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SENATE BILL 6244

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State of Washington

68th Legislature

2024 Regular Session

By Senator Rivers

- AN ACT Relating to enacting the pain parity act; adding a new section to chapter 43.70 RCW; adding a new section to chapter 74.09
- 3 RCW; and adding a new section to chapter 48.43 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 43.70 6 RCW to read as follows:
- 7 (1) The legislature finds that every competent adult has the 8 fundamental right of self-determination regarding decisions 9 pertaining to their own health, including the right to refuse an 10 opioid drug.
- 11 (2) The department shall develop and publish on its website an 12 educational pamphlet regarding the use of nonopioid alternatives for 13 the treatment of acute nonoperative, acute perioperative, subacute, 14 or chronic pain. The pamphlet shall, at a minimum, conform with the 15 most current clinical practice guidelines for prescribing opioids for 16 pain issued by the centers for disease control and prevention and 17 shall include:
- 18 (a) Information on available nonopioid alternatives for the 19 treatment of pain, including available nonopioid medicinal drugs or 20 drug products and nonpharmacological therapies; and

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- 1 (b) The advantages and disadvantages of the use of nonopioid alternatives. 2
- 3 <u>NEW SECTION.</u> **Sec. 2.** A new section is added to chapter 74.09 RCW to read as follows: 4
- 5 (1) In establishing and maintaining the formulary and preferred drug list, the authority shall ensure that no nonopioid drug approved 6 by the United States food and drug administration for the treatment 7 or management of pain shall be disadvantaged or discouraged with 9 respect to coverage relative to any opioid or narcotic drug for the treatment or management of pain on such formulary and preferred drug 10 11 list, where impermissible disadvantaging or discouragement includes, without limitation: Designating any such nonopioid drug as a 12 nonpreferred drug if any opioid or narcotic drug is designated as a 13 preferred drug; or establishing more restrictive or more extensive 14 15 utilization controls including, but not limited to, more restrictive 16 or more extensive prior authorization or step therapy requirements for such nonopioid drug than the least restrictive or extensive 17 18 utilization controls applicable to any such opioid or narcotic drug.

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- (2) This section applies to a nonopioid drug immediately upon its approval by the United States food and drug administration for the treatment or management of pain, regardless of whether such drug has been reviewed by the authority for inclusion on the formulary and preferred drug list. This section also applies to drugs being provided under a contract between the authority and any managed care organization.
- NEW SECTION. Sec. 3. A new section is added to chapter 48.43 26 27 RCW to read as follows:
- (1) In establishing and maintaining its formulary, a commercial 28 29 insurer shall ensure that no nonopioid drug approved by the United 30 States food and drug administration for the treatment or management 31 of pain shall be disadvantaged or discouraged, with respect to coverage or cost sharing, relative to any opioid or narcotic drug for 32 the treatment or management of pain on such formulary, where 33 impermissible disadvantaging or discouragement includes, without 34 limitation: Imposing more restrictive coverage criteria on any such 35 nonopioid drug than the least restrictive coverage criteria imposed 36 37 on an opioid or narcotic drug; establishing more restrictive or more 38 extensive utilization controls including, but not limited to, more

p. 2 SB 6244 restrictive or more extensive prior authorization or step therapy requirements, for such nonopioid drug than the least restrictive or extensive utilization controls applicable to any such opioid or narcotic drug; or, if such insurer maintains a formulary grouped into tiers for the purposes of determining cost sharing, placing any such nonopioid drug on a tier that requires a cost-sharing responsibility that exceeds the lowest cost-sharing responsibility required for any opioid or narcotic drug on such formulary.

 (2) This section applies to a nonopioid drug immediately upon its approval by the United States food and drug administration for the treatment or management of pain.

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