BILL ANALYSIS

Senate Research Center
80R6203 JMM-F

S.B. 625
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Health and Human Services
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As Filed

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Current law allows a pharmacist to substitute a generic drug for a brand-name prescription. However, certain immunosuppressant transplant surgeries require specific medication that work in different phases of the immune response, minimize side effects, and produce effective immunosupression to prevent rejection of a transplanted organ and maintain sufficient immunity to prevent infection. Certain generic forms of these medications may cause adverse effects prior to a transplant surgery because generic products do not always contain the same amount of an active ingredient or are formulated in a different manner than their brand-name counterpart. As a result, patients are placed at a health risk if the brand of prescription is changed without a doctor's notice.

As proposed, S.B. 625 requires a pharmacist to obtain a prescribing doctor's signature before a substitution of a prescribed medication can be made.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter A, Chapter 562, Occupations Code, by adding Section 562.0142, as follows:

> Sec. 562.0142. SELECTION OF TRANSPLANT IMMUNOSUPPRESANTS. (a) Prohibits a pharmacist from dispensing a drug for immunosuppressive therapy following a transplant unless the drug is the specific formulation and manufactured by the specific manufacturer prescribed by the patient's physician, except as provided by Subsection (b).
>
> (b) Authorizes a pharmacist to substitute a drug product that is generically equivalent for immunosuppressive therapy following a transplant only if the pharmacist obtains a signed authorization from the prescribing physician before making the substitution.

SECTION 2. Effective date: September 1, 2007.