

Committee on Banking and Insurance

CS/CS/SB 800 — Medication Synchronization

by Appropriations Committee; Banking and Insurance Committee; and Senators Broxson and Mayfield

The bill establishes coverage and payment requirements relating to medication synchronization. Medication synchronization is a process where a pharmacist coordinates or synchronizes refills for a patient who is taking multiple covered prescriptions, allowing them to be filled on the same day each month. Partial fills for less than the standard refill amount are often required in order to align all patient medications to the same refill date. Medication synchronization can be used to increase medication adherence.

The bill requires health insurers and health maintenance organizations (HMOs) that provide prescription drug coverage to offer insureds or members the option to align the refill dates of their prescription drugs through a network pharmacy at least once during the plan year. Controlled substances, prescription drugs dispensed in an unbreakable package, or a multidose unit of a prescription may not be partially filled for the purpose of aligning refill dates.

The bill requires health insurers and HMOs to pay a full dispensing fee to the network pharmacy unless otherwise agreed to by the plan and the network pharmacy. The health insurer or HMO must prorate cost-sharing obligations of the insured for each partial refill of a covered prescription drug dispensed to align refill dates. Notwithstanding these requirements for a medication synchronization process, the bill deems certain existing medication synchronization programs, which provide for early refills, refill overrides, and access on the insurer or HMO's website to information about the program as complying with the bill's requirements.

If approved by the Governor, these provisions take effect January 1, 2018.

Vote: Senate 36-0; House 120-0