HOUSE BILL REPORT ESHB 2115

As Passed House:

February 9, 2024

Title: An act relating to prescription labels for medications used for abortion.

Brief Description: Concerning prescription labels for medications used for abortion.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Thai, Slatter, Senn, Chapman, Reed, Ramel, Macri, Gregerson, Doglio, Fosse, Riccelli, Wylie and Reeves).

Brief History:

Committee Activity:

Health Care & Wellness: 1/12/24, 1/19/24 [DPS].

Floor Activity:

Passed House: 2/9/24, 82-15.

Brief Summary of Engrossed Substitute Bill

• Allows practitioner to request that the label for a prescription for abortion medication include the prescribing and dispensing health care facility name, instead of the practitioner's name.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Riccelli, Chair; Bateman, Vice Chair; Bronoske, Davis, Harris, Macri, Orwall, Simmons, Stonier, Thai and Tharinger.

Minority Report: Do not pass. Signed by 4 members: Representatives Schmick, Ranking Minority Member; Hutchins, Assistant Ranking Minority Member; Caldier and Graham.

Minority Report: Without recommendation. Signed by 1 member: Representative

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

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Staff: Chris Blake (786-7392).

Background:

When a prescription drug is dispensed, its container must have a label containing specific information. The information includes the name and address of the dispensing pharmacy, the prescription number, the name of the prescribing health care provider, the prescriber's directions for use, the name and strength of the medication, the name of the patient, the date, and the expiration date. A prescribing health care provider may request that the name and strength of the medication not be shown.

Summary of Engrossed Substitute Bill:

A practitioner employed by a prescribing and dispensing health care facility may request that the label for a prescription for abortion medication include the prescribing and dispensing health care facility name, instead of the practitioner's name. The term "abortion medications" is defined as substances used in the course of medical treatment intended to induce the termination of a pregnancy.

Appropriation: None.

Fiscal Note: Not requested.

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) The right to safe, legal abortion is quickly diminishing and the state must do everything it can to assure safe, comprehensive reproductive health care, including protecting those who are providing the abortion care. Harassment and violence against abortion providers have surged in recent years. In addition to the harassment that abortion providers face from antiabortion individuals and groups, providers also fear being targeted by abusive partners or family members of their patients. This bill is intended to ensure that providers are not being intimidated or harassed by replacing their names with their provider identification numbers. While the National Provider Identifier is searchable to the public, this will provide a layer of anonymity to prescribers as patients bring prescriptions back to other states. This is a small, but critical step to protect providers and ensure that abortion care remains safe and accessible in Washington and that providers remain safe.

There is work to be done to ensure appropriate reproductive health care is available and this cannot be done if the state is losing providers' care because they are threatened with legal

action. This bill will help providers in Washington know that they are supported in their work and will allow them to focus on providing care.

This bill does not change recordkeeping, transparency, or conversations around who is responsible for prescribing medication. It is good that this bill is voluntary for pharmacies since not all pharmacy billing systems permit the transmission of prescription claims without the prescriber's name.

(Opposed) None.

Persons Testifying: Representative My-Linh Thai, prime sponsor; Jenny Arnold, Washington State Pharmacy Association; Erin Berry, Planned Parenthood Greater Northwest; Kate McLean, American College of Obstetricians and Gynecologists; and Vicki Lowe, American Indian Health Commission and Washington State Women's Commission.

Persons Signed In To Testify But Not Testifying: None.

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