1047-S AMH SHMK SILV 042

**SHB 1047** - H AMD **57**

By Representative Schmick

**NOT CONSIDERED 01/05/2018**

 On page 14, beginning on line 3, after "(1)" strike all material through "participate." on line 6 and insert "(a) All administrative and operational costs associated with establishing and implementing approved drug take-back programs must be covered as provided in (b) of this subsection."

 On page 14, after line 17, insert the following:

 "(b) By rule, the department shall develop a methodology for dividing program administrative and operational costs among drug supply chain participants. The department shall: Require program operators to provide an accounting of their costs under (a) of this subsection following the close of each accounting year; determine an assessment methodology to divide program administrative and operational costs equally among drug supply chain participants; establish procedures for collecting assessments from drug supply chain participants; and reimburse each program operator for its costs under (a) of this subsection, minus the program operator's equitable share of the costs. For purposes of this subsection, "drug supply chain participants" means covered manufacturers, pharmacy benefit managers, drug wholesalers, retail pharmacies, and health care providers with prescriptive authority."

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|  |  EFFECT:   Requires the Department of Health (DOH) to develop a methodology for dividing drug take-back programs' administrative and operational costs among "drug supply chain participants," defined as covered manufacturers, pharmacy benefit managers, drug wholesalers, retail pharmacies, and health care providers with prescriptive authority (instead of requiring covered manufacturers to pay all administrative and operational costs). Requires the DOH to: (1) require program operators to provide an annual account of their costs; (2) determine an assessment methodology to divide the costs equally among drug supply chain participants; (3) establish procedures for collecting the assessments; and (4) reimburse program operators for their costs, minus their equitable share.  |

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