#### 17:48-6jj

#### LEGISLATIVE HISTORY CHECKLIST

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**LAWS OF**: 2011 **CHAPTER**: 188

NJSA: 17:48-6jj (Requires health insurers to cover oral anticancer medications on no less favorable basis than

intravenous anticancer medications)

BILL NO: S1834 (Substituted for A2666)

**SPONSOR(S)** Weinberg and others

**DATE INTRODUCED:** March 22, 2010

COMMITTEE: ASSEMBLY: ---

**SENATE:** Commerce

**Budget and Appropriations** 

AMENDED DURING PASSAGE: Yes

**DATE OF PASSAGE:** ASSEMBLY: January 9, 2012

**SENATE:** December 15, 2011

**DATE OF APPROVAL:** January 17, 2012

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL (First Reprint enacted)

S1834

SPONSOR'S STATEMENT: (Begins on page 5 of introduced bill) Yes

COMMITTEE STATEMENT: ASSEMBLY: No

**SENATE:** Yes Commerce

Budget

(Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, *may possibly* be found at www.njleg.state.nj.us)

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL NOTES: Yes 7-19-11

1-5-12

A2666

**SPONSOR'S STATEMENT:** (Begins on page 5 of introduced bill) Yes

COMMITTEE STATEMENT: ASSEMBLY: Yes

SENATE: No

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL NOTE: Yes

(continued)

	VETO MESSAGE:	No
	GOVERNOR'S PRESS RELEASE ON SIGNING:	No
FOLLO	WING WERE PRINTED:  To check for circulating copies, contact New Jersey State Government  Publications at the State Library (609) 278-2640 ext.103 or <a href="mailto:refdesk@njstatelit">mailto:refdesk@njstatelit</a>	o.org
	REPORTS:	No

"Gov. Christie Signs Law Covering Oral Cancer Drugs," NJSpotlight, 1-18-12

Other:

**HEARINGS:** 

**NEWSPAPER ARTICLES:** 

7/16/10 - Reviewed by the Pension and Health Benefits Commission, Recommend to not enact. See meeting agenda and vote results at:

http://www.state.nj.us/treasury/pensions/pension hb review commission10.shtml#julyv

#### A-2666 (Vainieri Huttle/Greenstein)/S-1834(Weinberg)

Requires health insurers to cover oral cancer drugs and related support drugs on same basis as intravenous cancer medications and related support drugs.

No

Yes

Motion: Recommend against enactment

**Discussion**: The Commission does not support legislatively mandating health benefit coverage since mandates generally tend to place the health insurance industry outside of the "free enterprise" system and drive up the cost of health insurance for both the employer provided coverage and individual policies.

LAW/RWH

§1 - C.17:48-6jj §2 – C.17:48A-7gg §3 -C.17:48E-35.34 §4 -C.17B:26-2.1dd C.17B:27-46.1jj §6 -C.17B:27A-7.17 §7 – C.17B:27A-19.21 §8 - C.26:2J-4.35 §9 – C.52:14-17.29r §10 – C.52:14-17.46.6c §11 - Note

#### (CORRECTED COPY)

P.L.2011, CHAPTER 188, approved January 17, 2012 Senate, No. 1834 (First Reprint)

1 AN ACT concerning health benefits coverage for oral '[cancer]
2 anticancer' medications and '[revising] supplementing' various
3 parts of statutory law.

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**BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

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1. ¹a.¹ A hospital service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells ¹[under the same terms and conditions as] on a basis no less favorable than¹ the contract provides for intravenously administered or injected ¹[cancer] anticancer¹ medications. ¹[The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined <u>thus</u> is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

Senate SCM committee amendments adopted September 19, 2011.

- the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.
  - b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
  - c. A hospital service corporation contract shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract as of the effective date of this act 1.
  - <sup>1</sup><u>d.</u> <sup>1</sup> This section shall apply to those hospital service corporation contracts in which the hospital service corporation has reserved the right to change the premium.

- 2. <sup>1</sup>a. <sup>1</sup> A medical service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells <sup>1</sup>[under the same terms and conditions as I on a basis no less favorable than the contract provides for intravenously administered or injected <sup>1</sup>[cancer] anticancer<sup>1</sup> medications. <sup>1</sup>[The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications
- b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- c. A medical service corporation contract shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract as of the effective date of this act<sup>1</sup>.
  - <sup>1</sup>d. This section shall apply to those medical service corporation

contracts in which the medical service corporation has reserved the right to change the premium.

