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**SENATE BILL 5441**

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**State of Washington 64th Legislature 2015 Regular Session**

**By** Senators Rivers, Frockt, Parlette, Bailey, Conway, Keiser, and Benton

AN ACT Relating to patient medication coordination; adding a new section to chapter 48.43 RCW; and adding a new section to chapter 41.05 RCW.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec.**  A new section is added to chapter 48.43 RCW to read as follows:

(1) A health benefit plan issued or renewed after December 31, 2015, that provides coverage for prescription drugs:

(a) May not deny coverage and must prorate the cost-sharing rate for a prescription drug covered by the plan that is dispensed by a network pharmacy for less than the standard refill amount if:

(i) The prescribing provider or pharmacist determines that filling or refilling the prescription is in the best interest of the enrollee; and

(ii) The enrollee requests or agrees to less than the standard refill amount for the purpose of synchronizing his or her medications;

(b) Must allow a pharmacy to override a denial code related to an early refill if the prescription drug is being dispensed as part of a medication synchronization program; and

(c) Must pay a full pharmacy dispensing fee for each prescription drug dispensed and may not prorate a dispensing fee, regardless of whether:

(i) The prescription drug is partially filled or refilled; or

(ii) The enrollee's copay or fee paid for medication synchronization services is prorated.

(2) For purposes of this section, the following terms have the following meanings unless the context clearly requires otherwise:

(a) "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.

(b) "Network pharmacy" means a pharmacy that participates in the health benefit plan's network.

(c) "Prescription" has the same meaning as in RCW 18.64.011.

NEW SECTION. **Sec.**  A new section is added to chapter 41.05 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:

(a) May not deny coverage and must prorate the cost-sharing rate for a prescription drug covered by the plan that is dispensed by a network pharmacy for less than the standard refill amount if:

(i) The prescribing provider or pharmacist determines that filling or refilling the prescription is in the best interest of the enrollee; and

(ii) The enrollee requests or agrees to less than the standard refill amount for the purpose of synchronizing his or her medications;

(b) Must allow a pharmacy to override a denial code related to an early refill if the prescription drug is being dispensed as part of a medication synchronization program; and

(c) Must pay a full pharmacy dispensing fee for each prescription drug dispensed and may not prorate a dispensing fee, regardless of whether:

(i) The prescription drug is partially filled or refilled; or

(ii) The enrollee's copay or fee paid for medication synchronization services is prorated.

(2) For purposes of this section, the following terms have the following meanings unless the context clearly requires otherwise:

(a) "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.

(b) "Network pharmacy" means a pharmacy that participates in the health benefit plan's network.

(c) "Prescription" has the same meaning as in RCW 18.64.011.

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