

FIRST REGULAR SESSION

SENATE BILL NO. 490

98TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR LeVOTA.

Read 1st time February 23, 2015, and ordered printed.

ADRIANE D. CROUSE, Secretary.

1655S.011

AN ACT

To amend chapter 208, RSMo, by adding thereto two new sections relating to MO HealthNet reimbursement for critical access medication management.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 208, RSMo, is amended by adding thereto two new sections, to be known as sections 208.183 and 208.184, to read as follows:

208.183. 1. As used in this section, the following terms shall mean:

(1) "Critical prescription access patient", a MO HealthNet participant who is diagnosed with, and receiving treatment for, HIV, cancer, or a severe and persistent mental illness, and who requires all of the following for the treatment:

(a) Not less than five types of prescription drugs per month;

(b) Specialized, adherence, or compliance packaging for prescription drugs; and

(c) Multiple dispensing of prescription drugs per month;

(2) "Terminal distributor of prescription drugs", a person engaged in the sale of prescription drugs at retail, or any other person, other than a wholesale distributor or a pharmacist, who has possession, custody, or control of prescription drugs for any purpose other than for that person's own use and consumption, and includes pharmacies, hospitals, nursing homes, and laboratories and all other persons who procure prescription drugs for sale or other distribution by or under the supervision of a pharmacist or licensed health professional authorized to prescribe drugs.

2. The MO HealthNet division shall establish a program under which the fee-for-service component of MO HealthNet provides

22 reimbursement to terminal distributors of prescription drugs for
23 providing critical access medication management to critical
24 prescription access patients. The division may specify the critical
25 prescription access patients permitted or required to receive critical
26 access medication management under the program.

27 3. (1) In implementing the program, the division shall do all of
28 the following:

29 (a) To the extent possible, conduct prior authorization of critical
30 prescription access patients electronically and provide prior
31 authorization to the patient for all prescription drugs rather than for
32 a specific prescription drug;

33 (b) Require prior authorization not more frequently than once
34 every six months for critical prescription access patients;

35 (c) Specify the critical access medication management services
36 to be provided by a terminal distributor of prescription drugs in order
37 to receive treatment; and

38 (d) Reimburse terminal distributors of prescription drugs not
39 less than twenty-five dollars per person per month for the provision of
40 critical access medication management services.

41 (2) The division may establish prior authorization requirements
42 under the program that differ from those for other MO HealthNet
43 participants, including a more rigorous initial prior authorization
44 process.

45 4. The MO HealthNet division shall submit such state plan
46 amendments and waivers to the Centers for Medicare and Medicaid
47 Services of the federal Department of Health and Human Services as
48 the division determines are necessary to implement the provisions of
49 this section.

50 5. The MO HealthNet division shall promulgate rules to
51 implement the provisions of this section. Any rule or portion of a rule,
52 as that term is defined in section 536.010 that is created under the
53 authority delegated in this section shall become effective only if it
54 complies with and is subject to all of the provisions of chapter 536, and
55 if applicable, section 536.028. This section and chapter 536 are
56 nonseverable and if any of the powers vested with the general assembly
57 pursuant to chapter 536, to review, to delay the effective date, or to
58 disapprove and annul a rule are subsequently held unconstitutional,

59 then the grant of rulemaking authority and any rule proposed or
60 adopted after August 28, 2015, shall be invalid and void.

208.184. 1. As used in this section, "critical prescription access
2 patient", shall mean a MO HealthNet participant who is diagnosed with,
3 and receiving treatment for, HIV, cancer, or a severe and persistent
4 mental illness, and who requires all of the following for the treatment:

- 5 (1) Not less than five types of prescription drugs per month;
- 6 (2) Specialized, adherence, or compliance packaging for
7 prescription drugs; and
- 8 (3) Multiple dispensing of prescription drugs per month.

9 2. When contracting with a managed care organization, the MO
10 HealthNet division shall require the managed care organization to
11 provide critical access medication management to critical prescription
12 access patients. The division may specify the critical access medication
13 management services to be provided by the organization and critical
14 prescription access patients who are to receive the management.

15 3. A managed care organization shall do all of the following when
16 providing prescription drugs to critical prescription access patients:

- 17 (1) To the extent possible, conduct prior authorization of
18 prescription drugs for critical prescription access patients
19 electronically and provide prior authorization to the patient for all
20 prescription drugs rather than for a specific prescription drug;
- 21 (2) Require prior authorization not more frequently than once
22 every six months for critical prescription access patients;
- 23 (3) Provide critical access medication management services
24 specified by the MO HealthNet division.

25 4. The MO HealthNet division shall reimburse managed care
26 organizations not less than twenty-five dollars per person per month
27 for the provision of critical access medication management services
28 under this section.

29 5. The MO HealthNet division shall submit such state plan
30 amendments and waivers to the Centers for Medicare and Medicaid
31 Services of the federal Department of Health and Human Services as
32 the department determines are necessary to implement the provisions
33 of this section.

34 6. The MO HealthNet division shall promulgate rules to
35 implement the provisions of this section. Any rule or portion of a rule,

36 as that term is defined in section 536.010 that is created under the
37 authority delegated in this section shall become effective only if it
38 complies with and is subject to all of the provisions of chapter 536, and
39 if applicable, section 536.028. This section and chapter 536 are
40 nonseverable and if any of the powers vested with the general assembly
41 pursuant to chapter 536, to review, to delay the effective date, or to
42 disapprove and annul a rule are subsequently held unconstitutional,
43 then the grant of rulemaking authority and any rule proposed or
44 adopted after August 28, 2015, shall be invalid and void.

45 7. No earlier than July 1, 2016, and no later than six months
46 following final approval of the waivers or state plan amendments under
47 subsection 5 of this section, the MO HealthNet division shall enter into
48 new contracts or amend existing contracts with managed care
49 organizations as the division considers necessary to require, in
50 accordance with this section, that each managed care organization
51 participating in the MO HealthNet managed care system include
52 critical access medication management for critical prescription access
53 patients who are enrolled in the managed care organization.

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