

## 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