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(Original Signature of Member)

118TH CONGRESS
2D SESSION

H. R. _____

To provide for requirements for electronic-prescribing for controlled substances under group health plans and group and individual health insurance coverage.

IN THE HOUSE OF REPRESENTATIVES

Ms. KUSTER introduced the following bill; which was referred to the Committee on _____

A BILL

To provide for requirements for electronic-prescribing for controlled substances under group health plans and group and individual health insurance coverage.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Electronic Prescribing
5 for Controlled Substances Act” or the “EPCS 2.0 Act”.

1 **SEC. 2. REQUIREMENTS FOR ELECTRONIC-PRESCRIBING**
2 **FOR CONTROLLED SUBSTANCES UNDER**
3 **GROUP HEALTH PLANS AND GROUP AND IN-**
4 **DIVIDUAL HEALTH INSURANCE COVERAGE.**

5 (a) PUBLIC HEALTH SERVICE ACT AMENDMENT.—

6 Section 2799A–7 of the Public Health Service Act (42
7 U.S.C. 300gg–117) is amended by adding at the end the
8 following new subsection:

9 “(d) REQUIREMENTS FOR ELECTRONIC-PRE-
10 SCRIBING FOR CONTROLLED SUBSTANCES.—

11 “(1) IN GENERAL.—Except as provided pursu-
12 ant to paragraph (2), for plan years beginning on or
13 after January 1, 2026, a group health plan and a
14 health insurance issuer offering group or individual
15 health insurance coverage, with respect to a partici-
16 pating provider, as defined in section 2799–1(a)(3),
17 shall have in place policies, subject to paragraphs
18 (4) and (5), that require any prescription for a
19 schedule II, III, IV, or V controlled substance (as
20 defined by section 202 of the Controlled Substances
21 Act) covered by the plan or coverage that is trans-
22 mitted by such a participating provider for such a
23 participant, beneficiary, or enrollee be electronically
24 transmitted consistent with standards established
25 under paragraph (3) of section 1860D–4(e) of the
26 Social Security Act, under an electronic prescription

1 drug program that meets requirements that are sub-
2 stantially similar (as jointly determined by the Sec-
3 retary, the Secretary of Labor, and the Secretary of
4 the Treasury) to the requirements of paragraph (2)
5 of such section 1860D–4(e).

6 “(2) EXCEPTION FOR CERTAIN CIR-
7 CUMSTANCES.—The Secretary, the Secretary of
8 Labor, and the Secretary of the Treasury shall joint-
9 ly, through rulemaking, specify circumstances and
10 processes by which the requirement under paragraph
11 (1) may be waived, with respect to a schedule II, III,
12 IV, or V controlled substance that is a prescription
13 drug covered by a group health plan or group or in-
14 dividual health insurance coverage offered by a
15 health insurance issuer, including in the case of—

16 “(A) a prescription issued when the par-
17 ticipating provider and dispensing pharmacy are
18 the same entity;

19 “(B) a prescription issued that cannot be
20 transmitted electronically under the most re-
21 cently implemented version of the National
22 Council for Prescription Drug Programs
23 SCRIPT Standard;

24 “(C) a prescription issued by a partici-
25 pating provider who received a waiver (which

1 may include a waiver obtained pursuant to sec-
2 tion 1860D–4(e)(7)(B)(iii) of the Social Secu-
3 rity Act) or a renewal thereof for a period of
4 time as determined by the Secretary, the Sec-
5 retary of Labor, and the Secretary of the
6 Treasury, not to exceed one year, from the re-
7 quirement to use electronic prescribing due to
8 demonstrated economic hardship, technological
9 limitations that are not reasonably within the
10 control of the participating provider, or other
11 exceptional circumstance demonstrated by the
12 participating provider;

13 “(D) a prescription issued by a partici-
14 pating provider under circumstances in which,
15 notwithstanding the participating provider’s
16 ability to submit a prescription electronically as
17 required by this subsection, such participating
18 provider reasonably determines that it would be
19 impractical for the individual involved to obtain
20 substances prescribed by electronic prescription
21 in a timely manner, and such delay would ad-
22 versely impact the individual’s medical condition
23 involved;

1 “(E) a prescription issued by a partici-
2 pating provider prescribing a drug under a re-
3 search protocol;

