AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 237
(A-22)

Introduced by: Ohio

Subject: Prescription Drug Dispensing Policies

Referred to: Reference Committee B

Whereas, In some states a pharmacist may dispense a 90-day supply of medication, when a 30-day supply with 2 or more refills is ordered, without approval by the physician, unless the prescription specifically states DAW; and

Whereas, Suicides may involve an overdose of certain prescription medications; and

Whereas, Physician may not be aware of a patients suicide potential; and

Whereas, There are major restrictions on the prescribing of opiates and other controlled substances, other prescription medications may be used by patients to end their lives; and

Whereas, It may be unsafe to leave the decision of whether to dispense a 90-day supply of medication, when a 30-day supply with 2 refills has been ordered by the prescriber, up to "the Pharmacist's Professional discretion after consulting with the patient;" therefore be it

RESOLVED, That our American Medical Association work with pharmacy benefit managers to eliminate financial incentives for patients to receive a supply of medication greater than prescribed (Directive to Take Action); and be it further

RESOLVED, That our AMA create model state legislation that would restrict dispensing medication quantities greater than prescribed (Directive to Take Action); and be it further

RESOLVED, That our AMA support any legislation that would remove financial barriers favoring dispensing quantities of medication greater than prescribed. (New HOD Policy)

Fiscal Note: Not yet determined

Received: 05/10/22

RELEVANT AMA POLICY

Adequate Prescription Medication Supply H-120.943
1. Our AMA urges health plans to: (a) define a month’s supply as a minimum of 31 days and three month’s supply as a minimum of 93 days, so that patients are not shorted on their one-month or three-month supply of prescription drugs; and (b) allow prescription refills to provide the appropriate number of doses for the time period specified by the physician.
2. Our AMA will advocate and support advocacy at the state and federal levels against arbitrary prescription limits that restrict access to medically necessary treatment by limiting the dose, amount or days of the first or subsequent prescription for patients with pain related to a cancer or terminal diagnosis.
Citation: Res. 510, A-07; Reaffirmed: CMS Rep. 04, A-16; Appended: Res. 918, I-16