

## 1 VIRGINIA ACTS OF ASSEMBLY — CHAPTER

2 *An Act to amend the Code of Virginia by adding a section numbered 38.2-3407.9:04, relating to health*  
3 *benefit plans; prescription drug coverage; synchronization of medications.*

4  
5 Approved

[H 234]

6 **Be it enacted by the General Assembly of Virginia:**

7 **1. That the Code of Virginia is amended by adding a section numbered 38.2-3407.9:04 as follows:**  
8 **§ 38.2-3407.9:04. Medication synchronization.**

9 A. As used in this section:

10 "Carrier," "health plan," and "provider contract" have the meanings ascribed thereto in subsection A  
11 of § 38.2-3407.15.

12 "Enrollee" and "provider" have the meanings ascribed thereto in subsection A of § 38.2-3407.10.

13 "Network pharmacy" means a pharmacy that has agreed to provide pharmacy services to enrollees  
14 with an expectation of receiving payments, other than coinsurance, copayments, or deductibles, directly  
15 or indirectly from the carrier under the terms of a provider contract.

16 B. Any health plan providing prescription drug coverage in the Commonwealth shall permit and  
17 apply a prorated daily cost-sharing rate to prescriptions that are dispensed by a network pharmacy for  
18 a partial supply if the prescribing provider or the pharmacist determines the fill or refill to be in the  
19 best interest of the enrollee and the enrollee requests or agrees to a partial supply for the purpose of  
20 synchronizing the enrollee's medications, provided that such a proration for any prescription shall not  
21 occur more frequently than annually.

22 C. No health plan providing prescription drug coverage shall deny coverage for the dispensing of a  
23 medication that is dispensed by a network pharmacy on the basis that the dispensing is for a partial  
24 supply if the prescribing provider or the pharmacist determines the fill or refill to be in the best interest  
25 of the enrollee and the enrollee requests or agrees to a partial supply for the purpose of synchronizing  
26 the enrollee's medications. The health plan shall allow a pharmacy to override any denial codes  
27 indicating that a prescription is being refilled too soon for the purposes of synchronizing the enrollee's  
28 medications.

29 D. No health plan providing prescription drug coverage shall use payment structures incorporating  
30 prorated dispensing fees. Dispensing fees for partially filled or refilled prescriptions shall be paid in full  
31 for each prescription dispensed, regardless of any prorated copay or fee paid for synchronization  
32 services.

33 E. This section shall apply with respect to health plans that are entered into, amended, extended, or  
34 renewed on or after January 1, 2019.

35 F. Pursuant to the authority granted by § 38.2-223, the Commission may promulgate such rules and  
36 regulations as it may deem necessary to implement this section.

37 G. The Commission shall have no jurisdiction to adjudicate individual controversies arising out of  
38 this section.

ENROLLED

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