



953014

LEGISLATIVE ACTION

Senate

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House

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04/23/2009 05:39 PM

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Senator Bennett moved the following:

Senate Amendment (with directory and title amendments)

Between lines 3473 and 3474

insert:

(4) ANNUAL REPORTS.—

(a) Where coverage for routine patient care costs associated with care provided in a phase 1, phase 2, phase 3, or phase 4 cancer clinical trial is denied, a carrier shall, after consulting academic and community oncologists involved in cancer care and clinical research, submit to the Office of Insurance Regulation in a format prescribed by rule, an annual report that shall include:



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13 1. The number of denials for coverage of routine patient
14 care cost as defined in paragraph (c) in cancer clinical trials;
15 and

16 2. A comparison of the costs of routine patient care
17 provided in the trials in question compared to the costs of
18 standard therapies for the same diagnosis.

19 (b) The Office of Insurance Regulation shall provide annual
20 reports required under paragraph (a) to the Governor, President
21 of the Senate, the Speaker of the House of Representatives, and
22 the Secretary for Health Care Administration no later than 30
23 days before the regular legislative session.

24 (c) For purposes of this section, the term "routine patient
25 care cost" means physician fees, laboratory expenses, and
26 expenses associated with the hospitalization, administration of
27 treatment, and evaluation of a patient during the course of
28 treatment which are consistent with usual and customary patterns
29 and standards of care incurred whenever an enrollee, subscriber,
30 or insured receives medical care associated with an approved
31 cancer clinical trial, and which would be covered if such items
32 and services were provided other than in connection with an
33 approved cancer clinical trial but does not include the direct
34 cost of the clinical trial.

35
36 ===== D I R E C T O R Y C L A U S E A M E N D M E N T =====

37 And the directory clause is amended as follows:

38 Delete lines 3462 - 3463

39 and insert:

40 Section 66. Paragraph (b) of subsection (1) of section
41 627.4239, Florida Statutes, is amended, present subsection (4)



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42 is renumbered as subsection (5), and a new subsection (4) is
43 added to that section to read:

44
45 ===== T I T L E A M E N D M E N T =====

46 And the title is amended as follows:

47 Delete lines 284 - 286

48 and insert:

49 F.S.; conforming provisions; amending s. 627.4239,
50 F.S.; revising the term "standard reference
51 compendium" for purposes of regulating the insurance
52 coverage of drugs used in the treatment of cancer;
53 requiring a carrier to submit an annual report
54 regarding the coverage of routine patient care costs
55 to the Office of Insurance Regulation under certain
56 circumstances; requiring the Office of Insurance
57 Regulation to provide the annual report to the
58 Governor, Legislature, and the Secretary of Health
59 Care Administration; providing a definition; amending
60 s. 651.118, F.S.; conforming a