
SENATE BILL 6271

State of Washington

52nd Legislature

1992 Regular Session

By Senators Nelson, West, Murray, Niemi, Vognild, Johnson, L. Smith, Moore, Anderson, Stratton, Gaspard, Wojahn, Amondson and Newhouse

Read first time 01/23/92. Referred to Committee on Health & Long-Term 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 48.46 RCW; adding a new section to chapter 41.05
5 RCW; and creating a new section.

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

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

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

3 (1) Each disability insurance policy issued or renewed after
4 November 1, 1992, that provides for payment of all or a portion of
5 prescription costs, or reimbursement thereof, may not limit purchase of
6 prescription medicines to a designated pharmacy nor provide for the
7 payment of additional fees or deductibles by the covered pharmacy
8 patient as a condition of obtaining prescription benefits from a
9 pharmacy other than a designated pharmacy.

10 (2) The policy may not prohibit a qualified provider of pharmacy
11 services from becoming a designated provider under the provisions of
12 such policy if the applicant pharmacy indicates a desire to be so
13 recognized and meets all the applicable terms and conditions of the
14 policy contract.

15 (3) Any pharmacy filling prescriptions under this section agrees to
16 provide pharmaceutical services under the same terms, including
17 administrative, financial, and professional conditions, as those
18 provided by the designated pharmacy.

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

21 (1) Each group disability insurance policy issued or renewed after
22 November 1, 1992, that provides for payment of all or a portion of
23 prescription costs, or reimbursement thereof, may not limit purchase of
24 prescription medicines to a designated pharmacy nor provide for the
25 payment of additional fees or deductibles by the covered pharmacy
26 patient as a condition of obtaining prescription benefits from a
27 pharmacy other than a designated pharmacy.

28 (2) The policy may not prohibit a qualified provider of pharmacy
29 services from becoming a designated provider under the provisions of

1 such policy if the applicant pharmacy indicates a desire to be so
2 recognized and meets all the applicable terms and conditions of the
3 policy contract.

4 (3) Any pharmacy filling prescriptions under this section agrees to
5 provide pharmaceutical services under the same terms, including
6 administrative, financial, and professional conditions, as those
7 provided by the designated pharmacy.

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

10 (1) Each health care service contract issued or renewed after
11 November 1, 1992, that provides for payment of all or a portion of
12 prescription costs, or reimbursement thereof, may not limit purchase of
13 prescription medicines to a designated pharmacy nor provide for the
14 payment of additional fees or deductibles by the covered pharmacy
15 patient as a condition of obtaining prescription benefits from a
16 pharmacy other than a designated pharmacy.

17 (2) The policy may not prohibit a qualified provider of pharmacy
18 services from becoming a designated provider under the provisions of
19 such policy if the applicant pharmacy indicates a desire to be so
20 recognized and meets all the applicable terms and conditions of the
21 policy contract.

22 (3) Any pharmacy filling prescriptions under this section agrees to
23 provide pharmaceutical services under the same terms, including
24 administrative, financial, and professional conditions, as those
25 provided by the designated pharmacy.

26 NEW SECTION. **Sec. 5.** A new section is added to chapter 48.46 RCW
27 to read as follows:

1 (1) Each health maintenance agreement issued or renewed after
2 November 1, 1992, that provides for payment of all or a portion of
3 prescription costs, or reimbursement thereof, may not limit purchase of
4 prescription medicines to a designated pharmacy nor provide for the
5 payment of additional fees or deductibles by the covered pharmacy
6 patient as a condition of obtaining prescription benefits from a
7 pharmacy other than a designated pharmacy.

8 (2) The policy may not prohibit a qualified provider of pharmacy
9 services from becoming a designated provider under the provisions of
10 such policy if the applicant pharmacy indicates a desire to be so
11 recognized and meets all the applicable terms and conditions of the
12 policy contract.

13 (3) Any pharmacy filling prescriptions under this section agrees to
14 provide pharmaceutical services under the same terms, including
15 administrative, financial, and professional conditions, as those
16 provided by the designated pharmacy.

17 (4) This section does not apply to health maintenance organizations
18 in which all pharmaceutical services are provided by employees of the
19 health maintenance organization.

20 NEW SECTION. **Sec. 6.** A new section is added to chapter 41.05 RCW
21 to read as follows:

22 (1) Each health plan offered to public employees and their covered
23 dependents under this chapter that is not subject to the provisions of
24 Title 48 RCW and is established or renewed after November 1, 1992, that
25 provides for payment of all or a portion of prescription costs, or
26 reimbursement thereof, may not limit purchase of prescription medicines
27 to a designated pharmacy nor provide for the payment of additional fees
28 or deductibles by the covered pharmacy patient as a condition of

1 obtaining prescription benefits from a pharmacy other than a designated
2 pharmacy.

3 (2) The policy may not prohibit a qualified provider of pharmacy
4 services from becoming a designated provider under the provisions of
5 such policy if the applicant pharmacy indicates a desire to be so
6 recognized and meets all the applicable terms and conditions of the
7 policy contract.

8 (3) Any pharmacy filling prescriptions under this section agrees to
9 provide pharmaceutical services under the same terms, including
10 administrative, financial, and professional conditions, as those
11 provided by the designated pharmacy.