

FINAL BILL REPORT

SSB 6569

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FULL VETO
VETO OVERRIDE
Synopsis as Enacted

Brief Description: Creating a task force on patient out-of-pocket costs.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Cleveland, Becker, Carlyle, Keiser and Ranker).

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

Background: A recent Kaiser Family Foundation Health Tracking Poll indicates that half of the public reports taking a prescription drug, and almost 40 percent of those people report taking four or more drugs. Of those individuals taking four or more drugs, 38 percent say it is difficult to afford the cost of the prescriptions, and 35 percent say they or a family member has not filled a prescription or has cut pills in half or skipped doses because of the cost. The cost of prescription drugs are identified as a primary area of concern, along with the deductible that must be paid prior to insurance coverage, and the insurance premiums.

Summary: The Department of Health must convene a task force on patient out-of-pocket costs. The task force must include representatives from all participants with a role in determining the prescription drug costs and out-of-pocket costs for patients. Participants may include patient groups, insurance carriers, pharmacists, pharmacy benefit managers, pharmaceutical companies, prescribers, hospitals, the Office of the Insurance Commissioner, the Health Care Authority and other purchasers, the Office of Financial Management, unions, a Taft-Hartley Trust, a business association, and biotechnology representatives.

The task force must evaluate factors contributing to the out-of-pocket costs for patients, particularly in the first quarter of each year. Factors shall include prescription drug cost trends and plan benefit design. The task force must consider patient treatment adherence and the impact on chronic illness and acute disease, with consideration of the long-term outcomes and costs for the patient. The task force must consider the impact when patients cannot maintain access to their prescription drugs and the implications of adverse health impacts such as more expensive medical interventions or hospitalizations and the impact on the workforce with the loss of productivity. The task force must also consider the impact of the factors on the affordability of health care coverage.

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.

The task force recommendations, or a summary of the discussions, must be provided to the appropriate committees of the Legislature by December 1, 2016.

Votes on Final Passage:

Senate	49	0
House	78	19

Votes on Veto Override:

First Special Session

Senate	41	0
House	82	12

Effective: June 28, 2016