

SENATE BILL REPORT

SHB 1155

As Reported by Senate Committee On:
Health Care, March 21, 2013

Title: An act relating to prescription information.

Brief Description: Concerning prescription information.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Cody, Schmick and Ryu; by request of Department of Health).

Brief History: Passed House: 3/04/13, 98-0.

Committee Activity: Health Care: 3/19/13, 3/21/13 [DP, w/oRec].

SENATE COMMITTEE ON HEALTH CARE

Majority Report: Do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Keiser, Ranking Member; Bailey, Cleveland, Ericksen, Frockt and Schlicher.

Minority Report: That it be referred without recommendation.

Signed by Senator Parlette.

Staff: Kathleen Buchli (786-7488)

Background: State law permits original prescriptions or prescription refills for legend drugs to be electronically communicated between the authorized practitioner and a pharmacy. Electronic communication is defined as communication by computer, facsimile, or other electronic means. These transmissions must comply with various requirements, including laws governing the form, content, recordkeeping, and processing of prescriptions. The system used for transmitting must be approved by the Board of Pharmacy (Board), unless the system uses facsimile equipment that transmits an exact visual image of the prescription.

Since 1998, a similar state law has also allowed electronic communication of prescriptions for Schedule III through V controlled substances. Under that law, prescriptions for Schedule II controlled substances may be transmitted only by written prescription or, for a patient in a long-term care facility or hospice, by facsimile transmission. In an emergency, a Schedule II controlled substance may be dispensed on an oral prescription. That provision also prohibits refills of Schedule II controlled substance prescriptions. Until 2010, federal law did not

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permit electronic communication of prescriptions for controlled substances. Under federal rules adopted in 2010, electronic communication is allowed for Schedule II through V controlled substances. The rules specify the requirements that must be met for an electronic prescription or health record system to be approved for this use by the practitioner.

Summary of Bill: The authority for dispensing Schedule II controlled substances is expanded to permit a pharmacy to dispense them pursuant to an electronically communicated prescription. In addition to meeting Board standards, any system for transmitting electronically communicated prescription information related to controlled substances must comply with federal rules for electronically communicated prescriptions for controlled substances. It is specified that Schedule V controlled substances may not be dispensed without a prescription.

Prescriptions for Schedule II controlled substances may not be filled more than six months after the date that the prescription was issued, and it is clarified that the same limitation exists for Schedule III through V controlled substances. Schedule III through V controlled substances may not be refilled more than five times. The definition of electronic communication of prescription information, as it pertains to both legend drugs and controlled substances, is modified to relate to the transmission of a prescription or refill authorization using computer systems. The term excludes prescription or refill authorization transmitted verbally by phone or facsimile transmissions.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This bill is at the request of the Department of Health (DOH). It is an important bill that aligns state law with federal requirements. It has been mentioned that funding for the Prescription Monitoring Program is still an issue. Electronic prescribing allows pharmacists and providers to reduce errors. It will reduce fraud and abuse and increase patient compliance.

Persons Testifying: PRO: Lis Houchen, National Assn. of Chain Drug Stores; Karen Jensen, DOH.