

SENATE BILL REPORT

SB 6271

AS OF FEBRUARY 3, 1992

Brief Description: Prohibiting restrictions on use of pharmacies by health insurance policies.

SPONSORS: Senators Nelson, West, Murray, Niemi, Vognild, Johnson, L. Smith, Moore, Anderson, Stratton, Gaspard, Wojahn, Amondson and Newhouse

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Martin Lovinger (786-7443)

Hearing Dates: February 6, 1992

BACKGROUND:

Currently, Washington law is silent on restrictions placed by insurance policies that contain prescription coverage on the choice of pharmacies. This also limits the insured's choice of pharmacist.

SUMMARY:

Each disability insurance policy, group disability insurance policy, health care service contract, health maintenance agreement, and public employees health plan that provides for payment of all or a part of prescription costs may not limit purchases to designated pharmacies after November 1, 1992. The policies may not require additional fees or payment of a deductible for use of a nondesignated pharmacy after that date.

Any pharmacy that wants to be designated under any policy need only make that desire known and meet the terms and conditions set in the policy contract. Any pharmacy that fills prescriptions pursuant to this act must do so under the same terms as designated pharmacies.

This act does not apply to health maintenance organizations in which all pharmaceutical services are provided by employees of the health maintenance organization.

Appropriation: none

Revenue: none

Fiscal Note: requested January 24, 1992