

State “Dispense as Written” Requirements

If you and your patient decide to treat with **TECFIDERA® (dimethyl fumarate)**, use the **National Association of Boards of Pharmacy** reference guide below and follow your state's instructions to help ensure that your patient receives brand-name **TECFIDERA** as intended.¹

STATE	REQUIREMENTS
Alabama	Expressly indicate that substitution is not allowed.
Alaska	Write in own handwriting, in addition to signature, “Brand Necessary.”
Arizona	Expressly indicate that substitution is not allowed.
Arkansas	Write in own handwriting, in addition to signature, “Brand Necessary.”
California	May indicate orally or in own handwriting “Do Not Substitute” or similar words. Allows use of a preprinted “Do Not Substitute” box, provided that the prescriber personally initials the box.
Colorado	Handwrite “Dispense as Written” or hand initial a preprinted box labeled “Dispense as Written.” May also be done electronically.
Connecticut	Handwrite “DAW” or “Dispense as Written” along with “Medically Necessary.”
Delaware	Handwrite “DAW” or “Dispense as Written” along with “Brand Necessary” or “Brand Medically Necessary.”
District of Columbia	Expressly indicate in some manner.
Florida	Expressly indicate in some manner.
Georgia	Prescriber’s signature shall validate the prescription and, unless the prescriber handwrites “Brand Necessary” or “Brand Medically Necessary,” shall designate approval of drug substitution by the pharmacist.
Hawaii	Indicate “Brand Necessary” or “Brand Medically Necessary” in own handwriting, or product selection is allowed. Refer to the Department of Health, Food and Drug Branch.
Idaho	If a prescriber orders by any means that a brand-name drug must be dispensed, then no drug selection is permitted.
Illinois	Prescriber must indicate “May Not Substitute” by marking a designated box. [See Section 225 ILCS 85/25.]
Indiana	Prescriber’s signature on appropriate line of a 2-line prescription.
Iowa	Expressly indicate that substitution is not allowed.
Kansas	Prescriber’s signature on appropriate line of a 2-line prescription and must expressly indicate that substitution is not allowed.
Kentucky	Expressly indicate in some manner. “Brand Medically Necessary” to be handwritten on the face of the prescription by the prescriber for Medicaid patients, or product selection is allowed. May indicate in manner of his or her choice on the prescription “Do Not Substitute,” except that the indication shall not be preprinted on a prescription.
Louisiana	Box must be checked to prevent drug product substitution.
Maine	Prescriber must expressly indicate in some manner. Box must be checked to prevent drug product substitution.
Maryland	“Brand Medically Necessary” to be handwritten on the face of the prescription by the prescriber for Medicaid patients, or product selection is allowed. Prescriber must expressly indicate that substitution is not allowed.
Massachusetts	Indicate “No Substitution.”
Michigan	Handwrite “DAW” or “Dispense as Written.” Prescriber expressly indicates that prescription is to be dispensed as communicated for prescriptions other than those written.
Minnesota	Handwrite “DAW” or “Dispense as Written,” unless the prescription is transmitted electronically in accordance with the Code of Federal Regulations, Title 42, Section 423.
Mississippi	Prescriber’s signature on appropriate line of a 2-line prescription.
Missouri	If a prescriber orders by any means that a brand-name drug must be dispensed, then no drug selection is permitted.
Montana	“Brand Name Medically Necessary” shall be handwritten (or printed if electronically generated) on the face of the prescription if it is medically necessary that an equivalent drug product not be selected.
Nebraska	Expressly indicate in some manner.
Nevada	Write in own handwriting “Dispense as Written.”
New Hampshire	Handwrite “Medically Necessary” on each paper prescription, use electronic indications when transmitted electronically, or give instructions when transmitted orally that the brand-name drug product is medically necessary.
New Jersey	Signature on appropriate line of a 2-line prescription.

State regulations are subject to change. Please consult your state's Board of Pharmacy and Medicaid offices to verify prescribing requirements.



