

5904

Sponsor(s): Senators Deccio, Thibaudeau, Winsley, Franklin, Parlette, Keiser, Brandland, Benton, Carlson, Hale, Johnson, Kline, McAuliffe, McCaslin, Mulliken, Oke, Rasmussen, West, Finkbeiner, Kohl-Welles, Shin, Stevens, Esser, B. Sheldon and Hewitt

Brief Description: Concerning prescription drug assistance programs for seniors.

SB 5904 - DIGEST

(SUBSTITUTED FOR - SEE 1ST SUB)

Declares an intent to develop programs to provide prescription drugs at an affordable price to those in need, and increase public awareness regarding their safe and cost-effective use.

Establishes a program to be known as the medicaid senior prescription drug program.

Directs the department to obtain necessary federal waivers to implement the medicaid senior prescription drug program. Consistent with federal waiver conditions, the department may charge enrollment fees, premiums, or point-of-service cost-sharing to enrollees of the program.

Declares that eligibility for this program is limited to persons: (1) Who are age sixty-five and older;

(2) Whose family income does not exceed one hundred fifty percent of the federal poverty level as adjusted for family size and determined annually by the federal department of health and human services;

(3) Who do not otherwise have insurance that provides prescription drug coverage; and

(4) Who otherwise are eligible under Title XIX and the state's federal prescription drug waiver program.

Directs the health care authority to implement a program whereby it negotiates with prescription drug manufacturers for price discounts, comparable to those negotiated for its preferred prescription drugs, to be available to any Washington resident as indicated.

Requires each of the state's area agencies on aging to implement a program intended to inform and train persons sixty-five years and older in the safe and appropriate use of prescription and nonprescription medications. To further this purpose, the department shall award a development grant of no more than five thousand dollars to each of the agencies upon a showing that: (1) The agency has the ability to effectively administer such a program, including an understanding of the relevant issues and appropriate outreach and follow-up;

(2) The agency can bring resources to the program in addition to those funded by the grant; and

(3) The program will be a collaborative effort between the agency and other health care providers and programs in the location to be served, including doctors, pharmacists, and long-term care providers.

Provides that, by January 1, 2005, the administrator of the

health care authority and the director of the department of social and health services shall submit to the governor and the legislature a progress report regarding the implementation of the programs created in this act.