

2016 -- H 8022 SUBSTITUTE A

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LC005609/SUB A
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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2016

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A N A C T

RELATING TO INSURANCE - ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Representatives Blazejewski, O'Brien, McKiernan, Solomon, and
Kazarian

Date Introduced: March 31, 2016

Referred To: House Corporations

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness
2 Insurance Policies" is hereby amended by adding thereto the following section:

3 **27-18-50.1. Medication synchronization.** – (a) An individual or group health insurance
4 plan or policy delivered, issued for delivery, or renewed in this state on or after January 1, 2017
5 providing prescription drug coverage in the state must permit and apply a prorated daily cost-
6 sharing rate to covered prescriptions for a chronic condition that are dispensed by an in-network
7 pharmacy for less than a thirty (30) days' supply if the prescriber and pharmacist determines the
8 fill or refill to be in the best interest of the patient for the management or treatment of a chronic
9 long-term care condition and the patient requests or agrees to less than a thirty (30) days' supply
10 for the purpose of synchronizing the patient's medications and the insured's or enrollee's
11 maintenance prescription drug(s) to be synchronized meets all of the following requirements:

12 (1) Is covered by the policy, certificate, or contract described in this chapter;

13 (2) Is used for the management and treatment of a chronic long-term care condition and
14 have authorized refills that remain available to the insured or enrollee;

15 (3) Except as otherwise provided in this subparagraph, is not a controlled substance
16 included in schedules 2 to 5;

17 (4) Meets all utilization management requirements specific to the maintenance
18 prescription drugs at the time of the request to synchronize the insured's or enrollee's multiple
19 maintenance prescription drugs;

1 (5) Is of a formulation that can be effectively split over required short fill periods to
2 achieve synchronization; and

3 (6) Does not have quantity limits or dose optimization criteria or requirements that will
4 be violated when synchronizing the insured's or enrollee's multiple maintenance prescription
5 drugs.

6 (b) The plan or policy described in subsection (a) shall apply a prorated daily cost sharing
7 rate for maintenance prescription drugs that are dispensed by an in-network pharmacy for the
8 purpose of synchronizing the insured's or enrollee's multiple maintenance prescription drugs.

9 (c) The plan or policy described in subsection (a) shall not reimburse or pay any
10 dispensing fee that is prorated. The insurer shall only pay or reimburse a dispensing fee that is
11 based on each maintenance prescription drug dispensed.

12 (d) A synchronization shall only occur once per year per maintenance prescription drug.

13 SECTION 2. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service
14 Corporations" is hereby amended by adding thereto the following section:

15 **27-19-26.1. Medication synchronization.** – (a) An individual or group health insurance
16 plan or policy delivered, issued for delivery, or renewed in this state on or after January 1, 2017
17 providing prescription drug coverage in the state must permit and apply a prorated daily cost-
18 sharing rate to covered prescriptions for a chronic condition that are dispensed by an in-network
19 pharmacy for less than a thirty (30) days' supply if the prescriber and pharmacist determines the
20 fill or refill to be in the best interest of the patient for the management or treatment of a chronic
21 long-term care condition and the patient requests or agrees to less than a thirty (30) days' supply
22 for the purpose of synchronizing the patient's medications and the insured's or enrollee's
23 maintenance prescription drug(s) to be synchronized meets all of the following requirements:

24 (1) Is covered by the policy, certificate, or contract described in this chapter;

25 (2) Is used for the management and treatment of a chronic long-term care condition and
26 have authorized refills that remain available to the insured or enrollee;

27 (3) Except as otherwise provided in this subparagraph, is not a controlled substance
28 included in schedules 2 to 5;

29 (4) Meets all utilization management requirements specific to the maintenance
30 prescription drugs at the time of the request to synchronize the insured's or enrollee's multiple
31 maintenance prescription drugs;

32 (5) Is of a formulation that can be effectively split over required short fill periods to
33 achieve synchronization; and

34 (6) Does not have quantity limits or dose optimization criteria or requirements that will

1 be violated when synchronizing the insured's or enrollee's multiple maintenance prescription
2 drugs.

3 (b) The plan or policy described in subsection (a) shall apply a prorated daily cost sharing
4 rate for maintenance prescription drugs that are dispensed by an in-network pharmacy for the
5 purpose of synchronizing the insured's or enrollee's multiple maintenance prescription drugs.

6 (c) The plan or policy described in subsection (a) shall not reimburse or pay any
7 dispensing fee that is prorated. The insurer shall only pay or reimburse a dispensing fee that is
8 based on each maintenance prescription drug dispensed.

9 (d) A synchronization shall only occur once per year per maintenance prescription drug.

