CHAMBER ACTION

<u>Senate</u> <u>House</u>

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Representative Mayfield offered the following:

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Amendment (with title amendment)

Remove everything after the enacting clause and insert:

Section 1. This act may be cited as the "Cancer Treatment Fairness Act."

Section 2. Section 627.42391, Florida Statutes, is created to read:

627.42391 Insurance policies; cancer treatment parity; orally administered cancer treatment medications.—

- (1) As used in this section, the term:
- (a) "Cancer treatment medication" means medication prescribed by a treating physician who determines that the medication is medically necessary to kill or slow the growth of cancerous cells in a manner consistent with nationally accepted standards of practice.

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Approved For Filing: 4/29/2013 9:33:15 PM Page 1 of 6

- (b) "Cost sharing" includes copayments, coinsurance, dollar limits, and deductibles imposed on the covered person.
- (c) "Grandfathered health plan" has the same meaning as provided in 42 U.S.C. s. 18011 and is subject to the conditions for maintaining status as a grandfathered health plan as specified in 45 C.F.R. s. 147.140.
- (2) An individual or group insurance policy delivered, issued for delivery, renewed, amended, or continued in this state that provides medical, major medical, or similar comprehensive coverage and includes coverage for cancer treatment medications must also cover prescribed, orally administered cancer treatment medications and may not apply cost-sharing requirements for orally administered cancer treatment medications that are less favorable to the covered person than cost-sharing requirements for intravenous or injected cancer treatment medications covered under the policy or contract.
- (3) An insurer providing a policy or contract described in subsection (2) and any participating entity through which the insurer offers health services may not:
- (a) Vary the terms of the policy in effect on the effective date of this act to avoid compliance with this section.
- (b) Provide any incentive, including, but not limited to, a monetary incentive, or impose treatment limitations to encourage a covered person to accept less than the minimum protections available under this section.
- (c) Penalize a health care practitioner or reduce or limit the compensation of a health care practitioner for recommending

or providing services or care to a covered person as required under this section.

- (d) Provide any incentive, including, but not limited to, a monetary incentive, to induce a health care practitioner to provide care or services that do not comply with this section.
- (e) Change the classification of any intravenous or injected cancer treatment medication or increase the amount of cost sharing applicable to any intravenous or injected cancer treatment medication in effect on the effective date of this section in order to achieve compliance with this section.
- (4) This section does not apply to grandfathered health plans.

Notwithstanding this section, if the cost-sharing requirements for intravenous or injected cancer treatment medications under the policy or contract are less than \$50 per month, then the cost-sharing requirements for orally administered cancer treatment medications may be up to \$50 per month.

Section 3. Section 641.313, Florida Statutes, is created to read:

- 641.313 Health maintenance contracts; cancer treatment parity; orally administered cancer treatment medications.—
 - (1) As used in this section, the term:
- (a) "Cancer treatment medication" means medication prescribed by a treating physician who determines that the medication is medically necessary to kill or slow the growth of cancerous cells in a manner consistent with nationally accepted standards of practice.

- (b) "Cost sharing" includes copayments, coinsurance, dollar limits, and deductibles imposed on the covered person.
- (c) "Grandfathered health plan" has the same meaning as provided in 42 U.S.C. s. 18011 and is subject to the conditions for maintaining status as a grandfathered health plan as specified in 45 C.F.R. s. 147.140.
- (2) A health maintenance contract delivered, issued for delivery, renewed, amended, or continued in this state that provides medical, major medical, or similar comprehensive coverage and includes coverage for cancer treatment medications must also cover prescribed, orally administered cancer treatment medications and may not apply cost-sharing requirements for orally administered cancer treatment medications that are less favorable to the covered person than cost-sharing requirements for intravenous or injected cancer treatment medications covered under the contract.
- (3) A health maintenance organization providing a contract described in subsection (2) and any participating entity through which the health maintenance organization offers health services may not:
- (a) Vary the terms of the policy in effect on the effective date of this act to avoid compliance with this section.
- (b) Provide any incentive, including, but not limited to, a monetary incentive, or impose treatment limitations to encourage a covered person to accept less than the minimum protections available under this section.
- (c) Penalize a health care practitioner or reduce or limit the compensation of a health care practitioner for recommending

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- (d) Provide any incentive, including, but not limited to, a monetary incentive, to induce a health care practitioner to provide care or services that do not comply with this section.
- (e) Change the classification of any intravenous or injected cancer treatment medication or increase the amount of cost sharing applicable to any intravenous or injected cancer treatment medication in effect on the effective date of this section in order to achieve compliance with this section.
- (4) This section does not apply to grandfathered health plans.

Notwithstanding this section, if the cost-sharing requirements for intravenous or injected cancer treatment medications under the contract are less than \$50 per month, then the cost-sharing requirements for orally administered cancer treatment medications may be up to \$50 per month.

Section 4. The Division of Law Revision and Information is directed to replace the phrase "the effective date of this act" and "the effective date of this section" wherever it occurs in this act with the date this act takes effect.

Section 5. This act shall take effect January 1, 2015, and applies to policies and contracts issued or renewed on or after that date.

TITLE AMENDMENT

Bill No. CS/SB 422, 1st Eng. (2013)

Amendment No.

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Remove everything before the enacting clause and insert:

A bill to be entitled

An act relating to cancer treatment; providing a short title; creating ss. 627.42391 and 641.313, F.S.; providing definitions; requiring that an individual or group insurance policy or contract or a health maintenance contract that provides coverage for cancer treatment medications provide coverage for orally administered cancer treatment medications; requiring that an individual or group insurance policy or contract or a health maintenance contract provide coverage for orally administered cancer treatment medications on a basis no less favorable than that required by the policy or contract for intravenously administered or injected cancer treatment medications; excluding grandfathered health plans from coverage and cost-sharing requirements; prohibiting insurers, health maintenance organizations, and certain other entities from engaging in specified actions to avoid compliance with this act; providing limits on certain cost-sharing requirements; providing a directive to the Division of Law Revision and Information; providing applicability; providing an effective date.