S. 6763

A. 8975

SENATE-ASSEMBLY

March 6, 2014

IN SENATE -- Introduced by Sen. LANZA -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance

IN ASSEMBLY -- Introduced by M. of A. QUART -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to synchronization of multiple prescriptions and dispensing fee standardization

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. The insurance law is amended by adding a new section 3224-d 2 to read as follows:

3 3224-D. PRESCRIPTION SYNCHRONIZATION AND DISPENSING FEE STANDARDI-S ZATION. (A) EVERY INDIVIDUAL OR GROUP HEALTH INSURANCE POLICY PROVIDING 4 5 PRESCRIPTION DRUG COVERAGE SHALL PERMIT AND APPLY A PRO-RATED COST-SHAR-6 TO PRESCRIPTIONS THAT ARE DISPENSED BY A NETWORK PHARMACY FOR ING RATE 7 LESS THAN A THIRTY DAY SUPPLY, IF THE PRESCRIBER OR PHARMACIST INDICATES 8 THAT THE FILL OR REFILL COULD BE IN THE BEST INTEREST OF THE COVERED INDIVIDUAL OR IS FOR THE PURPOSE OF SYNCHRONIZING THE COVERED INDIVID-9 10 UAL'S CHRONIC MEDICATIONS.

INDIVIDUAL OR GROUP HEALTH INSURANCE POLICY 11 (B) NO PROVIDING 12 PRESCRIPTION DRUG COVERAGE SHALL DENY COVERAGE FOR THE DISPENSING OF ANY 13 DRUG PRESCRIBED FOR THE TREATMENT OF A CHRONIC ILLNESS THAT IS MADE IN 14 ACCORDANCE WITH A PLAN ESTABLISHED AMONG THE COVERED INDIVIDUAL, A HEALTH CARE PRACTITIONER AND A PHARMACIST TO SYNCHRONIZE THE REFILLING 15 16 OF MULTIPLE PRESCRIPTIONS FOR THE COVERED INDIVIDUAL.

17 (C) NO INDIVIDUAL OR GROUP HEALTH INSURANCE POLICY PROVIDING 18 PRESCRIPTION DRUG COVERAGE SHALL USE PAYMENT STRUCTURES INCORPORATING PRO-RATED DISPENSING FEES DETERMINED BY CALCULATION OF THE DAYS' 19 SUPPLY MEDICATION DISPENSED. DISPENSING FEES SHALL BE DETERMINED SOLELY ON 20 OF THE TOTAL NUMBER OF PRESCRIPTIONS DISPENSED. 21

(D) NOTHING IN THIS SECTION SHALL BE DEEMED TO REQUIRE HEALTH CARE
 PRACTITIONERS AND PHARMACISTS TO SYNCHRONIZE THE REFILLING OF MULTIPLE
 PRESCRIPTIONS FOR A COVERED INDIVIDUAL.

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets
[] is old law to be omitted.

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1 S 2. The insurance law is amended by adding a new section 4303-a to 2 read as follows:

3 4303-A. S PRESCRIPTION SYNCHRONIZATION AND DISPENSING FEE STANDARDI-4 ZATION. (A) EVERY HOSPITAL SERVICE CORPORATION AND HEALTH SERVICE 5 CORPORATION PROVIDING PRESCRIPTION DRUG COVERAGE SHALL PERMIT AND APPLY 6 A PRO-RATED COST-SHARING RATE TO PRESCRIPTIONS THAT ARE DISPERSED BY A NETWORK PHARMACY FOR LESS THAN A THIRTY DAY SUPPLY, IF THE PRESCRIBER OR 7 PHARMACIST INDICATES THAT THE FILL OR REFILL COULD BE IN THE BEST INTER-8 EST OF THE COVERED INDIVIDUAL OR IS FOR THE PURPOSE OF SYNCHRONIZING THE 9 10 COVERED INDIVIDUAL'S CHRONIC MEDICATIONS.

(B) NO HOSPITAL SERVICE CORPORATION OR HEALTH SERVICE CORPORATION
PROVIDING PRESCRIPTION DRUG COVERAGE SHALL DENY COVERAGE FOR THE
DISPENSING OF ANY DRUG PRESCRIBED FOR THE TREATMENT OF A CHRONIC ILLNESS
THAT IS MADE IN ACCORDANCE WITH A PLAN ESTABLISHED AMONG THE COVERED
INDIVIDUAL, A HEALTH CARE PRACTITIONER AND A PHARMACIST TO SYNCHRONIZE
THE REFILLING OF MULTIPLE PRESCRIPTIONS FOR THE COVERED INDIVIDUAL.

17 (C) NO HOSPITAL SERVICE CORPORATION OR HEALTH SERVICE CORPORATION
18 PROVIDING PRESCRIPTION DRUG COVERAGE SHALL USE PAYMENT STRUCTURES INCOR19 PORATING PRO-RATED DISPENSING FEES DETERMINED BY CALCULATION OF THE
20 DAYS' SUPPLY OF MEDICATION DISPENSED. DISPENSING FEES SHALL BE DETER21 MINED SOLELY ON THE TOTAL NUMBER OF PRESCRIPTIONS DISPENSED.

22 (D) NOTHING IN THIS SECTION SHALL BE DEEMED TO REQUIRE HEALTH CARE 23 PRACTITIONERS AND PHARMACISTS TO SYNCHRONIZE THE REFILLING OF MULTIPLE 24 PRESCRIPTIONS FOR A COVERED INDIVIDUAL.

25 S 3. This act shall take effect on the one hundred twentieth day after 26 it shall have become a law.