4 “(F) a prescription issued by a partici-
5 pating provider for a drug for which the Food
6 and Drug Administration requires a prescrip-
7 tion to contain elements that are not able to be
8 included in electronic prescribing, such as a
9 drug with risk evaluation and mitigation strate-
10 gies that include elements to assure safe use;

11 “(G) a prescription issued for an individual
12 who receives hospice care or for a resident of a
13 nursing facility (as defined in section 1919(a)
14 of the Social Security Act);

15 “(H) a prescription issued under cir-
16 cumstances in which electronic prescribing is
17 not available due to temporary technological or
18 electrical failure, as specified jointly by the Sec-
19 retary, the Secretary of Labor, and the Sec-
20 retary of the Treasury through rulemaking; and

21 “(I) a prescription issued by a partici-
22 pating provider allowing for the dispensing of a
23 non-patient specific prescription pursuant to a
24 standing order, approved protocol for drug ther-
25 apy, collaborative drug management, or com-

1 prehensive medication management, in response
2 to a public health emergency or other cir-
3 cumstances under which the participating pro-
4 vider may issue a non-patient specific prescrip-
5 tion.

6 “(3) RULES OF CONSTRUCTION.—

7 “(A) VERIFICATION.—Nothing in this sub-
8 section shall be construed as requiring a dis-
9 penser to verify that a participating provider,
10 with respect to a prescription for a schedule II,
11 III, IV, or V controlled substance that is a pre-
12 scription drug covered by a group health plan
13 or group or individual health insurance cov-
14 erage offered by a health insurance issuer, has
15 a waiver (or is otherwise exempt) under para-
16 graph (2) from the requirement under para-
17 graph (1).

18 “(B) AUTHORITY TO DISPENSE.—Nothing
19 in this subsection shall be construed as affect-
20 ing the authority of a group health plan or
21 group or individual health insurance coverage
22 offered by a health insurance issuer to cover, or
23 the authority of a dispenser to continue to dis-
24 pense, a prescription drug if the prescription
25 for such drug is an otherwise valid written,

1 oral, or fax prescription that is consistent with
2 applicable law.

3 “(C) PATIENT CHOICE.—Nothing in this
4 subsection shall be construed as affecting the
5 ability of an individual who is a participant,
6 beneficiary, or enrollee of a group health plan
7 or group or individual health insurance cov-
8 erage offered by a health insurance issuer and
9 who is prescribed a schedule II, III, IV, or V
10 controlled substance that is a prescription drug
11 covered by the plan or coverage to designate a
12 particular dispenser to dispense a prescribed
13 controlled substance to the extent consistent
14 with the requirements under this subsection.

15 “(4) REGULATIONS ON POLICY REQUIRE-
16 MENTS.—The Secretary, the Secretary of Labor,
17 and the Secretary of the Treasury shall promulgate
18 regulations specifying requirements for the policies
19 established by group health plans and health insur-
20 ance issuers under paragraph (1). Such regulations
21 shall include requirements for—

22 “(A) a uniform process by which plans and
23 issuers are required to set the e-prescribing re-
24 quirements;

1 “(B) a process by which plans and issuers
2 are required to grant waivers and exceptions to
3 participating providers pursuant to paragraph
4 (2); and

5 “(C) a mechanism for plans and issuers to
6 recognize waivers issued to participating pro-
7 viders under part D of title XVIII of the Social
8 Security Act, pursuant to paragraph (2)(C).

9 “(5) PROHIBITIONS.—The policies established
10 pursuant to paragraph (1) by a group health plan or
11 health insurance issuer offering group or individual
12 health insurance coverage may not—

13 “(A) require dispensers of a schedule II,
14 III, IV, or V controlled substance to confirm
15 that the prescription for the controlled sub-
16 stance was electronically issued by a partici-
17 pating provider in accordance with such poli-
18 cies, as described in paragraph (1);

19 “(B) require dispensers of such controlled
20 substances to submit information or data be-
21 yond what is otherwise required to process a
22 prescription drug claim in order to confirm a
23 participating provider’s compliance with such
24 policies;

1 “(C) reject, deny, or recoup reimbursement
2 for a prescription drug claim based on the for-
3 mat in which the prescription was issued; or

4 “(D) require a participating provider to
5 use a specific vendor for electronic prescribing
6 or a specific electronic prescribing product or
7 system.

8 “(6) ATTESTATION OF COMPLIANCE.—Begin-
9 ning on January 1, 2026, each group health plan
10 and health insurance issuer offering group or indi-
11 vidual health insurance coverage shall annually sub-
12 mit to the Secretary, the Secretary of Labor, and
13 the Secretary of the Treasury an attestation of com-
14 pliance with the requirements of this subsection.