10 SECTION 3. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service
11 Corporations" is hereby amended by adding thereto the following section:

12 **27-20-23.1. Medication synchronization.** -- (a) An individual or group health insurance
13 plan or policy delivered, issued for delivery, or renewed in this state on or after January 1, 2017
14 providing prescription drug coverage in the state must permit and apply a prorated daily cost-
15 sharing rate to covered prescriptions for a chronic condition that are dispensed by an in-network
16 pharmacy for less than a thirty (30) days' supply if the prescriber and pharmacist determines the
17 fill or refill to be in the best interest of the patient for the management or treatment of a chronic
18 long-term care condition and the patient requests or agrees to less than a thirty (30) days' supply
19 for the purpose of synchronizing the patient's medications and the insured's or enrollee's
20 maintenance prescription drug(s) to be synchronized meets all of the following requirements:

21 (1) Is covered by the policy, certificate, or contract described in this chapter;

22 (2) Is used for the management and treatment of a chronic long-term care condition and
23 have authorized refills that remain available to the insured or enrollee;

24 (3) Except as otherwise provided in this subparagraph, is not a controlled substance
25 included in schedules 2 to 5;

26 (4) Meets all utilization management requirements specific to the maintenance
27 prescription drugs at the time of the request to synchronize the insured's or enrollee's multiple
28 maintenance prescription drugs;

29 (5) Is of a formulation that can be effectively split over required short fill periods to
30 achieve synchronization; and

31 (6) Does not have quantity limits or dose optimization criteria or requirements that will
32 be violated when synchronizing the insured's or enrollee's multiple maintenance prescription
33 drugs.

34 (b) The plan or policy described in subsection (a) shall apply a prorated daily cost sharing

1 rate for maintenance prescription drugs that are dispensed by an in-network pharmacy for the
2 purpose of synchronizing the insured's or enrollee's multiple maintenance prescription drugs.

3 (c) The plan or policy described in subsection (a) shall not reimburse or pay any
4 dispensing fee that is prorated. The insurer shall only pay or reimburse a dispensing fee that is
5 based on each maintenance prescription drug dispensed.

6 (d) A synchronization shall only occur once per year per maintenance prescription drug.

7 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance
8 Organizations" is hereby amended by adding thereto the following section:

9 **27-41-38.1. Medication synchronization. --** (a) An individual or group health insurance
10 plan or policy delivered, issued for delivery, or renewed in this state on or after January 1, 2017
11 providing prescription drug coverage in the state must permit and apply a prorated daily cost-
12 sharing rate to covered prescriptions for a chronic condition that are dispensed by an in-network
13 pharmacy for less than a thirty (30) days' supply if the prescriber and pharmacist determines the
14 fill or refill to be in the best interest of the patient for the management or treatment of a chronic
15 long-term care condition and the patient requests or agrees to less than a thirty (30) days' supply
16 for the purpose of synchronizing the patient's medications and the insured's or enrollee's
17 maintenance prescription drug(s) to be synchronized meets all of the following requirements:

18 (1) Is covered by the policy, certificate, or contract described in this chapter;

19 (2) Is used for the management and treatment of a chronic long-term care condition and
20 have authorized refills that remain available to the insured or enrollee;

21 (3) Except as otherwise provided in this subparagraph, is not a controlled substance
22 included in schedules 2 to 5;

23 (4) Meets all utilization management requirements specific to the maintenance
24 prescription drugs at the time of the request to synchronize the insured's or enrollee's multiple
25 maintenance prescription drugs;

26 (5) Is of a formulation that can be effectively split over required short fill periods to
27 achieve synchronization; and

28 (6) Does not have quantity limits or dose optimization criteria or requirements that will
29 be violated when synchronizing the insured's or enrollee's multiple maintenance prescription
30 drugs.

31 (b) The plan or policy described in subsection (a) shall apply a prorated daily cost sharing
32 rate for maintenance prescription drugs that are dispensed by an in-network pharmacy for the
33 purpose of synchronizing the insured's or enrollee's multiple maintenance prescription drugs.

34 (c) The plan or policy described in subsection (a) shall not reimburse or pay any

1 dispensing fee that is prorated. The insurer shall only pay or reimburse a dispensing fee that is
2 based on each maintenance prescription drug dispensed.

3 (d) A synchronization shall only occur once per year per maintenance prescription drug.

4 SECTION 5. This act shall take effect on January 1, 2017.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

A N A C T

RELATING TO INSURANCE - ACCIDENT AND SICKNESS INSURANCE POLICIES

1 This act would direct health insurers to provide prescription drug coverage for
2 prescriptions of less than a thirty (30) day supply for the treatment of chronic conditions. The
3 purpose would be to synchronize a patient's medications.

4 This act would take effect upon passage.

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