- <sup>1</sup>a. A health service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells <sup>1</sup>[under the same terms and conditions as on a basis no less favorable than the contract provides for intravenously administered or injected [cancer] <sup>1</sup>[The contract shall also provide anticancer<sup>1</sup> medications. coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications
- b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- c. A health service corporation contract shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract as of the effective date of this act<sup>1</sup>.
- <sup>1</sup><u>d.</u><sup>1</sup> This section shall apply to those health service corporation contracts in which the health service corporation has reserved the right to change the premium.

 4. ¹a.¹ An individual health insurance policy that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to N.J.S.17B:26-1 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells ¹[under the same terms and conditions as] on a basis no less favorable than¹ the policy provides for intravenously administered or injected ¹[cancer] anticancer¹ medications. ¹[The policy shall also provide coverage for expenses for medically necessary medications, such as medications that

maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications.

- b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- c. An individual health insurance policy shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the policy as of the effective date of this act<sup>1</sup>.
- <sup>1</sup>d. This section shall apply to those policies in which the insurer has reserved the right to change the premium.

5. <sup>1</sup>a. <sup>1</sup> A group health insurance policy that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to N.J.S.17B:27-26 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells '[under the same terms and conditions as] on a basis no less favorable than the policy provides for intravenously administered or injected '[cancer] anticancer' medications. '[The policy shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications

- b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- c. A group health insurance policy shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the policy as of the effective date of this act<sup>1</sup>.

<sup>1</sup>d. This section shall apply to those policies in which the insurer has reserved the right to change the premium.

- 6. <sup>1</sup>a. <sup>1</sup> An individual health benefits plan that is delivered, issued, executed, or renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et seq.), on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells <sup>1</sup>[under the same terms and conditions as] on a basis no less favorable than <sup>1</sup> the plan provides for intravenously administered or injected <sup>1</sup>[cancer] anticancer <sup>1</sup> medications. <sup>1</sup>[The health benefits plan shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications]
- b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- c. An individual health benefits plan shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the plan as of the effective date of this act <sup>1</sup>.
- <sup>1</sup>d. This section shall apply to those health benefits plans in which the carrier has reserved the right to change the premium.

7. ¹a.¹ A small employer health benefits plan that is delivered, issued, executed, or renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.), on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells ¹[under the same terms and conditions as] on a basis no less favorable than¹ the plan provides for intravenously administered or injected ¹[cancer] anticancer¹ medications. ¹[The health benefits plan shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications]

- b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
  - c. A small employer health benefits plan shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the plan as of the effective date of this act <sup>1</sup>.
  - <sup>1</sup>d. This section shall apply to those health benefits plans in which the carrier has reserved the right to change the premium.

- <sup>1</sup>a. A health maintenance organization contract for health care services that is delivered, issued, executed, or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide health care services for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells '[under the same terms and conditions as] on a basis no less favorable than the contract provides for covered intravenously administered or injected '[cancer] anticancer' <sup>1</sup>[The contract shall also provide coverage for medications. expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications]
- b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- c. A health maintenance organization contract shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract as of the effective date of this act <sup>1</sup>.
- <sup>1</sup>d. <sup>1</sup> This section shall apply to those contracts for health care services under which the right to change the schedule of charges for enrollee coverage is reserved.

9. <sup>1</sup>a. <sup>1</sup> The State Health Benefits Commission shall ensure that every contract purchased on or after the effective date of this act that provides hospital or medical expense benefits shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells <sup>1</sup>[under the same terms and conditions as] on a basis no less favorable than<sup>1</sup> the contract provides for intravenously administered or injected '[cancer] anticancer' medications. '[The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications 

b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.

c. A State Health Benefits Commission contract shall not achieve compliance with the provisions of this section by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract as of the effective date of this act <sup>1</sup>.

10. ¹a.¹ The School Employees' Health Benefits Commission shall ensure that every contract purchased on or after the effective date of this act that provides hospital or medical expense benefits shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells ¹[under the same terms and conditions as] on a basis no less favorable than¹ the contract provides for intravenously administered or injected ¹[cancer] anticancer¹ medications. ¹[The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.]

b. Pursuant to subsection a. of this section, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells shall not be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.

# **S1834** [1R] 8

1	c. A School Employees' Health Benefits Commission contract
2	shall not achieve compliance with the provisions of this section by
3	imposing an increase in patient cost sharing, including any
4	copayment, deductible or coinsurance, for anticancer medications.
5	whether intravenously administered or injected or orally
6	administered, that are covered under the contract as of the effective
7	date of this act 1.
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9	11. This act shall take effect on the 180th day after enactment
10	and shall apply to all contracts and policies issued on or after the
11	effective date.
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16	Requires health insurers to cover oral anticancer medications or
17	no less favorable basis than intravenous anticancer medications.

