

Bill Fact Sheet – December 5, 2025 https://legilist.com Bill page: https://legilist.com/bill/108/s/51

S 51

Generic Pharmaceutical Access and Choice for Consumers Act of 2003

Congress: 108 (2003–2005, Ended)

Chamber: Senate Policy Area: Health Introduced: Jan 7, 2003

Current Status: Read twice and referred to the Committee on Health, Education, Labor, and Pensions.

Latest Action: Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (Jan 7, 2003)

Official Text: https://www.congress.gov/bill/108th-congress/senate-bill/51

Sponsor

Name: Sen. Johnson, Tim [D-SD]

Party: Democratic • State: SD • Chamber: Senate

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	Jan 7, 2003

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Summary (as of Jan 7, 2003)

Generic Pharmaceutical Access and Choice for Consumers Act of 2003 - Amends the Public Health Service Act to require each grant or contract entered into under the Act that involves the provision of health care items or services to individuals to include provisions to ensure that any prescriptions provided for under such grant or contract are filled by providing the generic form of the drug involved, unless there is no approved generic form of the drug, or the nongeneric form of the drug is either specifically ordered by the prescribing provider or requested by the individual for whom the drug is prescribed.

Makes similar changes under the Federal Employee Health Benefits program, Medicare program, Medicaid program, and programs affecting Indians, veterans, the uniformed services, and prisoners.

Amends the Federal Food, Drug, and Cosmetic Act to require that for each drug application filed there shall be a determination as to whether there is a therapeutic equivalent for such drug.

Actions Timeline
 Jan 7, 2003: Introduced in Senate Jan 7, 2003: Read twice and referred to the Committee on Health, Education, Labor, and Pensions.