ESSB 5441 - H COMM AMD

By Committee on Health Care & Wellness

ADOPTED AS AMENDED 4/14/2015

- 1 Strike everything after the enacting clause and insert the 2 following:
- 3 "NEW SECTION. Sec. 1. A new section is added to chapter 48.43 4 RCW to read as follows:
 - (1) A health benefit plan issued or renewed after December 31, 2015, that provides coverage for prescription drugs must implement a medication synchronization policy for the dispensing of prescription drugs to the plan's enrollees.
 - (a) If an enrollee requests medication synchronization for a new prescription, the health plan must permit filling the drug: (i) For less than a one-month supply of the drug if synchronization will require more than a fifteen-day supply of the drug; or (ii) for more than a one-month supply of the drug if synchronization will require a fifteen-day supply of the drug or less.
 - (b) The health plan must establish a daily cost-sharing rate and apply it to a prescription presented to a network pharmacy for a covered drug that is dispensed for more or less than a one-month supply if the drug is in the form of a solid oral dose. This requirement does not apply to: (i) Solid oral doses of antibiotics; or (ii) solid oral doses that are dispensed in their original container or are customarily dispensed in their original packaging to assist patients with compliance.
 - (c) In the case of a drug that would incur a copayment, the health plan must apply cost-sharing as calculated by multiplying the applicable daily cost-sharing rate by the days' supply actually dispensed when the enrollee receives more or less than a one-month supply. In the case of a drug that would incur a coinsurance percentage, the health plan must apply the coinsurance percentage for the drug to the days' supply actually dispensed.
- 30 (2) Upon request of an enrollee, the prescribing provider or 31 pharmacist shall:

1 (a) Determine that filling or refilling the prescription is in the best interest of the enrollee, taking into account the 2 appropriateness of synchronization for the drug being dispensed; 3

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- (b) Inform the enrollee that the prescription will be filled to less than the standard refill amount for the purpose of synchronizing his or her medications; and
- (c) Deny synchronization on the grounds of threat to patient safety or suspected fraud or abuse.
- (3) For purposes of this section, the following terms have the following meanings unless the context clearly requires otherwise:
- "Daily cost-sharing rate" means, as applicable, the established: (i) Monthly copayment under the enrollee's plan, divided by the number of days in a one-month supply for the drug dispensed and rounded to the nearest cent; or (ii) coinsurance percentage under the enrollee's plan.
- (b) "Medication synchronization" means the coordination 16 17 medication refills for a patient taking two or more medications for a chronic condition such that the patient's medications are refilled on 18 the same schedule for a given time period. 19
- (c) "Prescription" has the same meaning as in RCW 18.64.011. 20
- Sec. 2. A new section is added to chapter 41.05 21 NEW SECTION. 22 RCW to read as follows:
 - (1) A health benefit plan offered to public employees and their covered dependents under this chapter that is not subject to chapter 48.43 RCW, that is issued or renewed after December 31, 2015, and that provides coverage for prescription drugs must implement a medication synchronization policy for the dispensing of prescription drugs to the plan's enrollees.
 - (a) If an enrollee requests medication synchronization for a new prescription, the health plan must permit filling the drug: (i) For less than a one-month supply of the drug if synchronization will require more than a fifteen-day supply of the drug; or (ii) for more than a one-month supply of the drug if synchronization will require a fifteen-day supply of the drug or less.
- 35 (b) The health plan must establish a daily cost-sharing rate and 36 apply it to a prescription presented to a network pharmacy for a covered drug that is dispensed for more or less than a one-month 37 supply if the drug is in the form of a solid oral dose. requirement does not apply to: (i) Solid oral doses of antibiotics;

- or (ii) solid oral doses that are dispensed in their original container or are customarily dispensed in their original packaging to assist patients with compliance.
 - (c) In the case of a drug that would incur a copayment, the health plan must apply cost-sharing as calculated by multiplying the applicable daily cost-sharing rate by the days' supply actually dispensed when the enrollee receives more or less than a one-month supply. In the case of a drug that would incur a coinsurance percentage, the health plan must apply the coinsurance percentage for the drug to the days' supply actually dispensed.
- 11 (2) Upon request of an enrollee, the prescribing provider or 12 pharmacist shall:
 - (a) Determine that filling or refilling the prescription is in the best interest of the enrollee, taking into account the appropriateness of synchronization for the drug being dispensed;
 - (b) Inform the enrollee that the prescription will be filled to less than the standard refill amount for the purpose of synchronizing his or her medications; and
- 19 (c) Deny synchronization on the grounds of threat to patient 20 safety or suspected fraud or abuse.
 - (3) For purposes of this section, the following terms have the following meanings unless the context clearly requires otherwise:
 - (a) "Daily cost-sharing rate" means, as applicable, the established: (i) Monthly copayment under the enrollee's plan, divided by the number of days in a one-month supply for the drug dispensed and rounded to the nearest cent; or (ii) coinsurance percentage under the enrollee's plan.
 - (b) "Medication synchronization" means the coordination of medication refills for a patient taking two or more medications for a chronic condition such that the patient's medications are refilled on the same schedule for a given time period.
 - (c) "Prescription" has the same meaning as in RCW 18.64.011."
- 33 Correct the title.

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EFFECT: Requires that if an enrollee requests medication synchronization for a new prescription, the health plan must permit filling the drug: (1) for less than a one-month supply if synchronization will require more than a 15-day supply of the drug; or (2) for more than a one-month supply if synchronization will require a 15-day supply of the drug or less.

Removes the requirement that the plan adjust cost-sharing for a drug with a coinsurance that is dispensed for less than the standard refill amount for the purpose of synchronizing medications. Requires instead that the plan establish a daily cost-sharing rate and apply it to a prescription presented to a network pharmacy for a covered drug that is dispensed for more or less than a one-month supply if the drug is in the form of a solid oral dose. Exempts from this requirement solid oral doses of antibiotics and solid oral doses that are dispensed in their original container or are customarily dispensed in their original packaging to assist patients with compliance.

Requires, for drugs that would incur a copayment, that the plan apply cost-sharing as calculated by multiplying the daily cost-sharing rate by the days' supply actually dispensed when the enrollee receives more or less than a one-month supply. Requires, for drugs that would incur a coinsurance percentage, that the plan apply the coinsurance percentage to the days' supply actually dispensed.

coinsurance percentage to the days' supply actually dispensed.

Defines "daily cost-sharing rate" as the established monthly copayment under the plan, divided by the number of days in a one-month supply for the drug and rounded to the nearest cent, or the coinsurance percentage under the plan.

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