

AMENDMENTS TO HOUSE BILL NO. 270

Sponsor: REPRESENTATIVE FARRY

Printer's No. 949

1 Amend Bill, page 1, line 11, by striking out "and" where it
2 occurs the second time and inserting a comma

3 Amend Bill, page 1, line 12, by inserting after "management"
4 and further providing for coordination of benefits

5 Amend Bill, page 1, lines 17 and 18, by striking out "a
6 definition" and inserting
7 definitions

8 Amend Bill, page 2, by inserting between lines 6 and 7
9 "LEP" or "late enrollment penalty." The amount added to the
10 Part D plan premium of either:

11 (1) an individual who did not obtain creditable
12 prescription drug coverage as defined under 42 CFR § 423.56
13 (relating to procedures to determine and document creditable
14 status of prescription drug coverage) when the individual was
15 first eligible for Part D; or

16 (2) an individual who had a break in creditable
17 prescription drug coverage of at least 63 consecutive days
18 and that is considered a part of the plan premium.

19 * * *

20 "Maintenance medication." A medication prescribed for a
21 chronic, long-term condition and taken on a regular, recurring
22 basis.

23 Amend Bill, page 2, line 15, by striking out "rate" and
24 inserting

25 fees

26 Amend Bill, page 2, line 16, by striking out "rate" and
27 inserting

28 fee

29 Amend Bill, page 2, line 22, by inserting after

1 "synchronization."

2 The program may not use payment structures incorporating
3 prorated dispensing fees.

4 (b) Full payment.--Dispensing fees for a partial supply or
5 refilled prescription shall be paid in full for each maintenance
6 medication dispensed, regardless of any prorated copay for the
7 beneficiary or fee paid for alignment services.

8 (c) Partial supply.--The program may not deny coverage for
9 the dispensing of a maintenance medication that is dispensed by
10 a network pharmacy on the basis that the dispensing is for a
11 partial supply if the prescriber or pharmacist determines the
12 fill or refill is in the best interest of the patient and the
13 patient requests or agrees to a partial supply for the purpose
14 of medication synchronization.

15 (d) Annual limitation.--The fill or refill under this
16 section shall be limited to three times a year for each
17 maintenance medication for a covered individual. For each
18 clinically necessary synchronization thereafter, approval may be
19 required at the discretion of the program.

20 Amend Bill, page 2, line 23, by striking out "(b)" and
21 inserting

22 (e)

23 Amend Bill, page 2, line 23, by striking out "The" and
24 inserting

25 Subject to section 520(c.1), the

26 Amend Bill, page 2, line 26, by striking out the period after
27 "synchronization" and inserting

28 utilizing the submission clarification and message codes as
29 adopted by the National Council for Prescription Drug Programs
30 or alternative codes provided by the program.

31 (f) Exemption.--This section does not apply to prescription
32 drugs that are either:

33 (1) unit-of-use packaging for which medication
34 synchronization is not possible; or

35 (2) controlled substances classified in Schedule II
36 under section 4(2) of the act of April 14, 1972 (P.L.233,
37 No.64), known as The Controlled Substance, Drug, Device and
38 Cosmetic Act.

39 Amend Bill, page 3, line 3, by striking out "\$31,000" and
40 inserting

41 \$27,500

1 Amend Bill, page 3, line 5, by striking out "\$41,000" and
2 inserting

3 \$35,500

4 Amend Bill, page 5, line 5, by inserting a bracket before the
5 comma after "copayment"

6 Amend Bill, page 5, line 5, by inserting after "copayment,"
7] or

8 Amend Bill, page 5, line 5, by inserting a bracket before
9 "or"

10 Amend Bill, page 5, line 6, by inserting a bracket after
11 "pharmacists"

12 Amend Bill, page 5, lines 16 and 17, by striking out "the
13 department proposals for"

14 Amend Bill, page 6, line 1, by striking out "one year" and
15 inserting

16 six months

17 Amend Bill, page 6, by inserting between lines 2 and 3

18 Section 5. Section 534 of the act is amended by adding a
19 subsection to read:

20 Section 534. Coordination of benefits.

21 * * *

22 (c.1) Authorization.--The department may pay the LEP of Part
23 D enrollees in excess of the regional benchmark premium.

24 * * *

25 Amend Bill, page 6, line 3, by striking out "5" and inserting

26 6