# SENATE, No. 1834

# STATE OF NEW JERSEY

# 214th LEGISLATURE

INTRODUCED MARCH 22, 2010

Sponsored by: Senator LORETTA WEINBERG District 37 (Bergen) Senator NIA H. GILL District 34 (Essex and Passaic)

Co-Sponsored by: Senators Buono and Cardinale

#### **SYNOPSIS**

Requires health insurers to cover oral cancer drugs and related support drugs on same basis as intravenous cancer medications and related support drugs.

#### **CURRENT VERSION OF TEXT**

As introduced.



(Sponsorship Updated As Of: 5/20/2011)

**AN ACT** concerning health benefits coverage for oral cancer medications and revising various parts of statutory law.

**BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

1. A hospital service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

This section shall apply to those hospital service corporation contracts in which the hospital service corporation has reserved the right to change the premium.

2. A medical service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

 3. A health service corporation contract that provides hospital

contracts in which the medical service corporation has reserved the

This section shall apply to those medical service corporation

and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et seq.), or approved for issuance or renewal in this State by the

Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. 

This section shall apply to those health service corporation contracts in which the health service corporation has reserved the right to change the premium.

4. An individual health insurance policy that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to N.J.S.17B:26-1 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications. The policy shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications.

This section shall apply to those policies in which the insurer has reserved the right to change the premium.

5. A group health insurance policy that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to N.J.S.17B:27-26 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications. The policy shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications.

This section shall apply to those policies in which the insurer has reserved the right to change the premium.

6. An individual health benefits plan that is delivered, issued, executed, or renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et seq.), on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications. The health benefits plan shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications.

This section shall apply to those health benefits plans in which the carrier has reserved the right to change the premium.

7. A small employer health benefits plan that is delivered, issued, executed, or renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.), on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications. The health benefits plan shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications.

This section shall apply to those health benefits plans in which

the carrier has reserved the right to change the premium.

8. A health maintenance organization contract for health care services that is delivered, issued, executed, or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide health care services for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for covered intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and

conditions as the contract provides for intravenously administered or injected cancer medications.

This section shall apply to those contracts for health care services under which the right to change the schedule of charges for enrollee coverage is reserved.

9. The State Health Benefits Commission shall ensure that every contract purchased on or after the effective date of this act that provides hospital or medical expense benefits shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

10. The School Employees' Health Benefits Commission shall ensure that every contract purchased on or after the effective date of this act that provides hospital or medical expense benefits shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

11. This act shall take effect on the 180th day after enactment and shall apply to all contracts and policies issued on or after the effective date.

#### **STATEMENT**

This bill requires health insurance carriers (hospital, medical and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), the State Health Benefits Program (SHBP), and the School Employees' Health Benefits Program (SEHBP) to provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under

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- the same terms and conditions as the policy or contract provides for intravenously administered or injected cancer medications. The bill also requires carriers, SHBP and SEHBP to provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy or contract provides for
- 8 intravenously administered or injected cancer medications.

# FISCAL NOTE SENATE, No. 1834 STATE OF NEW JERSEY 214th LEGISLATURE

DATED: JULY 19, 2011

#### **SUMMARY**

**Synopsis:** Requires health insurers to cover oral cancer drugs and related support

drugs on same basis as intravenous cancer medications and related

support drugs.

Type of Impact: Expenditure increase to the State General Fund, school district and

local government funds.

Agencies Affected: The Division of Pensions and Benefits in the Department of the

Treasury, boards of education, and local government entities.

#### **Executive Estimate**

Fiscal Impact	FY 2011	<u>FY 2012</u>	<u>FY2013</u>
State Cost* No Impact – See comments below			OW
Local Cost*	No Impact – See comments below		
*(SHBP and SEHBP only)			

#### Office of Legislative Services Estimate

Fiscal Impact	FY 2011	<u>FY 2012</u>	<u>FY 2013</u>	
State Cost*	Indeterminate – See comments below			
Local Cost*	Indeterminate – See comments below			
*(SHBP and SEHBP only)				

- The Office of Legislative Services (OLS) **does not concur** with the Executive Branch fiscal estimate.
- This bill would require health insurers and the State Health Benefits Program and the School Employees' Health Benefit Program (SHBP/SEHBP) to cover oral cancer drugs and related support drugs on the same basis as intravenous cancer medications and related support drugs.
- According to the Division of Pensions in the Department of the Treasury, there would be no additional costs to the State programs resulting from this bill because "the benefits mandated by this bill are already covered by the SHBP/SEHBP."



