
Health Care & Wellness Committee

ESSB 5441

Brief Description: Addressing patient medication coordination.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Rivers, Frockt, Parlette, Bailey, Conway, Keiser and Benton).

Brief Summary of Engrossed Substitute Bill

- Requires health benefit plans that cover prescription drugs to implement a medication synchronization policy.
- Requires health benefit plans to adjust cost-sharing for drugs dispensed for less than the standard refill amount for the purpose of synchronizing medications.

Hearing Date: 3/18/15

Staff: Alexa Silver (786-7190).

Background:

Medication synchronization or alignment programs involve coordinating a patient's prescription medications to be refilled on the same day in a given time period. As of January 1, 2014, the Centers for Medicare and Medicaid Services requires Medicare Part D plans to apply a daily cost-sharing rate to prescriptions dispensed for less than a full month's supply if the drug is in the form of a solid oral dose. Several states have introduced legislation to require a prorated daily cost-sharing rate for prescriptions dispensed for less than a 30-day supply. In Oregon, legislation enacted last year requires health plans to implement a synchronization policy for aligning the refill dates of a patient's prescription drugs so that drugs refilled at the same frequency may be refilled concurrently.

Summary of Bill:

If a health benefit plan (including a plan offered to public employees and their dependents) covers prescription drugs and is issued or renewed after December 31, 2015, the plan must

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implement a medication synchronization policy for dispensing prescription drugs to the plan's enrollees. A health benefit plan must adjust enrollee cost-sharing for a prescription drug with coinsurance requirements if the drug is dispensed for less than the standard refill amount for the purpose of synchronizing medications. "Medication synchronization" is defined as 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.

Upon the request of an enrollee, a prescribing provider or pharmacist must:

- determine that filling or refilling the prescription is in the best interests of the enrollee, taking into account the appropriateness of synchronization for the drug;
- inform the enrollee that the prescription will be filled to less than the standard refill amount for the purpose of synchronizing the enrollee's medications; and
- deny synchronization on the grounds of threat to patient safety or suspected fraud or abuse.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.