## SENATE BILL 5459

State of Washington63rd Legislature2013 Regular SessionBy Senators Becker, Keiser, Parlette, Dammeier, and KlineRead first time 01/31/13.Referred to Committee on Health Care .

1 AN ACT Relating to requiring ninety-day supply limits on certain 2 drugs dispensed by a pharmacist; and adding a new section to chapter 3 18.64 RCW.

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

5 <u>NEW SECTION.</u> Sec. 1. A new section is added to chapter 18.64 RCW 6 to read as follows:

7 (1) A pharmacist may dispense not more than a ninety-day supply of 8 a drug other than a controlled substance pursuant to a valid 9 prescription that specifies an initial quantity of less than a 10 ninety-day supply followed by periodic refills of that amount if all of 11 the following requirements are satisfied:

12 (a) The patient has completed an initial thirty-day supply of the 13 drug. However, if the prescription continues the same medication as 14 previously dispensed in a ninety-day supply, the initial thirty-day 15 supply under this subsection (1) is not required;

(b) The total quantity of dosage units dispensed does not exceed the total quantity of dosage units authorized by the prescriber on the prescription including refills; 1 (c) The prescriber has not specified on the prescription that 2 dispensing the prescription in an initial amount followed by periodic 3 refills is medically necessary; and

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(d) The pharmacist is exercising his or her professional judgment.

5 (2) In no case may a pharmacist dispense a greater supply of a drug 6 pursuant to this section if the prescriber personally indicates, either 7 orally or in their own handwriting, "no change to quantity," or words 8 of similar meaning. Nothing in this section prohibits a prescriber 9 from checking a box on a prescription marked "no change to quantity," 10 provided that the prescriber personally initials the box or checkmark.

(3) Nothing in this section may be construed to require a health care service plan, health insurer, workers' compensation insurance plan, pharmacy benefit manager, or any other person or entity including, but not limited to, a state program or state employer, to provide coverage for a drug in a manner inconsistent with the beneficiary's plan benefit.

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