

SENATE BILL REPORT

SB 5268

As Reported by Senate Committee On:
Health Care, January 29, 2015

Title: An act relating to refilling eye drop prescriptions.

Brief Description: Concerning refilling eye drop prescriptions.

Sponsors: Senators Parlette, Kohl-Welles, Hatfield, Angel and Fraser.

Brief History:

Committee Activity: Health Care: 1/26/15, 1/29/15 [DPS].

SENATE COMMITTEE ON HEALTH CARE

Majority Report: That Substitute Senate Bill No. 5268 be substituted therefor, and the substitute bill do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Frockt, Ranking Minority Member; Angel, Bailey, Brown, Cleveland, Conway, Jayapal, Keiser, Parlette and Rivers.

Staff: Kathleen Buchli (786-7488)

Background: Glaucoma refers to a group of related eye disorders that all cause damage to the optic nerve which carries information from the eye to the brain. In most cases, glaucoma is associated with higher-than-normal pressure inside the eye. Glaucoma eye drops often are the first choice over glaucoma surgery and are intended to control intraocular pressure to prevent eye damage. If untreated or uncontrolled, glaucoma first causes peripheral vision loss and eventually may lead to blindness. According to Prevent Blindness America, glaucoma affects almost 53,000 people in this state.

Glaucoma eye drops are dispensed via a prescription. Many insurers have structured the design of their drug benefits to align with the frequency at which prescriptions can be filled. With oral drugs, a 30-day supply is limited to the number of pills provided. However, with eye drops, patients may accidentally put multiple drops in their eyes, or miss the eye, which would result in the prescription running out before 30 days have passed.

Summary of Bill (Recommended Substitute): Pharmacists may refill a prescription for topical ophthalmic products at 70 percent of the predicted days of use. This applies to original prescriptions and refills. In order to refill the prescription early, the prescription

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must indicate the number of refills permitted and the early refill must not exceed that number. Early refills are permitted only one time.

EFFECT OF CHANGES MADE BY HEALTH CARE COMMITTEE (Recommended Substitute): Removes the limitation to glaucoma eye drops and expands it to apply to topical ophthalmic products.

Removes the provision limiting the refills of a prescription within 30 days of use. Instead, early refills may be provided at 70 percent of predicted days of use.

Appropriation: None.

Fiscal Note: Not requested.

Committee/Commission/Task Force Created: No.

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

Staff Summary of Public Testimony on Original Bill: PRO: This bill is helpful for patients. The 30-day supply mentioned in the bill may be too limiting. We may need to modify that language to permit refills at 70 percent of the predicted use. Glaucoma is a leading cause of blindness in this country. Many people have difficulty in administering drops due to their age or health care conditions and we need to allow early access to refills to ensure continuity to medicine. The prescription eye drops permitted to be refilled under the bill should not be limited to glaucoma medicines only.

CON: The standards in the bill deviate from the Medicare standards. The bill should reflect the Centers for Medicare and Medicaid Services standard which is to allow early refills at 70 percent of the predictive days of use. The standard for early refills should not be unique to Washington State.

Persons Testifying: PRO: Dave Arbaugh, Allergan; Brad Tower, Optometric Physicians of WA; Aaron Weingeist, MD, Ophthalmologist, WA Academy of Eye Physicians and Surgeons.

CON: Mel Sorensen, America's Health Insurance Plans, Express Scripts.