CERTIFICATION OF ENROLLMENT

HOUSE BILL 1565

63rd Legislature 2013 Regular Session

Passed by the House March 11, 2013 Yeas 97 Nays 0 Speaker of the House of Representatives	I, Barbara Baker, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is HOUSE BILL 1565 as passed by the House of Representatives and the Senate on the dates hereon set forth.		
		Passed by the Senate April 11, 2013 Yeas 48 Nays 0	
			Chief Clerk
President of the Senate			
Approved	FILED		
	Secretary of State State of Washington		
Governor of the State of Washington			

HOUSE BILL 1565

Passed Legislature - 2013 Regular Session

State of Washington 63rd Legislature 2013 Regular Session

By Representatives Harris, Green, Jinkins, Cody, Ryu, and Morrell Read first time 01/30/13. Referred to Committee on Appropriations.

AN ACT Relating to funding the prescription monitoring program from the medicaid fraud penalty account; amending RCW 70.225.020 and

3 74.09.215; and creating a new section.

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

<u>NEW SECTION.</u> **Sec. 1.** The legislature finds that:

- (1) The prescription monitoring program contributes to patient safety and reduction in drug errors for all patients, including medicaid beneficiaries in Washington state. Further, the prescription monitoring program provides the critical function of reducing costs borne by medicaid and provides for the detection of fraud in the medicaid system.
- (2) Because of the nexus between medicaid, medicaid fraud, and cost reductions, the funding for the operations and management of the prescription monitoring program should be funded entirely from the medicaid fraud penalty account under RCW 74.09.215, with the option of funding the prescription monitoring program through voluntary contributions from private individuals and corporations as defined under Title 23, 23B, 24, or 25 RCW.

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- 1 **Sec. 2.** RCW 70.225.020 and 2012 c 192 s 1 are each amended to read 2 as follows:
- 3 (1) ((When sufficient funding is provided for such purpose through 4 federal or private grants, or is appropriated by the legislature,)) The department shall establish and maintain a prescription monitoring 5 program to monitor the prescribing and dispensing of all Schedules II, 6 7 IV, and V controlled substances and any additional drugs 8 identified by the board of pharmacy as demonstrating a potential for 9 abuse by all professionals licensed to prescribe or dispense such substances in this state. The program shall be designed to improve 10 11 health care quality and effectiveness by reducing abuse of controlled 12 substances, reducing duplicative prescribing and overprescribing of 13 controlled substances, and improving controlled substance prescribing practices with the intent of eventually establishing an electronic 14 15 database available in real time to dispensers and prescribers of controlled substances. As much as possible, the department should 16 establish a common database with other states. 17 This program's management and operations shall be funded entirely from the funds in 18 the account established under RCW 74.09.215. Nothing in this chapter 19 20 prohibits voluntary contributions from private individuals and business entities as defined under Title 23, 23B, 24, or 25 RCW to assist in 21 22 funding the prescription monitoring program.
 - (2) Except as provided in subsection (4) of this section, each dispenser shall submit to the department by electronic means information regarding each prescription dispensed for a drug included under subsection (1) of this section. Drug prescriptions for more than one day use should be reported. The information submitted for each prescription shall include, but not be limited to:
 - (a) Patient identifier;
- 30 (b) Drug dispensed;
 - (c) Date of dispensing;
- 32 (d) Quantity dispensed;
- 33 (e) Prescriber; and
- 34 (f) Dispenser.

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- 35 (3) Each dispenser shall submit the information in accordance with 36 transmission methods established by the department.
- 37 (4) The data submission requirements of subsections (1) through (3) 38 of this section do not apply to:

(a) Medications provided to patients receiving inpatient services provided at hospitals licensed under chapter 70.41 RCW; or patients of such hospitals receiving services at the clinics, day surgery areas, or other settings within the hospital's license where the medications are administered in single doses;

- (b) Pharmacies operated by the department of corrections for the purpose of providing medications to offenders in department of corrections institutions who are receiving pharmaceutical services from a department of corrections pharmacy, except that the department of corrections must submit data related to each offender's current prescriptions for controlled substances upon the offender's release from a department of corrections institution; or
- (c) Veterinarians licensed under chapter 18.92 RCW. The department, in collaboration with the veterinary board of governors, shall establish alternative data reporting requirements for veterinarians that allow veterinarians to report:
 - (i) By either electronic or nonelectronic methods;
- (ii) Only those data elements that are relevant to veterinary practices and necessary to accomplish the public protection goals of this chapter; and
- 21 (iii) No more frequently than once every three months and no less 22 frequently than once every six months.
 - (5) The department shall <u>continue to</u> seek federal grants to support the activities described in chapter 259, Laws of 2007. The department may not require a practitioner or a pharmacist to pay a fee or tax specifically dedicated to the operation <u>and management</u> of the system.
- **Sec. 3.** RCW 74.09.215 and 2012 c 241 s 103 are each amended to 28 read as follows:

The medicaid fraud penalty account is created in the state treasury. All receipts from civil penalties collected under RCW 74.09.210, all receipts received under judgments or settlements that originated under a filing under the federal false claims act, and all receipts received under judgments or settlements that originated under the state medicaid fraud false claims act, chapter 74.66 RCW, must be deposited into the account. Moneys in the account may be spent only after appropriation and must be used only for medicaid services, fraud

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- 1 detection and prevention activities, recovery of improper payments,
- 2 ((and)) for other medicaid fraud enforcement activities, and the
- 3 prescription monitoring program established in chapter 70.225 RCW.

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