

A-Engrossed
Senate Bill 93

Ordered by the Senate April 27
Including Senate Amendments dated April 27

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Senate Interim Committee on Veterans and Emergency Preparedness)

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.

Requires reimbursement for up to [60-day] **90-day** supply of **generic** prescription drug that is prescribed [*for chronic condition*] **under certain conditions**.

A BILL FOR AN ACT

1
2 Relating to the dispensing of prescription drugs.

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

4 **SECTION 1. Section 2 of this 2015 Act is added to and made a part of the Insurance Code.**

5 **SECTION 2. (1) A prescription drug benefit program, or a prescription drug benefit of-**
6 **fered under a health benefit plan as defined in ORS 743.730, must provide for reimbursement**
7 **for up to a 90-day supply of a prescription drug dispensed by a pharmacy, as defined in ORS**
8 **689.005, if:**

9 (a) **The prescription drug is covered by the program or plan;**

10 (b) **The prescription drug has been previously dispensed to the program or plan member**
11 **with the same dosage instruction for not less than 90 days;**

12 (c) **The quantity of the prescription drug dispensed does not exceed the total remaining**
13 **quantity of the prescription drug that the prescribing practitioner authorized to be dispensed**
14 **through refills; and**

15 (d) **The drug is a generic drug.**

16 (2) **The coverage required by subsection (1) of this section may be limited by the terms**
17 **and conditions of a pharmacy network contract, or a prescription drug benefit program or**
18 **health benefit plan, that are related to the reimbursement rate of the prescription drug.**

19 (3) **The coverage required by subsection (1) of this section may be limited by formulary**
20 **restrictions that are related to the prescription drug.**

21 (4) **This section does not apply to the reimbursement of prescription drugs classified as**
22 **a controlled substance in Schedule II.**

23 (5) **This section is exempt from ORS 743A.001.**
24

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.