

SSB 5892 - S AMD 110

By Senators Keiser, Pflug

ADOPTED AS AMENDED 03/11/2009

1 Strike everything after the enacting clause and insert the  
2 following:

3 "Sec. 1. RCW 69.41.190 and 2006 c 233 s 1 are each amended to read  
4 as follows:

5 (1)(a) Except as provided in subsection (2) of this section, any  
6 pharmacist filling a prescription under a state purchased health care  
7 program as defined in RCW 41.05.011(2) shall substitute, where  
8 identified, a preferred drug for any nonpreferred drug in a given  
9 therapeutic class, unless the endorsing practitioner has indicated on  
10 the prescription that the nonpreferred drug must be dispensed as  
11 written, or the prescription is for a refill of an antipsychotic,  
12 antidepressant, chemotherapy, antiretroviral, or immunosuppressive  
13 drug, or for the refill of a immunomodulator/antiviral treatment for  
14 hepatitis C for which an established, fixed duration of therapy is  
15 prescribed for at least twenty-four weeks but no more than forty-eight  
16 weeks, in which case the pharmacist shall dispense the prescribed  
17 nonpreferred drug.

18 ~~((+2))~~ (b) When a substitution is made under (a) of this  
19 subsection ~~((+1) of this section)~~, the dispensing pharmacist shall  
20 notify the prescribing practitioner of the specific drug and dose  
21 dispensed.

22 (2)(a) A state purchased health care program may impose limited  
23 restrictions on an endorsing practitioner's authority to write a  
24 prescription to dispense as written only under the following  
25 circumstances:

26 (i) There is statistical or clear data demonstrating the endorsing  
27 practitioner's frequency of prescribing dispensed as written for  
28 nonpreferred drugs varies significantly from the prescribing patterns  
29 of his or her peers;

1       (ii) The medical director of a state purchased health program has:  
2 (A) Presented the endorsing practitioner with data that indicates the  
3 endorsing practitioner's prescribing patterns vary significantly from  
4 his or her peers, (B) provided the endorsing practitioner an  
5 opportunity to explain the variation in his or her prescribing patterns  
6 to those of his or her peers, and (C) if the variation in prescribing  
7 patterns cannot be explained, provided the endorsing practitioner  
8 sufficient time to change his or her prescribing patterns to align with  
9 those of his or her peers; and

10       (iii) The restrictions imposed under (a) of this subsection (2)  
11 must be limited to the extent possible to reduce variation in  
12 prescribing patterns and shall remain in effect only until such time as  
13 the endorsing practitioner can demonstrate a reduction in variation in  
14 line with his or her peers.

15       (b) A state purchased health care program may immediately designate  
16 an available, less expensive generic product in a previously reviewed  
17 drug class as a preferred drug, without first submitting the product to  
18 review by the pharmacy and therapeutics committee established pursuant  
19 to RCW 70.14.050.

20       (c) Subject to the refill provisions in subsection (1)(a) of this  
21 section, for a patient's first course of treatment within a therapeutic  
22 class of drugs, a state purchased health care program may impose  
23 limited restrictions on endorsing practitioners' authority to write a  
24 prescription to dispense as written, only under the following  
25 circumstances:

26       (i) There is a less expensive therapeutic alternative generic  
27 product available to treat the condition;

28       (ii) The drug use review board established under WAC 388-530-4000  
29 reviews and provides recommendations as to the appropriateness of the  
30 limitation;

31       (iii) Notwithstanding the limitation set forth in (c)(ii) of this  
32 subsection, the endorsing practitioner shall have an opportunity to  
33 request as medically necessary, as defined in WAC 388-501-0165(3), that  
34 the brand name drug be prescribed as the first course of treatment; and

35       (iv) The state purchased health care program may provide, where  
36 available, prescription, emergency room, diagnosis, and hospitalization  
37 history with the endorsing practitioner.

1 (d) If, within a therapeutic class, there is a therapeutic  
2 alternative over-the-counter drug available, a state purchased health  
3 care program may designate the over-the-counter drug as the preferred  
4 drug.

5 (e) A state purchased health care program may impose limited  
6 restrictions on endorsing practitioners' authority to prescribe  
7 pharmaceuticals to be dispensed as written for a purpose outside the  
8 scope of their approved labels only under the following circumstances:

9 (i) There is a less expensive on label product available to treat  
10 the condition;

11 (ii) The drug use review board established under WAC 388-530-4000  
12 reviews and provides recommendations as to the appropriateness of the  
13 limitation; and

14 (iii) Notwithstanding the limitation set forth in (e)(ii) of this  
15 subsection, the endorsing practitioner shall have an opportunity to  
16 request as medically necessary, as defined in WAC 388-501-0165(3), that  
17 the drug be prescribed for an off-label purpose.

18 NEW SECTION. Sec. 2. This act is necessary for the immediate  
19 preservation of the public peace, health, or safety, or support of the  
20 state government and its existing public institutions, and takes effect  
21 immediately."

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22 On page 1, line 3 of the title, after "manner;" strike the  
23 remainder of the title and insert "amending RCW 69.41.190; and  
24 declaring an emergency."

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