

# FINAL BILL REPORT

## SSB 5459

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Synopsis as Enacted

**Brief Description:** Requiring ninety-day supply limits on certain drugs dispensed by a pharmacist.

**Sponsors:** Senate Committee on Health Care (originally sponsored by Senators Becker, Keiser, Parlette, Dammeier and Kline).

**Senate Committee on Health Care**  
**House Committee on Health Care & Wellness**

**Background:** The State Board of Pharmacy, within the Department of Health, regulates the licensing of pharmacists and the practice of pharmacy. In general, pharmacists may dispense medications consistent with the prescription or order; however, a pharmacist may make product substitutions or modifications to the prescription under some conditions.

A number of states have passed legislation allowing pharmacists to dispense refills of a prescription with up to a 90-day supply without the direct order of the prescriber.

**Summary:** A pharmacist may dispense up to a 90-day supply of a drug, other than a controlled substance, with a valid prescription that specifies the initial quantity of less than a 90-day supply followed by refills, if all of the following requirements are met:

- the patient has completed an initial 30-day supply of the drug, or has been previously dispensed the same medication in a 90-day supply;
- the total quantity of dosage units dispensed does not exceed the total quantity of dosage units authorized by the prescriber on the prescription including refills;
- the prescriber has not specified that dispensing the prescription in an initial amount is medically necessary; and
- the pharmacist is exercising professional judgment.

A pharmacist may not dispense a greater supply of a drug if the prescriber indicates no change to quantity orally or in the prescriber's own handwriting, or if the prescriber checks the box on the prescription marked no change to quantity and personally initials the box or checkmark. The pharmacist dispensing an increased supply of the drug must notify the prescriber of the increase in the dosage dispensed.

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*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.*

Nothing may be construed to require a health benefit plan, workers' compensation insurance plan, pharmacy benefit manager, or other entity, to provide coverage for a drug in a manner inconsistent with the patient's benefit plan.

**Votes on Final Passage:**

Senate	49	0	
House	90	3	(House amended)
Senate	48	0	(Senate concurred)

**Effective:** July 28, 2013.