

SENATE BILL REPORT

SB 5148

As of February 3, 2013

Title: An act relating to medication access for the uninsured.

Brief Description: Allowing for redistribution of medications under certain conditions.

Sponsors: Senators Keiser, Becker, Cleveland, Conway, Frockt, Parlette, Rolfes, Kohl-Welles, Schlicher and Kline.

Brief History:

Committee Activity: Health Care: 1/31/13.

SENATE COMMITTEE ON HEALTH CARE

Staff: Kathleen Buchli (786-7488)

Background: Thirty-nine states have enacted laws to create prescription drug recycling, repository, or redistribution programs for unused medication. In general, drug redistribution programs allow the return of prescription drugs in single-use or sealed packaging from state programs, nursing homes, and other medical facilities. The medicines are then redistributed for use to needy residents who cannot afford to purchase their prescribed drugs. The scope of prescription drug programs varies by state and may include the following provisions: direct the financial terms of the donations or regulate resale; assure purity, safety, and freshness of the products; restrict the donation of expired drugs; prohibit the donation of controlled substances; require a state-licensed pharmacist or pharmacy to be part of the verification and distribution process; require patients to possess a valid prescription for the drugs they receive; limit donations to cancer drugs; limit donations to those within long-term care facilities; or limit program participation to correctional facilities.

Summary of Bill: Any health care practitioner, pharmacist, medical facility, drug manufacturer, or drug wholesaler may donate prescription drugs and supplies to a pharmacy for redistribution to individuals who are uninsured and are at or below 200 percent of the federal poverty level. If an uninsured and low-income individual has not been identified as in need of available prescription drugs and supplies, other individuals expressing need may receive those drugs. Participation by a pharmacy is voluntary. A pharmacy that receives prescription drugs or supplies may distribute these to another pharmacy, pharmacist, or prescribing practitioner for redistribution.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Prescription drugs and supplies may be accepted and dispensed by participating pharmacies if the prescription drug is in its original, sealed, and tamper-evident packaging, or in an opened package if the single unit doses remain intact; the prescription drug bears an expiration date that is more than six months after the date the prescription drug was donated; the prescription drug or supplies are inspected before they are dispensed, and they are determined to not be adulterated or misbranded; the prescription drug is dispensed by a pharmacist for the use of a person holding a prescription for those drugs or supplies; and other safety precautions adopted by the Department of Health are satisfied. Any donor who receives notice of a recall relating to donated prescription drugs or supplies must notify the pharmacy of the recall; recalled medications may not be distributed.

Drug manufacturers acting in good faith are not subject to criminal prosecution or liable for civil damages for injury, death, or loss to a person or property for matters related to the donation, acceptance, or dispensing of a prescription drug manufactured by the drug manufacturer that is donated. This includes liability for failure to transfer or communicate product, consumer information, or the expiration date of the donated prescription drugs or supplies. This does not apply if the act or omission constitutes gross negligence or willful or wanton misconduct.

Donors and pharmacies, other than drug manufacturers, that exercise reasonable care in donating, accepting, or distributing prescription drugs are immune from criminal prosecution, professional discipline, or civil liability for any injury, death, or loss to any person or property relating to such activities. This does not apply for acts constituting gross negligence or willful or wanton misconduct.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: The bill takes effect on July 1, 2014.

Staff Summary of Public Testimony: PRO: This bill addresses a need to properly dispose of unused medicine and to provide access for those people who are unable to afford their prescription medicines. We support including an informed consent requirement for the recipients of donated medications.

Persons Testifying: PRO: Leslie Emerick, Home Care Assn. of WA, WA State Hospice, Palliative Care Organization.