

# Senate Bill 958

Medication and Patient Safety Act



# MONIQUE LIMÓN

REPRESENTING SENATE DISTRICT 19

## THIS BILL

This bill would ensure that patients who need medications administered by a doctor or nurse, such as chemotherapy, can receive the necessary medication in a safe, timely manner.

## BACKGROUND

Many patients with serious and life-threatening diseases need medications that are infused or injected, as prescribed by their doctor. In many cases, these medications are the only hope for a normal quality of life or, in some cases, survival. These medications are used to treat cancer, possible transplant rejection, HIV/AIDS, immune disorders, Parkinson's disease, Duchenne muscular dystrophy, multiple sclerosis, amyotrophic lateral sclerosis, blood disorders, and other debilitating diseases and conditions. The people who receive these medications are often our most vulnerable patients, such as children with life-threatening illnesses (for example, cystic fibrosis and cancer), or frail and elderly adults.

Health care providers keep these drugs in stock, so they are available whenever needed by a patient. To ensure their safety and integrity, providers inspect these medications upon receipt and carefully control the way they are handled and stored.

At times, these medications are not available from a drug manufacturer and must be "compounded" – that is, two or more drugs and other ingredients are combined to create a medication tailored to the needs of an

individual patient. Other medications may be produced by a drug manufacturer and require refrigeration or other special handling during transport and storage. Infused and injected medications can be extremely toxic and can cause death or serious injury to patients if prepared, handled, or administered improperly.

Typically, a patient schedules an appointment to receive the medication. At the appointment, the doctor assesses the patient, which often includes sending blood or other specimens to a lab for rapid analysis, weighing the patient, and/or evaluating the patient's overall clinical status. Based on the lab results and the doctor's assessment, the treatment plan can change from what was initially expected. As a result, a different drug or different strength medication may be needed.

At times, a patient with cancer, possible transplant rejection, or another life-threatening condition may need emergency treatment with an infused or injected medications due to rapid deterioration or exacerbation of their condition.

Unfortunately, health plans have started to implement policies that restrict patient access to these important medications. Instead of allowing the health care provider to use the medication on hand, which they have carefully controlled and prepared, the plan requires the doctor to call the health plan or the plan's "preferred" vendor on a patient-by-patient basis with information about which medication, strength, and dose are needed. The

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health plan or vendor then ships the medication to the health care provider labeled specifically for that patient. This process is known as “white-bagging.” However, when the same-day assessment results in a change to a patient’s originally planned prescription, the treatment is delayed, and the patient is forced to come back on a different day to have their medication administered.

Further, when the medication is finally received, if there are any indications that it was not properly stored or transported (such as receiving a package that should be cold but isn’t, or with torn packaging), then the hospital or infusion center cannot administer the drug, and must re-order it, causing a further delay in treatment.

Delaying treatment may put the patient’s health at risk due to disease progression, and often leads to patient distress. For example, patients prepare mentally and physically for the day of chemotherapy. They arrange time off work, rides and babysitters, and family members may arrange their schedules, too. When a health care provider has the appropriate medication to treat a patient’s specific condition, it is in the patient’s best interest to receive it in a timely manner.

Requiring a patient to wait for the health plan to arrange to have the medication shipped to the provider not only causes undue stress, but is detrimental to the success of the overall treatment plan.

## PURPOSE

This bill would prevent health plans from refusing to cover infused and injected medications that the health care provider has in stock, if required for patient safety or medication integrity. The bill would prevent delayed care, suboptimal care, patient distress, and unnecessary hospital admissions.

## SUPPORT

California Hospital Association (sponsor)  
California Children’s Hospital Association

## STAFF CONTACT

Jimmy Wittrock, Legislative Director  
James.Wittrock@sen.ca.gov  
O: 916.651.4019