

**A-Engrossed**  
**Senate Bill 841**

Ordered by the Senate April 24  
Including Senate Amendments dated April 24

Sponsored by Senators BATES, STEINER HAYWARD, KRUSE; Senators MONNES ANDERSON, SHIELDS

**SUMMARY**

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Modifies requirements for health plan coverage of prescription drugs dispensed in accordance with synchronization policy.

Requires Oregon Health Authority to implement synchronization policy for dispensing of prescription drugs to medical assistance recipients who are not enrolled in coordinated care organization.

**A BILL FOR AN ACT**

1  
2 Relating to prescription drug refills; creating new provisions; and amending sections 2 and 4, chap-  
3 ter 25, Oregon Laws 2014.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1.** Section 2, chapter 25, Oregon Laws 2014, is amended to read:

6 **Sec. 2.** (1) As used in this section:

7 (a) "Health plan" means:

8 (A) A "health benefit plan" as defined in ORS 743.730; and

9 (B) A self-insured health plan offered by the Public Employees' Benefit Board, the Oregon Edu-  
10 cators Benefit Board or the Oregon Health and Science University.

11 (b) "Synchronization policy" means a procedure for aligning the refill dates of a patient's pre-  
12 scription drugs so that drugs that are refilled at the same frequency may be refilled concurrently.

13 (2) A health plan that includes prescription drug coverage [*must*] **shall** implement a synchroni-  
14 zation policy for the dispensing of prescription drugs to the plan's enrollees.

15 **(3) A health plan shall reimburse the cost of prescription drugs dispensed in accordance**  
16 **with the plan's synchronization policy.**

17 **(4) If a drug is dispensed in less than a 30-day supply for the purpose of synchronizing a**  
18 **patient's prescription drug refills, a health plan shall:**

19 (a) **Prorate the copayment; or**

20 (b) **Adjust the copayment using a method approved by the Department of Consumer and**  
21 **Business Services.**

22 **(5) A health plan shall fully reimburse the dispensing fee for partially filled or refilled**  
23 **prescription drugs.**

24 **(6) This section does not apply to prescription drugs that:**

25 (a) **Are in unit-of-use packaging for which synchronization is not possible;**

26 (b) **Are controlled substances; or**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted.  
New sections are in **boldfaced** type.

1 (c) Have been identified by the United States Drug Enforcement Administration as having  
2 a high risk of diversion.

3 (7) The coverage required by this section may be limited by formulary restrictions applied  
4 to a prescription drug by a health plan.

5 (8)(a) This section does not apply to a prepaid group practice health plan with at least  
6 200,000 enrollees in this state.

7 (b) As used in this subsection, “prepaid group practice health plan” means a health care  
8 service contractor that provides physician services to its enrollees through an integrated  
9 health care delivery system using, primarily, a single group of physicians contracted on a  
10 prepaid, capitated basis.

11 **SECTION 2.** Section 4, chapter 25, Oregon Laws 2014, is amended to read:

12 **Sec. 4.** (1) As used in this section, “synchronization policy” means a procedure for aligning the  
13 refill dates of a patient’s prescription drugs so that drugs that are refilled at the same frequency  
14 may be refilled concurrently.

15 (2) Each coordinated care organization [*must*] **shall** implement a synchronization policy for the  
16 dispensing of prescription drugs to members of the organization.

17 (3) **The Oregon Health Authority shall implement a synchronization policy for the dis-**  
18 **persing of prescription drugs to recipients of medical assistance who are not enrolled in a**  
19 **coordinated care organization.**

20 **SECTION 3.** The amendments to section 2, chapter 25, Oregon Laws 2014, by section 1  
21 of this 2015 Act apply to health plans issued or renewed on or after January 1, 2017.  
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