15 “(7) CONSULTATION REQUIREMENT FOR RULE-
16 MAKING.—In promulgating regulations to carry out
17 this subsection, the Secretary, the Secretary of the
18 Labor, and the Secretary of the Treasury shall joint-
19 ly consult with dispensers of controlled substances,
20 State insurance regulators, health insurance issuers
21 offering group or individual health insurance cov-
22 erage, and health care practitioners.”.

23 (b) EMPLOYEE RETIREMENT INCOME SECURITY ACT
24 OF 1974 AMENDMENT.—Section 722 of the Employee Re-
25 tirement Income Security Act of 1974 (29 U.S.C. 1185k)

1 is amended by adding at the end the following new sub-
2 section:

3 “(d) REQUIREMENTS FOR ELECTRONIC-PRESCRIBING
4 FOR CONTROLLED SUBSTANCES.—

5 “(1) IN GENERAL.—Except as provided pursu-
6 ant to paragraph (2), for plan years beginning on or
7 after January 1, 2026, a group health plan and a
8 health insurance issuer offering group health insur-
9 ance coverage, with respect to a participating pro-
10 vider, as defined in section 716(a)(3), shall have in
11 place policies, subject to paragraphs (4) and (5),
12 that require any prescription for a schedule II, III,
13 IV, or V controlled substance (as defined by section
14 202 of the Controlled Substances Act) covered by
15 the plan or coverage that is transmitted by such a
16 participating provider for such a participant or bene-
17 ficiary be electronically transmitted consistent with
18 standards established under paragraph (3) of section
19 1860D–4(e) of the Social Security Act, under an
20 electronic prescription drug program that meets re-
21 quirements that are substantially similar (as jointly
22 determined by the Secretary, the Secretary of
23 Health and Human Services, and the Secretary of
24 the Treasury) to the requirements of paragraph (2)
25 of such section 1860D–4(e).

1 “(2) EXCEPTION FOR CERTAIN CIR-
2 CUMSTANCES.—The Secretary, the Secretary of
3 Health and Human Services, and the Secretary of
4 the Treasury shall jointly, through rulemaking,
5 specify circumstances and processes by which the re-
6 quirement under paragraph (1) may be waived, with
7 respect to a schedule II, III, IV, or V controlled sub-
8 stance that is a prescription drug covered by a group
9 health plan or group health insurance coverage of-
10 fered by a health insurance issuer, including in the
11 case of—

12 “(A) a prescription issued when the par-
13 ticipating provider and dispensing pharmacy are
14 the same entity;

15 “(B) a prescription issued that cannot be
16 transmitted electronically under the most re-
17 cently implemented version of the National
18 Council for Prescription Drug Programs
19 SCRIPT Standard;

20 “(C) a prescription issued by a partici-
21 pating provider who received a waiver (which
22 may include a waiver obtained pursuant to sec-
23 tion 1860D–4(e)(7)(B)(iii) of the Social Secu-
24 rity Act) or a renewal thereof for a period of
25 time as determined by the Secretary, the Sec-

1 retary of Health and Human Services, and the
2 Secretary of the Treasury, not to exceed one
3 year, from the requirement to use electronic
4 prescribing due to demonstrated economic hard-
5 ship, technological limitations that are not rea-
6 sonably within the control of the participating
7 provider, or other exceptional circumstance
8 demonstrated by the participating provider;

9 “(D) a prescription issued by a partici-
10 pating provider under circumstances in which,
11 notwithstanding the participating provider’s
12 ability to submit a prescription electronically as
13 required by this subsection, such participating
14 provider reasonably determines that it would be
15 impractical for the individual involved to obtain
16 substances prescribed by electronic prescription
17 in a timely manner, and such delay would ad-
18 versely impact the individual’s medical condition
19 involved;

20 “(E) a prescription issued by a partici-
21 pating provider prescribing a drug under a re-
22 search protocol;

23 “(F) a prescription issued by a partici-
24 pating provider for a drug for which the Food
25 and Drug Administration requires a prescrip-

1 tion to contain elements that are not able to be
2 included in electronic prescribing, such as a
3 drug with risk evaluation and mitigation strate-
4 gies that include elements to assure safe use;

