

SENATE BILL REPORT

SSB 5293

As Passed Senate, March 2, 2015

Title: An act relating to preserving the use of hydrocodone products by licensed optometrists in Washington state.

Brief Description: Concerning the use of hydrocodone products by licensed optometrists in Washington state.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Becker, Keiser, Rivers, Conway, Dammeier, Hobbs, Angel, Frockt, Bailey, Ericksen, Mullet and Benton).

Brief History:

Committee Activity: Health Care: 1/26/15, 1/29/15 [DPS].

Passed Senate: 3/02/15, 47-0.

SENATE COMMITTEE ON HEALTH CARE

Majority Report: That Substitute Senate Bill No. 5293 be substituted therefor, and the substitute bill do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Frockt, Ranking Minority Member; Angel, Bailey, Brown, Cleveland, Conway, Jayapal, Keiser, Parlette and Rivers.

Staff: Evan Klein (786-7483)

Background: Drug Schedules. Drugs and other substances that are considered controlled substances under the Controlled Substances Act are divided into five categories:

- Schedule I controlled substances are those that have no currently acceptable medical use in the United States;
- Schedule II substances have a high potential for abuse, such as cocaine or Ritalin, which may lead to severe psychological or physical dependence;
- Schedule III drugs, substances, or chemicals are drugs with moderate to low potential for physical and psychological dependence; and
- Schedules IV and V controlled substances have low potentials for abuse.

Hydrocodone Classification. Hydrocodone is an opiate analgesic typically combined with other ingredients in products used to relieve moderate to severe pain. Federal law classified combination products with less than 15 milligrams of hydrocodone per dosage unit, e.g. Vicodin, as Schedule III narcotics. Products with 15 or more milligrams of hydrocodone per

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dosage unit were classified as Schedule II narcotics. In October 2014, the Drug Enforcement Administration rescheduled all hydrocodone combination products as Schedule II narcotics.

Optometrists and Controlled Substances. Optometrists examine the human eye for defects in vision and, after completing required didactic and clinical instruction, may use certain topical and oral drugs for diagnostic and treatment purposes. No optometrist may prescribe, dispense, purchase, possess, or administer drugs classified as Schedule III through V controlled substances, except as permitted by the Optometry Board of Washington for the treatment of diseases and conditions related to the human eye.

An optometrist may prescribe, dispense, or administer authorized controlled substances for up to seven days to treat a particular patient for a single trauma, episode, or condition, or for associated pain. Optometrists may not use, prescribe, dispense, purchase, possess, or administer any Schedule I or II controlled substance

Summary of Substitute Bill: Optometrists may use, prescribe, dispense, purchase, possess, or administer Schedule II hydrocodone combination products. The Board of Optometry may include Schedule II hydrocodone combination products in its list of approved oral controlled substances and oral legend drugs.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: PRO: The prescribed use of hydrocodone is important for patient care and the management of pain. Optometrists have utilized hydrocodone combination product prescriptions for over a decade and it has proven to be a cost-effective measure for managing pain, with low side effects. Optometrists may only issue a seven-day prescription of hydrocodone products which reduces the risk of abuse by patients.

Persons Testifying: PRO: Brad Tower, Kim Eckroth, Optometric Physicians of WA; John Merslich, optometric physician.