

PRESCRIPTION SYNCHRONIZATION

2014 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Curtis S. Bramble

House Sponsor:

LONG TITLE

General Description:

This bill addresses payments by health insurance plans for the synchronization of prescription drug dispensing.

Highlighted Provisions:

This bill:

- ▶ provides definitions;
- ▶ creates a cap on the copay charged by a health insurance plan for the dispensing of certain prescription drugs in quantities less than a 30-day supply;
- ▶ prohibits a health insurance plan that provides prescription drug coverage from excluding certain prescription drugs dispensed in quantities less than a 30-day supply;
- ▶ prohibits a health insurance plan from basing the dispensing fee for an individual prescription on the quantity of the prescription drug dispensed to fill or refill the prescription; and
- ▶ requires administrative rulemaking.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:



28 ENACTS:

29 [31A-22-642](#), Utah Code Annotated 1953

30

31 *Be it enacted by the Legislature of the state of Utah:*

32 Section 1. Section [31A-22-642](#) is enacted to read:

33 **[31A-22-642. Prescription synchronization -- Copay restrictions.](#)**

34 (1) For purposes of this section:

35 (a) "Copay cap" means the copay normally charged for a 30-day supply of a
36 prescription drug, multiplied by the copay factor for the drug.

37 (b) "Copay factor" means the number of days for which a prescription drug is
38 prescribed, divided by 30.

39 (c) "Health insurer" means an insurer, as defined in Subsection [31A-22-634\(1\)](#).

40 (d) "Network pharmacy" means a pharmacy included in a health insurance plan's
41 network of pharmacy providers.

42 (e) "Prescription drug" means a prescription drug, as defined in Section [58-17b-102](#),
43 that is prescribed for a chronic condition.

44 (2) A health insurance plan may not charge a copay in excess of the copay cap for the
45 dispensing of a prescription drug in a quantity less than a 30-day supply if:

46 (a) the prescriber, or the pharmacist or pharmacy intern, has noted on the prescription
47 that prescribing less than a 30-day supply permits synchronization of the prescription's original
48 or refill dispensing date with the original or refill dispensing date of one or more other
49 prescriptions; and

50 (b) the prescription drug is dispensed by a network pharmacy.

51 (3) A health insurance plan that includes a prescription drug benefit:

52 (a) may not exclude from the benefit prescription drugs described in Subsection (2);
53 and

54 (b) may not base the dispensing fee for an individual prescription on the quantity of the
55 prescription drug dispensed to fill or refill the prescription.

56 (4) The commissioner shall make rules in accordance with Title 63G, Chapter 3, Utah
57 Administrative Rulemaking Act, to implement this section, including rules defining "chronic
58 condition" and "network of pharmacy providers," and rules facilitating the notation described

59 in Subsection (2)(a).

60 (5) This section applies to health benefit plans renewed or entered into on or after

61 January 1, 2015.

Legislative Review Note

as of 2-18-14 10:33 AM

Office of Legislative Research and General Counsel