

WEST VIRGINIA LEGISLATURE

2019 REGULAR SESSION

Introduced

House Bill 2583

FISCAL
NOTE

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SUMMERS AND DOYLE

[Introduced January 22, 2019; Referred
to the Committee on Health and Human Resources.]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new article,
 2 designated §16-56-1, §16-56-2, §16-56-3, §16-56-4, and §16-56-5, all relating to
 3 permitting a pharmacist to dispense a self-administered hormonal contraceptive under a
 4 standing prescription drug order.

Be it enacted by the Legislature of West Virginia:

ARTICLE 56. FAMILY PLANNING ACCESS ACT.

§16-56-1. Definitions.

1 As used in this article:

2 “Dispense” means the same as that term is defined in §30-5-4.

3 “Patient counseling” means the same as that term is defined in §30-5-4.

4 “Pharmacist” means the same as that term is defined in §30-5-4.

5 “Pharmacy intern” means the same as that term is defined in §30-5-4.

6 “Physician” means the same as that term is defined in §30-3E-1.

7 “Self-administered hormonal contraceptive” means a self-administered hormonal
 8 contraceptive that is approved by the United States Food and Drug Administration to prevent
 9 pregnancy that includes an oral hormonal contraceptive, a hormonal vaginal ring, and a hormonal
 10 contraceptive patch.

§16-56-2. Voluntary participation.

1 This article does not create a duty or standard of care for a person to prescribe or dispense
 2 a self-administered hormonal contraceptive.

§16-56-3. Authorization to dispense self-administered hormonal contraceptives.

1 A pharmacist licensed under §30-5-1 et seq. of this code may dispense a self-
 2 administered hormonal contraceptive: to a patient who is 18 years old or older; pursuant to a
 3 standing prescription drug order made in accordance with §16-56-4 this code without any other
 4 prescription drug order from a person licensed to prescribe a self-administered hormonal
 5 contraceptive; and in accordance with the dispensing guidelines in §16-56-5 of this code.

§16-56-4. Standing prescription drug orders for a self-administered hormonal contraceptive.

1 The state health officer may prescribe on a statewide basis a self-administered hormonal
2 contraceptive by one or more standing orders in accordance with a protocol that requires:

3 (1) The physician to specify the persons, by professional license number, authorized to
4 dispense the self-administered hormonal contraceptive;

5 (2) The Board of Medicine to review at least annually the dispensing practices of the
6 pharmacists dispensing the self-administered hormonal contraceptive;

7 (3) The pharmacist to make and retain a record of each person to whom the self-
8 administered hormonal contraceptive is dispensed, including:

9 (A) The name of the person;

10 (B) The drug dispensed; and

11 (C) Other relevant information.

§16-56-5. Guidelines for dispensing a self-administered hormonal contraceptive.

1 (a) A pharmacist who dispenses a self-administered hormonal contraceptive under this
2 article:

3 (1) Shall obtain a completed self-screening risk assessment questionnaire, that has been
4 approved by the State Health Officer in collaboration with the Board of Pharmacy and the Board
5 of Medicine, from the patient before dispensing the self-administered hormonal contraceptive;

6 (2) If the results of the evaluation indicate that it is unsafe to dispense a self-administered
7 hormonal contraceptive to a patient:

8 (A) May not dispense a self-administered hormonal contraceptive to the patient; and

9 (B) Shall refer the patient to a health care practitioner or local health department;

10 (3) May not continue to dispense a self-administered hormonal contraceptive to a patient
11 for more than 24 months after the date of the initial prescription without evidence that the patient
12 has consulted with a health care practitioner during the preceding 24 months; and

- 13 (4) Shall provide the patient with:
- 14 (A) Written information regarding:
- 15 (i) The importance of seeing the patient's primary care practitioner or women's health care
16 practitioner to obtain recommended tests and screening; and
- 17 (ii) The effectiveness and availability of long-acting reversible contraceptives as an
18 alternative to self-administered hormonal contraceptives; and
- 19 (B) A copy of the record of the encounter with the patient that includes:
- 20 (i) The patient's completed self-assessment tool; and
- 21 (ii) A description of the contraceptives dispensed, or the basis for not dispensing a
22 contraceptive.
- 23 (b) If a pharmacist dispenses a self-administered hormonal contraceptive to a patient, the
24 pharmacist shall, at a minimum, provide patient counseling to the patient regarding:
- 25 (1) The appropriate administration and storage of the self-administered hormonal
26 contraceptive;
- 27 (2) Potential side effects and risks of the self-administered hormonal contraceptive;
- 28 (3) The need for backup contraception;
- 29 (4) When to seek emergency medical attention; and
- 30 (5) The risk of contracting a sexually transmitted infection or disease, and ways to reduce
31 the risk of contraction.

NOTE: The purpose of this bill is permit a pharmacist to dispense a self-administered hormonal contraceptive under a standing prescription drug order.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.