

PRELIMINARY STAFF MEASURE SUMMARY

CARRIER:

Senate Committee on Senate Health Care

REVENUE: May have revenue impact, statement not yet issued

FISCAL: May have fiscal impact, statement not yet issued

Action:

Vote:

Yeas:

Nays:

Exc.:

Prepared By: Zena Rockowitz, Administrator

Meeting Dates: 2/25, 3/25

WHAT THE MEASURE DOES: Requires a prescription drug benefit program, or a prescription drug benefit offered under a health plan to provide reimbursement for up to a 60-day supply of a prescription dispensed by a pharmacy, if the prescription drug is covered by the program or plan and the drug is prescribed for a chronic condition. Requires Board of Pharmacy to adopt list of chronic conditions for which the 60-day supply must be reimbursed.

ISSUES DISCUSSED:

- Creates resilience plan, particularly for coastal area
- Costs to the health plan
- Unused medications
- Board of Pharmacy ability to make formulary decisions
- Saves physicians time

EFFECT OF COMMITTEE AMENDMENT: -2 Amendment: Requires health benefit plan to provide reimbursement for up to 90-day prescription supply, if the prescription drug is covered by the plan and an initial 30-day supply has been dispensed to the program or plan policyholder. Removes requirement for Board adopt list of chronic prescription medication. Specifies that reimbursement does not apply to drugs classified as Schedule II. **-3**

Amendment: Permits coverage to be limited to network formulary restrictions.

BACKGROUND: Pharmacy benefit programs typically allow for up to a 30 day supply for acute care medications and a 90 day supply for chronic condition medications. If there was a natural disaster such an earthquake, Oregonians could experience difficulty getting medication. One study looked at 70 research articles to determine the extent of medication loss, and the burden of prescription refills on medical relief teams following extreme weather and natural disasters. The researchers found that medication refills were a common need, a considerable number of patients lost medication during evacuation, and it was difficult to fill prescriptions due to a lack of information from evacuees. Overall, people with chronic conditions were most at-risk without access to medication.