

FINAL BILL REPORT

ESSB 5441

C 213 L 15
Synopsis as Enacted

Brief Description: Addressing patient medication coordination.

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

Senate Committee on Health Care
House Committee on Health Care & Wellness

Background: Medication coordination, or medication synchronization, is an emerging pharmacy practice focused on patients that have multiple medications for chronic conditions by encouraging patients to pick up all their recurring monthly prescriptions on the same day, usually once per month. The concept is often paired with an appointment-based model which involves the pharmacy coordinating medication refills and scheduling a pick-up date for the patient. An evaluation of the model in a midwest pharmacy indicated some patients demonstrated greater adherence with prescribed medications.

Effective January 1, 2014, Medicare began allowing a pro-rated drug copayment for dispensing less than a 30-day supply to assist patients in moving to a synchronized schedule for medication refills.

Summary: Health insurance plans, including the self-insured Uniform Medical Plan, that provide coverage for prescription drugs must implement a medication synchronization policy for the dispensing of prescription drugs for the 2016 plan year. Medication synchronization means the coordination of medication refills for a patient taking two or more medications for a chronic condition to allow the medications to be refilled on the same schedule.

If an enrollee requests medication synchronization for a new prescription, the health plan must permit filling the drug for less than a one-month supply of the drug if synchronization will require more than a fifteen-day supply of the drug, or for more than a one-month supply of the drug if synchronization will require a fifteen-day supply of the drug or less.

The health plan must adjust the enrollee cost sharing for a prescription drug with a co-insurance that is dispensed for less than the standard refill amount for the purpose of synchronizing the medications. The health plan must adjust the cost-sharing for an enrollee for a prescription with a copay that is dispensed for less than the standard refill amount for the purpose of synchronizing by one of the following methods:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

- discounting the copayment rate by fifty percent;
- discounting the copayment rate based on fifteen-day increments; or
- any other method approved by the Office of Insurance Commissioner.

The prescribing provider or pharmacist must do the following:

- determine that filling or refilling the prescription is in the best interest of the enrollees, taking into account the appropriateness of synchronization for the drug being dispensed;
- inform the enrollee that the prescription will be filled to less than the standard refill amount to allow synchronizing the medication; and
- deny synchronization if there is a threat to patient safety, or suspected fraud or abuse.

Votes on Final Passage:

Senate	49	0	
House	97	0	(House amended)
Senate	45	0	(Senate concurred)

Effective: July 24, 2015