5 “(G) a prescription issued for an individual
6 who receives hospice care or for a resident of a
7 nursing facility (as defined in section 1919(a)
8 of the Social Security Act);

9 “(H) a prescription issued under cir-
10 cumstances in which electronic prescribing is
11 not available due to temporary technological or
12 electrical failure, as specified jointly by the Sec-
13 retary, the Secretary of Health and Human
14 Services, and the Secretary of the Treasury
15 through rulemaking; and

16 “(I) a prescription issued by a partici-
17 pating provider allowing for the dispensing of a
18 non-patient specific prescription pursuant to a
19 standing order, approved protocol for drug ther-
20 apy, collaborative drug management, or com-
21 prehensive medication management, in response
22 to a public health emergency or other cir-
23 cumstances under which the participating pro-
24 vider may issue a non-patient specific prescrip-
25 tion.

1 “(3) RULES OF CONSTRUCTION.—

2 “(A) VERIFICATION.—Nothing in this sub-
3 section shall be construed as requiring a dis-
4 penser to verify that a participating provider,
5 with respect to a prescription for a schedule II,
6 III, IV, or V controlled substance that is a pre-
7 scription drug covered by a group health plan
8 or group or individual health insurance cov-
9 erage offered by a health insurance issuer, has
10 a waiver (or is otherwise exempt) under para-
11 graph (2) from the requirement under para-
12 graph (1).

13 “(B) AUTHORITY TO DISPENSE.—Nothing
14 in this subsection shall be construed as affect-
15 ing the authority of a group health plan or
16 group health insurance coverage offered by a
17 health insurance issuer to cover, or the author-
18 ity of a dispenser to continue to dispense, a pre-
19 scription drug if the prescription for such drug
20 is an otherwise valid written, oral, or fax pre-
21 scription that is consistent with applicable law.

22 “(C) PATIENT CHOICE.—Nothing in this
23 subsection shall be construed as affecting the
24 ability of an individual who is a participant or
25 beneficiary of a group health plan or group or

1 individual health insurance coverage offered by
2 a health insurance issuer and who is prescribed
3 a schedule II, III, IV, or V controlled substance
4 that is a prescription drug covered by the plan
5 or coverage to designate a particular dispenser
6 to dispense a prescribed controlled substance to
7 the extent consistent with the requirements
8 under this subsection.

9 “(4) REGULATIONS ON POLICY REQUIRE-
10 MENTS.—The Secretary, the Secretary of Health
11 and Human Services, and the Secretary of the
12 Treasury shall promulgate regulations specifying re-
13 quirements for the policies established by group
14 health plans and health insurance issuers under
15 paragraph (1). Such regulations shall include re-
16 quirements for—

17 “(A) a uniform process by which plans and
18 issuers are required to set the e-prescribing re-
19 quirements;

20 “(B) a process by which plans and issuers
21 are required to grant waivers and exceptions to
22 participating providers pursuant to paragraph
23 (2); and

24 “(C) a mechanism for plans and issuers to
25 recognize waivers issued to participating pro-

1 viders under part D of title XVIII of the Social
2 Security Act, pursuant to paragraph (2)(C).

3 “(5) PROHIBITIONS.—The policies established
4 pursuant to paragraph (1) by a group health plan or
5 health insurance issuer offering group health insur-
6 ance coverage may not—

7 “(A) require dispensers of a schedule II,
8 III, IV, or V controlled substance to confirm
9 that the prescription for the controlled sub-
10 stance was electronically issued by a partici-
11 pating provider in accordance with such poli-
12 cies, as described in paragraph (1);

13 “(B) require dispensers of such controlled
14 substances to submit information or data be-
15 yond what is otherwise required to process a
16 prescription drug claim in order to confirm a
17 participating provider’s compliance with such
18 policies;

19 “(C) reject, deny, or recoup reimbursement
20 for a prescription drug claim based on the for-
21 mat in which the prescription was issued; or

22 “(D) require a participating provider to
23 use a specific vendor for electronic prescribing
24 or a specific electronic prescribing product or
25 system.

1 “(6) ATTESTATION OF COMPLIANCE.—Begin-
2 ning on January 1, 2026, each group health plan
3 and health insurance issuer offering group health in-
4 surance coverage shall annually submit to the Sec-
5 retary, the Secretary of Health and Human Services,
6 and the Secretary of the Treasury an attestation of
7 compliance with the requirements of this subsection.

