
HOUSE BILL 1069

State of Washington

52nd Legislature

1991 Regular Session

By Representatives Braddock, Leonard, Prentice, Jones, Pruitt, Riley, Wineberry, Franklin, Jacobsen, Roland, H. Myers, Bowman, Inslee, Morris and Spanel.

Read first time January 18, 1991. Referred to Committee on Health Care.

1 AN ACT Relating to prescription medicine insurance coverage; adding
2 a new section to chapter 48.20 RCW; adding a new section to chapter
3 48.21 RCW; adding a new section to chapter 48.44 RCW; adding a new
4 section to chapter 41.05 RCW; and creating a new section.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. **Sec. 1.** The legislature finds that many health
7 care insurance policies, that include prescription coverage, severely
8 restrict the citizens' choice of available pharmacies. The legislature
9 further finds that such restrictions infringe on the citizens' right to
10 have their prescriptions filled at the pharmacy and by the pharmacist
11 of their choice.

12 NEW SECTION. **Sec. 2.** A new section is added to chapter 48.20 RCW
13 to read as follows:

1 Each disability insurance policy issued or renewed after January 1,
2 1992, that provides for payment of all or a portion of prescription
3 medicine costs, or reimbursement therefor, may not limit purchase of
4 prescription medicines to a designated pharmacy. The policy may not
5 require the pharmacy patient to make a different or variable copayment
6 or contribution, whether figured as a fixed dollar amount or a
7 percentage of the cost, based on where or from whom the prescription
8 medicines are purchased.

9 NEW SECTION. **Sec. 3.** A new section is added to chapter 48.21 RCW
10 to read as follows:

11 Each group disability insurance policy issued or renewed after
12 January 1, 1992, that provides for payment of all or a portion of
13 prescription medicine costs, or reimbursement therefor, may not limit
14 purchase of prescription medicines to a designated pharmacy. The
15 policy may not require the pharmacy patient to make a different or
16 variable copayment or contribution, whether figured as a fixed dollar
17 amount or a percentage of the cost, based on where or from whom the
18 prescription medicines are purchased.

19 NEW SECTION. **Sec. 4.** A new section is added to chapter 48.44 RCW
20 to read as follows:

21 Each health care service contract issued or renewed after January
22 1, 1992, that provides for payment of all or a portion of prescription
23 medicine costs, or reimbursement therefor, may not limit purchase of
24 prescription medicines to a designated pharmacy. The contract may not
25 require the pharmacy patient to make a different or variable copayment
26 or contribution, whether figured as a fixed dollar amount or a
27 percentage of the cost, based on where or from whom the prescription
28 medicines are purchased.

1 NEW SECTION. **Sec. 5.** A new section is added to chapter 41.05 RCW
2 to read as follows:

3 Each health plan offered to public employees and their covered
4 dependents under this chapter that is not subject to the provisions of
5 Title 48 RCW and is established or renewed after January 1, 1992, that
6 provides for payment of all or a portion of prescription medicine
7 costs, or reimbursement therefor, may not limit purchase of
8 prescription medicines to a designated pharmacy. The plan may not
9 require the pharmacy patient to make a different or variable copayment
10 or contribution, whether figured as a fixed dollar amount or a
11 percentage of the cost, based on where or from whom the prescription
12 medicines are purchased.