

House File 2329 - Introduced

HOUSE FILE 2329
BY COMMITTEE ON HUMAN
RESOURCES

(SUCCESSOR TO HSB 511)

A BILL FOR

1 An Act relating to benefit coverage for medication therapy
2 management.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. FINDINGS. The general assembly finds all of the
2 following:

3 1. The prevalence of adverse events and complications
4 relating to drug therapy is a significant public health
5 problem, resulting in serious health risks and reduced quality
6 of life for patients and additional cost to the health care
7 system.

8 2. The demonstrated success and cost-effectiveness of
9 medication therapy management in reducing preventable adverse
10 drug therapy events could be significantly expanded if
11 incorporated into all public and private health benefit plans.

12 3. The utilization of medication therapy management is
13 consistent with the concepts of collaborative team-based
14 delivery of care and the patient-centered medical home.

15 Sec. 2. NEW SECTION. 514C.26 Medication therapy management
16 coverage.

17 1. As used in this section:

18 a. "Commissioner" means the commissioner of insurance.

19 b. "Medication therapy management" means a systematic
20 process performed by a licensed pharmacist, designed to
21 optimize therapeutic outcomes through improved medication use
22 and reduced risk of adverse drug events, including all of the
23 following services:

24 (1) A medication therapy review of all medications,
25 vitamins, and herbal supplements currently being taken by an
26 eligible individual.

27 (2) A medication action plan, subject to the limitations
28 specified in this section, communicated to the individual and
29 the individual's primary care physician or other appropriate
30 prescriber to address safety issues, inconsistencies,
31 duplicative therapy, omissions, and medication costs. The
32 medication action plan may include recommendations to the
33 prescriber for changes in drug therapy.

34 (3) Documentation and follow-up to ensure consistent levels
35 of pharmacy services and positive outcomes.

1 2. Notwithstanding the uniformity of treatment requirements
2 of section 514C.6, a contract, policy, or plan providing
3 for third-party payment or prepayment for health or medical
4 expenses that include pharmaceutical benefits shall provide
5 coverage for medication therapy management in accordance
6 with rules adopted by the commissioner. The provisions of
7 this section shall apply to all of the following classes of
8 third-party payment provider contracts, policies, or plans
9 delivered, issued for delivery, continued, or renewed in this
10 state on or after July 1, 2010:

11 a. Individual or group accident and sickness insurance
12 providing coverage on an expense-incurred basis.

13 b. An individual or group hospital or medical service
14 contract issued pursuant to chapter 509, 514, or 514A.

15 c. An individual or group health maintenance organization
16 contract regulated under chapter 514B.

17 d. An individual or group Medicare supplemental policy,
18 unless coverage pursuant to such policy is preempted by federal
19 law.

20 e. A plan established pursuant to chapter 509A for public
21 employees.

22 3. This section shall not apply to accident-only, specified
23 disease, short-term hospital or medical, hospital confinement
24 indemnity, credit, dental, vision, long-term care, basic
25 hospital, and medical-surgical expense coverage as defined
26 by the commissioner, disability income insurance coverage,
27 coverage issued as a supplement to liability insurance,
28 workers' compensation or similar insurance, or automobile
29 medical payment insurance.

30 4. The commissioner shall adopt rules pursuant to chapter
31 17A regarding coverage of benefits for medication therapy
32 management based on all of the following:

33 a. Medication therapy management shall be a covered benefit
34 for any of the following individuals:

35 (1) An individual who takes four or more prescription drugs

1 to treat or prevent two or more chronic medical conditions.

2 (2) An individual who has a prescription drug therapy
3 problem as identified by the prescribing physician or other
4 appropriate prescriber, and is referred to a pharmacist for
5 medication therapy management.

6 (3) An individual who meets other criteria established by
7 the third-party payment provider contract, policy, or plan.

8 *b.* The fees for medication therapy management services
9 shall be separate from the reimbursement for prescription drug
10 product or dispensing services; shall be determined by each
11 third-party payment provider contract, policy, or plan; and
12 shall be reasonable based on the resources and time required
13 to provide the services.

14 *c.* A fee shall be established for physician reimbursement
15 for medication therapy management services provided which fee
16 shall be reasonable based on the resources and time required
17 to provide the services.

18 *d.* If any part of the medication therapy management
19 plan developed by a pharmacist incorporates services which
20 are outside the pharmacist's independent scope of practice
21 including the initiation of therapy, modification of dosages,
22 therapeutic interchange, or changes in drug therapy, the
23 express authorization of the individual's physician or other
24 appropriate prescriber is required.

25 Sec. 3. BOARD OF PHARMACY — MEDICATION THERAPY MANAGEMENT
26 REGULATION. The board of pharmacy shall adopt rules pursuant
27 to chapter 17A for the regulation of medication therapy
28 management as defined in section 514C.26. The rules shall be
29 based on recommendations of an advisory committee comprised
30 of an equal number of physicians and pharmacists who practice
31 medication therapy management, as recommended by the Iowa
32 medical society, the Iowa osteopathic medicine association, and
33 the Iowa pharmacy association, outcomes pharmaceutical health
34 care, and the national association of chain drug stores.

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EXPLANATION

2 This bill relates to medication therapy management. The
3 bill defines "medication therapy management" and provides that
4 a contract, policy, or plan providing for third-party payment
5 or prepayment which includes coverage for health or medical
6 expenses that includes pharmaceutical benefits shall provide
7 coverage for medication therapy management in accordance
8 with rules adopted by the commissioner of insurance. The
9 bill specifies the classes of third-party payment provider
10 contracts, policies, or plans delivered, issued for delivery,
11 continued, or renewed in this state on or after July 1, 2010,
12 that must include or that are exempt from providing coverage
13 for medication therapy management. The bill directs the
14 commissioner of insurance to adopt rules pursuant to Code
15 chapter 17A regarding coverage of benefits for medication
16 therapy management based on specific provisions.

17 The bill also directs the board of pharmacy to adopt rules
18 for the regulation of medication therapy management, based on
19 recommendations of an advisory group comprised of an equal
20 number of physicians and pharmacists who practice medication
21 therapy management; as recommended by interested organizations
22 specified in the bill.