

HOUSE BILL REPORT

SHB 1625

As Passed House:
March 2, 2015

Title: An act relating to the provision of drugs to ambulance and aid services.

Brief Description: Concerning provision of drugs to ambulance or aid services.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Schmick and Wylie).

Brief History:

Committee Activity:

Health Care & Wellness: 2/10/15, 2/17/15 [DPS].

Floor Activity:

Passed House: 3/2/15, 97-0.

Brief Summary of Substitute Bill

- Allows hospital-based pharmacies to provide minimal quantities of medications to ambulance and aid services if they are related to emergency medical services.
- Directs the Emergency Medical Services and Trauma Care Steering Committee to review the potential use of certain medications by emergency medical technicians.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 15 members: Representatives Cody, Chair; Riccelli, Vice Chair; Schmick, Ranking Minority Member; Harris, Assistant Ranking Minority Member; Caldier, Clibborn, DeBolt, Jinkins, Johnson, Moeller, Robinson, Rodne, Short, Tharinger and Van De Wege.

Staff: Chris Blake (786-7392).

Background:

Pharmacy Services.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Hospitals that have pharmaceutical services are responsible for the distribution of drugs throughout the hospital. Hospital pharmacies must be licensed by the Pharmacy Quality Assurance Commission. They provide pharmaceutical services that include procuring, preparing, storing, distributing, and controlling all drugs in the hospital; inspecting nursing care units where medications are dispensed, administered, or stored; monitoring drug therapy; providing drug information to patients and providers; and surveying and reporting adverse drug reactions.

Regulations adopted by the Pharmacy Quality Assurance Commission define "wholesale distribution" as the sale of prescription drugs to a person who is not a consumer or patient. Hospital pharmacies are not generally engaged in wholesale drug distribution activities; however, they may perform some similar functions that have been specifically exempted from the term. These exemptions include certain intracompany transfers to affiliated entities and the sale of a drug for emergency medical reasons. The term "emergency medical reasons" is not defined, but includes transfers of drugs between retail pharmacies to alleviate temporary shortages.

Emergency Medical Personnel.

Emergency medical personnel may provide patient care that is included within training curricula, approved specialized training, and local medical program director protocols. The four categories of emergency medical service personnel in descending order of training are: paramedics, intermediate life support technicians, emergency medical technicians, and first responders. Emergency medical service personnel may only provide services within the scope of care established in the curriculum of the person's level of certification or any specialized training. In addition, the services must be included in the protocols of each county's medical program director. With the exception of the administration of epinephrine, an emergency medical technician may not administer injections.

Summary of Substitute Bill:

Pharmacies operated by a hospital may provide minimal quantities of medications to ambulance and aid services for uses associated with providing emergency medical services. The pharmacies may provide the medications if:

- the hospital is located in the same county or an adjacent county, to the ambulance or aid service's area of operation;
- the types of drugs provided correspond to the level of service provided by the ambulance or aid service and the training of its emergency medical personnel;
- the types of drugs provided are identified by the medical program director through patient care protocols; and
- the provision of the medications is not contingent upon arrangements to transport patients to the hospital other than for reasons related to the medical needs of patients and patient care procedures.

The Pharmacy Quality Assurance Commission must collaborate with the Emergency Medical Services and Trauma Steering Committee (Steering Committee) to develop guidelines for hospitals, ambulance and aid services, and medical program directors for the provision of medications in accordance with state and federal laws.

The Steering Committee must review the appropriateness of allowing emergency medical technicians to use hydrocortisone sodium succinate or similar medications for the treatment of adrenal insufficiency and glucagon emergency kits. The review must consider the adequacy of current training, the feasibility of supplementing training, the costs and likely utilization of stocking ambulances with the medications, and options for localized solutions to specific community needs. The Steering Committee must report to the Governor and the appropriate committees of the Legislature by December 15, 2016, with the results of its review and any recommendations.

Appropriation: None.

Fiscal Note: Available on original bill.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Many small rural areas with emergency medical services found that a rule change would require them to set up accounts with pharmaceutical distributors to get the drugs they normally use on the ambulances instead of getting them through hospital pharmacies. This will help rural ambulances to restock their medications.

(Opposed) None.

Persons Testifying: Representative Schmick, prime sponsor.

Persons Signed In To Testify But Not Testifying: None.