

This Document can be made available in alternative formats upon request

State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-FIRST SESSION

H. F. No. 687

02/04/2019 Authored by Bahner, Liebling, Morrison, Demuth, Mann and others
The bill was read for the first time and referred to the Committee on Commerce
03/04/2019 Adoption of Report: Re-referred to the Committee on Health and Human Services Policy

1.1 A bill for an act
1.2 relating to health; providing for synchronization of prescription drug refills;
1.3 proposing coding for new law as Minnesota Statutes, chapter 62W.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. [62W.10] SYNCHRONIZATION.

1.6 (a) For purposes of this section, "synchronization" means the coordination of prescription
1.7 drug refills for a patient taking two or more medications for one or more chronic conditions,
1.8 to allow the patient's medications to be refilled on the same schedule for a given period of
1.9 time.

1.10 (b) A contract between a pharmacy benefit manager and a pharmacy must allow for
1.11 synchronization of prescription drug refills for a patient on at least one occasion per year,
1.12 if the following criteria are met:

1.13 (1) the prescription drugs are covered under the patient's health plan or have been
1.14 approved by a formulary exceptions process;

1.15 (2) the prescription drugs are maintenance medications as defined by the health plan
1.16 and have one or more refills available at the time of synchronization;

1.17 (3) the prescription drugs are not Schedule II, III, or IV controlled substances;

1.18 (4) the patient meets all utilization management criteria relevant to the prescription drug
1.19 at the time of synchronization;

1.20 (5) the prescription drugs are of a formulation that can be safely split into short-fill
1.21 periods to achieve synchronization; and

2.1 (6) the prescription drugs do not have special handling or sourcing needs that require a
2.2 single, designated pharmacy to fill or refill the prescription.

2.3 (c) When necessary to permit synchronization, the pharmacy benefit manager must apply
2.4 a prorated, daily patient cost-sharing rate to any prescription drug dispensed by a pharmacy
2.5 under this section. The dispensing fee must not be prorated, and all dispensing fees shall
2.6 be based on the number of prescriptions filled or refilled.

2.7 (d) Synchronization may be requested by the patient or by the patient's parent or legal
2.8 guardian. For purposes of this paragraph, "legal guardian" includes but is not limited to a
2.9 guardian of an incapacitated person appointed pursuant to chapter 524.