8 “(7) CONSULTATION REQUIREMENT FOR RULE-
9 MAKING.—In promulgating regulations to carry out
10 this subsection, the Secretary, the Secretary of
11 Health and Human Services, and the Secretary of
12 the Treasury shall jointly consult with dispensers of
13 controlled substances, State insurance regulators,
14 health insurance issuers offering group or individual
15 health insurance coverage, and health care practi-
16 tioners.”.

17 (c) INTERNAL REVENUE CODE OF 1986 AMEND-
18 MENT.—Section 9822 of the Internal Revenue Code of
19 1986 is amended by adding at the end the following new
20 subsection:

21 “(d) REQUIREMENTS FOR ELECTRONIC-PRE-
22 SCRIBING FOR CONTROLLED SUBSTANCES.—

23 “(1) IN GENERAL.—Except as provided pursu-
24 ant to paragraph (2), for plan years beginning on or
25 after January 1, 2026, a group health plan, with re-

1 spect to a participating provider, as defined in sec-
2 tion 9816(a)(3), shall have in place policies, subject
3 to paragraphs (4) and (5), that require any prescrip-
4 tion for a schedule II, III, IV, or V controlled sub-
5 stance (as defined by section 202 of the Controlled
6 Substances Act) covered by the plan that is trans-
7 mitted by such a participating provider for such a
8 participant or beneficiary be electronically trans-
9 mitted consistent with standards established under
10 paragraph (3) of section 1860D–4(e) of the Social
11 Security Act, under an electronic prescription drug
12 program that meets requirements that are substan-
13 tially similar (as jointly determined by the Secretary,
14 the Secretary of Health and Human Services, and
15 the Secretary of Labor) to the requirements of para-
16 graph (2) of such section 1860D–4(e).

17 “(2) EXCEPTION FOR CERTAIN CIR-
18 CUMSTANCES.—The Secretary, the Secretary of
19 Health and Human Services, and the Secretary of
20 Labor shall jointly, through rulemaking, specify cir-
21 cumstances and processes by which the requirement
22 under paragraph (1) may be waived, with respect to
23 a schedule II, III, IV, or V controlled substance that
24 is a prescription drug covered by a group health, in-
25 cluding in the case of—

1 “(A) a prescription issued when the par-
2 ticipating provider and dispensing pharmacy are
3 the same entity;

4 “(B) a prescription issued that cannot be
5 transmitted electronically under the most re-
6 cently implemented version of the National
7 Council for Prescription Drug Programs
8 SCRIPT Standard;

9 “(C) a prescription issued by a partici-
10 pating provider who received a waiver (which
11 may include a waiver obtained pursuant to sec-
12 tion 1860D-4(e)(7)(B)(iii) of the Social Secu-
13 rity Act) or a renewal thereof for a period of
14 time as determined by the Secretary, the Sec-
15 retary of Health and Human Services, and the
16 Secretary of Labor, not to exceed one year,
17 from the requirement to use electronic pre-
18 scribing due to demonstrated economic hard-
19 ship, technological limitations that are not rea-
20 sonably within the control of the participating
21 provider, or other exceptional circumstance
22 demonstrated by the participating provider;

23 “(D) a prescription issued by a partici-
24 pating provider under circumstances in which,
25 notwithstanding the participating provider’s

1 ability to submit a prescription electronically as
2 required by this subsection, such participating
3 provider reasonably determines that it would be
4 impractical for the individual involved to obtain
5 substances prescribed by electronic prescription
6 in a timely manner, and such delay would ad-
7 versely impact the individual's medical condition
8 involved;

9 “(E) a prescription issued by a partici-
10 pating provider prescribing a drug under a re-
11 search protocol;

12 “(F) a prescription issued by a partici-
13 pating provider for a drug for which the Food
14 and Drug Administration requires a prescrip-
15 tion to contain elements that are not able to be
16 included in electronic prescribing, such as a
17 drug with risk evaluation and mitigation strate-
18 gies that include elements to assure safe use;

19 “(G) a prescription issued for an individual
20 who receives hospice care or for a resident of a
21 nursing facility (as defined in section 1919(a)
22 of the Social Security Act);

23 “(H) a prescription issued under cir-
24 cumstances in which electronic prescribing is
25 not available due to temporary technological or

1 electrical failure, as specified jointly by the Sec-
2 retary, the Secretary of Health and Human
3 Services, and the Secretary of Labor through
4 rulemaking; and

5 “(I) a prescription issued by a partici-
6 pating provider allowing for the dispensing of a
7 non-patient specific prescription pursuant to a
8 standing order, approved protocol for drug ther-
9 apy, collaborative drug management, or com-
10 prehensive medication management, in response
11 to a public health emergency or other cir-
12 cumstances under which the participating pro-
13 vider may issue a non-patient specific prescrip-
14 tion.