State “Dispense as Written” Requirements (cont’d)

STATE	REQUIREMENTS
New Mexico	Handwrite the words “No Substitution” or the diminutive “No Sub” on the face of the prescription.
New York	Indicate “Dispense as Written” in the designated box or positively indicate the brand for electronic prescriptions. “Brand Medically Necessary” is to be handwritten on the face of the prescription by the prescriber for Medicaid patients, or product selection is allowed. An alternative provision requires positive indication for electronic prescriptions.
North Carolina	Signature on appropriate line of a 2-line prescription. To prevent drug product substitution, prescriber must expressly indicate in some manner.
North Dakota	Write in own handwriting, in addition to signature, “Brand Medically Necessary.”
Ohio	In the case of a written or electronic prescription, including a computer-generated prescription, the prescriber handwrites or actively causes to display on the prescription “Dispense as Written,” “DAW,” “Do Not Substitute,” “Brand Medically Necessary,” or any other statement or numerical code that indicates the prescriber’s intent to prevent substitution. Such a designation shall not be preprinted or stamped on the prescription, but a reminder to the prescriber of the designation procedure may be preprinted or displayed on the prescription form or electronic system the prescriber uses to issue the prescription.
Oklahoma	It is unlawful for a pharmacist to substitute without the authority of the prescriber or purchaser.
Oregon	A practitioner may specify in writing, by a telephonic communication or by electronic transmission, that there shall be no substitution for the specified brand-name drug in any prescription, but may not use default values on the prescription. For an electronically transmitted prescription, the prescriber or prescriber’s agent shall clearly indicate substitution instructions in the prescription drug order as well as all relevant electronic indicators sent as part of the electronic prescription transmission. [See OAR-855-041-1105.]
Pennsylvania	Signature shall validate the prescription and, unless the prescriber handwrites “Brand Necessary” or “Brand Medically Necessary,” shall designate approval of drug substitution by the pharmacist.
Rhode Island	Signature shall validate the prescription and, unless the prescriber indicates “Brand Necessary” or “Brand Medically Necessary,” shall designate approval of drug substitution by the pharmacist. Patient may request, in writing, that the brand name be dispensed.
South Carolina	Signature on appropriate line of a 2-line prescription.
South Dakota	Write in own handwriting, in addition to signature, “Brand Necessary.”
Tennessee	Write in own handwriting the following language (but not limited to): (1) “Brand Name Medically Necessary,” “Dispense as Written,” “Medically Necessary,” “Brand Name,” “No Generic”; or (2) any abbreviation of the language in the section above; or (3) any other prescriber-handwritten notation, such as circling a preprinted “Dispense as Written” on the prescription order, that clearly conveys the intent that a brand name is necessary for the patient.
Texas	Must indicate “Brand Necessary” or “Brand Medically Necessary” in own handwriting, or product selection is allowed.
Utah	Expressly indicate in some manner. Allows use of preprinted “Do Not Substitute” checkbox.
Vermont	Write “Brand Necessary,” “No Substitution,” “Dispense as Written,” or “DAW” in own handwriting. [See 18 V.S.A. §4606 Brand Certification.]
Virginia	“Brand Medically Necessary” to be handwritten on the face of the prescription by the prescriber for Medicaid patients, or product selection is allowed. For all non-Medicaid patients, this phrase must be included but is not required to be handwritten.
Washington	Signature on appropriate line of a 2-line prescription.
West Virginia	Expressly indicate in some manner. Prescriber indicates “Medically Necessary” in own handwriting. Prescriber must indicate “Brand Necessary” or “Brand Medically Necessary” in own handwriting, or product selection is allowed.
Wisconsin	Expressly indicate in some manner.
Wyoming	Expressly indicate that substitution is not allowed.

State regulations are subject to change. Please consult your state’s Board of Pharmacy and Medicaid offices to verify prescribing requirements.

If you have any additional questions, reach out to Biogen Support Services at 1-800-456-2255.

Reprinted with permission: National Association of Boards of Pharmacy® (NABP®), Mount Prospect, IL.

Reference: 1. National Association of Boards of Pharmacy. Survey of pharmacy law 2020. <https://nabp.pharmacy/publications-reports/publications/survey-of-pharmacy-law>. Published 2019. Accessed June 8, 2020.