># Description</th>
<th>Debate Time</th>
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<tbody>
<tr>
<td>1. Donovan (NY), Turner</td>
<td>#12 Amends the Omnibus Crime Control and Safe Streets Act to include substance abuse treatment programs that</td>
<td>(10 minutes)</td>
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</tbody>
</table>
provide alternatives to incarceration for pregnant women as eligible for family-based substance abuse treatment grants.

2. Davis, Danny K. (IL), Young (IN)  
5 (REVISED) Clarifies that grants addressing treatment alternatives to incarceration may include a focus on parents whose incarceration could result in their children entering foster care.

3. DelBene (WA)  
30 (LATE) (REVISED) Clarifies that treatment alternative to incarceration programs may include community-based substance use diversion programs sponsored by a law enforcement agency.

4. DeSaulnier (CA), Carter, Buddy (GA)  
17 Clarifies that grants under this act can be used for multi-state interoperable prescription drug monitoring programs.

5. Bishop, Mike (MI)  
4 Adds an "allowable use" within the grant program established under the bill to develop, implement, or expand the use of programs that utilize secure containers for prescription drugs.

6. Guinta (NH), Kuster, Ann (NH)  
16 Adds treatment and recovery to the list of allowable uses in H.R. 5046.

7. Rothfus (PA)  
8 Expands the list of eligible grant uses for the Comprehensive Opioid Abuse Grant Program to include efforts to develop, implement, or expand a program to prevent and address opioid abuse by veterans.

8. Keating (MA), Rothfus (PA), Blumenauer (OR), Bera (CA), Roe (TN)  
6 Adds drug take-back programs to the list of authorized uses for amounts made available under Section 3021(a) of the Comprehensive Opioid Abuse Grant Program.

9. Lynch (MA)  
29 (LATE) Provides that grant funding can be used develop, implement or expand a program to ensure the security of opioids in medical facilities.

10. Israel (NY), McKinley (WV), Mullin, Markwayne (OK)  
7 Directs the Attorney General, when awarding grants, to also consider community need based on prevalence of opioid abuse and related deaths.

11. Clark,  
9 (REVISED) Directs the GAO to study and report on
Katherine (MA) Department of Justice programs and research relative to substance use and substance use disorders among adolescents and young adults.