15 “(3) RULES OF CONSTRUCTION.—

16 “(A) VERIFICATION.—Nothing in this sub-
17 section shall be construed as requiring a dis-
18 penser to verify that a participating provider,
19 with respect to a prescription for a schedule II,
20 III, IV, or V controlled substance that is a pre-
21 scription drug covered by a group health plan,
22 has a waiver (or is otherwise exempt) under
23 paragraph (2) from the requirement under
24 paragraph (1).

1 “(B) AUTHORITY TO DISPENSE.—Nothing
2 in this subsection shall be construed as affect-
3 ing the ability of a group health plan to cover,
4 or the ability of a dispenser to continue to dis-
5 pense, a prescription drug if the prescription
6 for such drug is an otherwise valid written,
7 oral, or fax prescription that is consistence with
8 applicable laws and regulations.

9 “(C) PATIENT CHOICE.—Nothing in this
10 subsection shall be construed as affecting the
11 ability of an individual who is a participant or
12 beneficiary of a group health plan and who is
13 prescribed a schedule II, III, IV, or V con-
14 trolled substance that is a prescription drug
15 covered by the plan to designate a particular
16 dispenser to dispense a prescribed controlled
17 substance to the extent consistent with the re-
18 quirements under this subsection.

19 “(4) REGULATIONS ON POLICY REQUIRE-
20 MENTS.—The Secretary, the Secretary of Health
21 and Human Services, and the Secretary of Labor
22 shall promulgate regulations specifying requirements
23 for the policies established by group health plans
24 under paragraph (1). Such regulations shall include
25 requirements for—

1 “(A) a uniform process by which plans are
2 required to set the e-prescribing requirements;

3 “(B) a process by which plans are required
4 to grant waivers and exceptions to participating
5 providers pursuant to paragraph (2); and

6 “(C) a mechanism for plans to recognize
7 waivers issued to participating providers under
8 part D of title XVIII of the Public Health Serv-
9 ice Act, pursuant to paragraph (2)(C).

10 “(5) PROHIBITIONS.—The policies established
11 pursuant to paragraph (1) by a group health plan
12 may not—

13 “(A) require dispensers of a schedule II,
14 III, IV, or V controlled substance to confirm
15 that the prescription for the controlled sub-
16 stance was electronically issued by a partici-
17 pating provider in accordance with such poli-
18 cies, as described in paragraph (1);

19 “(B) require dispensers of such controlled
20 substances to submit information or data be-
21 yond what is otherwise required to process a
22 prescription drug claim in order to confirm a
23 participating provider’s compliance with such
24 policies;

1 “(C) reject, deny, or recoup reimbursement
2 for a prescription drug claim based on the for-
3 mat in which the prescription was issued; or

4 “(D) require a participating provider to
5 use a specific vendor for electronic prescribing
6 or a specific electronic prescribing product or
7 system.

8 “(6) ATTESTATION OF COMPLIANCE.—Begin-
9 ning on January 1, 2026, each group health plan
10 shall annually submit to the Secretary, the Secretary
11 of Health and Human Services, and the Secretary of
12 Labor an attestation of compliance with the require-
13 ments of this subsection.

14 “(7) CONSULTATION REQUIREMENT FOR RULE-
15 MAKING.—In promulgating regulations to carry out
16 this subsection, the Secretary, the Secretary of
17 Health and Human Services, and the Secretary of
18 Labor shall jointly consult with dispensers of con-
19 trolled substances, State insurance regulators, health
20 insurance issuers offering group or individual health
21 insurance coverage, and health care practitioners.”.

22 (d) UPDATE OF BIOMETRIC COMPONENT OF MULTI-
23 FACTOR AUTHENTICATION.—Not later than 1 year after
24 the date of enactment of this Act, the Attorney General
25 shall finalize a regulation updating the requirements for

1 the biometric component of multifactor authentication
2 with respect to electronic prescriptions of controlled sub-
3 stances, as required under section 2003(c) of the SUP-
4 PORT for Patients and Community Act (Public Law 115-
5 271).