CHAPTER 91

INSURANCE

HOUSE BILL 10-1202


AN ACT

CONCERNING HEALTH BENEFIT COVERAGE FOR CHEMOTHERAPY TREATMENT.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. Legislative declaration. The general assembly finds that for cancer patients in the United States, there is an inequity in how much they have to pay toward the cost of an oral medication and how much they have to pay for an intravenous product that is administered in a physician's office or clinic. The general assembly further finds that when these inequities exist, patients' access to medically necessary, appropriate treatment is often unfairly restricted. The general assembly also acknowledges that oral chemotherapy is the only treatment for some types of cancer where there is no intravenous alternative. Therefore, the general assembly declares that in order to reduce the out-of-pocket costs for cancer patients whose diagnosis requires treatment through orally administered anticancer medication, the cost-sharing responsibilities for these patients shall be equitable to those of patients receiving intravenously administered anticancer medication.

SECTION 2. 10-16-104, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SUBSECTION to read:

10-16-104. Mandatory coverage provisions - definitions. (21) Oral anticancer medication. (a) ANY HEALTH BENEFIT PLAN THAT PROVIDES COVERAGE FOR CANCER CHEMOTHERAPY TREATMENT SHALL PROVIDE COVERAGE FOR PRESCRIBED, ORALLY ADMINISTERED ANTICANCER MEDICATION THAT HAS BEEN APPROVED BY THE FEDERAL FOOD AND DRUG ADMINISTRATION AND IS USED TO KILL

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.
or slow the growth of cancerous cells. The orally administered medication shall be provided at a cost to the covered person not to exceed the coinsurance percentage or the copayment amount as is applied to an intravenously administered or an injected cancer medication prescribed for the same purpose. A medication provided pursuant to this subsection (21) shall be prescribed only upon a finding that it is medically necessary by the treating physician for the purpose of killing or slowing the growth of cancerous cells in a manner that is in accordance with nationally accepted standards of medical practice, clinically appropriate in terms of type, frequency, extent site, and duration, and not primarily for the convenience of the patient, physician, or other health care provider. This subsection (21) does not require the use of orally administered medications as a replacement for other cancer medications. Nothing in this subsection (21) prohibits coverage for oral generic medications in a health benefit plan. Nothing in this subsection (21) prohibits a carrier from applying an appropriate formulary or other clinical management to any medication described in this subsection (21). For the purposes of this subsection (21), the treating physician for a patient covered under a health maintenance organization’s health benefit plan shall be a physician who is designated by and affiliated with the health maintenance organization.

(b) A carrier shall not achieve compliance with this subsection (21) by imposing an increase in patient out-of-pocket costs with respect to anticancer medications used to kill or slow the growth of cancerous cells covered under a policy beyond the modifications permitted pursuant to section 10-16-201.5(8).

SECTION 3. Specified effective date - applicability. This act shall take effect January 1, 2011, and shall apply to policies issued or renewed on or after the effective date of this act.

SECTION 4. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Approved: April 15, 2010