

The Maryland State Medical Society

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TO:	The Honorable Thomas M. Middleton, Chair
	Members, Senate Finance Committee
	The Honorable John C. Astle

- FROM: Danna L. Kauffman J. Steven Wise Pamela Metz Kasemeyer
- DATE: March 9, 2017
- RE: **SUPPORT WITH AMENDMENT** Senate Bill 898 *Health Insurance Prescription Drugs Dispensing Synchronization*

The Maryland State Medical Society (MedChi), which represents more than 7,000 Maryland physicians and their patients, **supports** Senate Bill 898, **with an amendment**.

Senate Bill 898 requires carriers that provide coverage for prescription drugs, including coverage provided through a pharmacy benefits manager, to allow and apply a prorated daily copayment or coinsurance amounts for a partial supply of a prescription drug dispensed by an in-network pharmacy. This requirement applies if: (1) the prescriber or pharmacist determines dispensing a partial supply to be in the best interest of the enrollee; and (2) the member requests or agrees to a partial supply to synchronize the dispensing of the enrollee's prescription drugs.

Medication synchronization is the process for when a pharmacist can organize a patient's prescriptions so that the prescriptions can all be filled on the same day each month. Medication synchronization is both convenient for the patient but, more importantly, has been found to increase medication adherence. On January 1, 2014, the Centers for Medicaid and Medicare implemented a new Rule for Medicare Part D patients to allow for medication synchronization. Senate Bill 898 removes the barrier of how pharmacists can bill and be reimbursed for early refills that are being dispensed under a medication synchronization plan but also allows the member to only be charged a prorated daily copayment or coinsurance amount for a partial supply of the prescription drug.

MedChi would, however, request an amendment that controlled dangerous substances be removed from the provisions of this bill. With this amendment, MedChi requests a favorable consideration.

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