- The OLS notes that according to Medco, "there is an issue that the cost sharing arrangement differences between providing oral cancer drugs verses intravenous cancer treatments may have a gap. If the bill requires cost sharing parity, then the SHBP/SEHBP instead of the patient will have to absorb the cost differential."
- The OLS notes that costs for local governments and boards of education that do not participate in the SHBP or the SEHBP may increase as the result of this bill, but the increase cannot be estimated due to insufficient data.
- The provisions of this bill will become effective on the 180th day after enactment and will apply to all contracts and policies issued on or after the effective date.

#### **BILL DESCRIPTION**

Senate Bill No. 1834 of 2010 requires health insurance carriers (hospital, medical and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), the SHBP, and the SEHBP to provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the policy or contract provides for intravenously administered or injected cancer medications. The bill also requires carriers, SHBP and SEHBP to provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy or contract provides for intravenously administered or injected cancer medications.

#### FISCAL ANALYSIS

#### **EXECUTIVE BRANCH**

According to the Division of Pensions in the Department of the Treasury, there would be no additional costs to the SHBP/SEHBP resulting from this bill because the benefits mandated by this bill are already covered under the current Medco contract. Temodor, Afinitor, and Tykerb are examples of oral cancer drugs that are included in the SHBP/SEHBP Medco formulary for treating cancer.

#### OFFICE OF LEGISLATIVE SERVICES

The OLS does not concur with the Executive Branch fiscal estimate. The OLS notes that according to Medco "there is an issue that the cost sharing arrangement differences between providing oral cancer drugs verses intravenous cancer treatments may have a gap. If the bill requires cost sharing parity, then the SHBP/SEHBP instead of the patient will have to absorb the cost differential."

The OLS also notes that this bill may also result in an increase in costs for local governments and boards of education that do not participate in the SHBP or in the SEHBP, if their existing plans do not already cover oral cancer and related support drugs. Nevertheless, this fiscal note

reflects potential costs associated with the SHBP and SEHBP only. Thus, the costs to local governments and boards of education that contract with a commercial health care benefit provider, for example, are not reflected in this fiscal note. The OLS is not able to estimate the number of local agencies that contract with a commercial health care benefit provider and the cumulative amount of premiums paid by local governments due to a lack of data.

Section: State Government

Analyst: Kimberly McCord Clemmensen

Senior Fiscal Analyst

Approved: David J. Rosen

Legislative Budget and Finance Officer

This fiscal note has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).

#### SENATE COMMERCE COMMITTEE

#### STATEMENT TO

#### SENATE, No. 1834

with committee amendments

# STATE OF NEW JERSEY

DATED: SEPTEMBER 19, 2011

The Senate Commerce Committee reports favorably and with committee amendments Senate Bill No. 1834.

This bill, as amended, requires health insurance carriers (hospital, medical, and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), the State Health Benefits Program (SHBP), and the School Employees' Health Benefits Program (SEHBP) to provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells on a basis no less favorable than the policy or contract provides for intravenously administered or injected anti-cancer medications.

#### **Committee Amendments**

The committee amended the bill to:

- -- require insurers to provide coverage for prescribed, orally administered anticancer medications, instead of on the same terms and conditions, on a basis no less favorable than the policy or contract provides for intravenously administered or injected anticancer medications;
- -- stipulate that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization, dollar limit, copayment, deductible, or coinsurance provision that does not apply to intravenously administered or injected anticancer medications;
- -- prohibit a contract or policy from achieving compliance with the provisions of the bill by imposing an increase in patient cost sharing for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy as of the effective date of the bill; and
- remove from the bill the requirement that carriers, SHBP, and SEHBP provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy or

contract provides for intravenously administered or injected cancer medications.

#### SENATE BUDGET AND APPROPRIATIONS COMMITTEE

#### STATEMENT TO

# [First Reprint] **SENATE, No. 1834**

# STATE OF NEW JERSEY

DATED: OCTOBER 13, 2011

The Senate Budget and Appropriations Committee reports favorably Senate Bill No. 1834 (1R).

This bill requires health insurers, the State Health Benefits Program (SHBP), and the School Employees' Health Benefits Program (SEHBP) to cover oral anticancer medications on a basis no less favorable than intravenous anticancer medications.

The bill provides specifically as follows:

- Its provisions apply to health insurance carriers (hospital, medical and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), SHBP, and SEHBP.
- These carriers and programs are required to provide coverage, on a
  basis no less favorable than the policy or contract provides for
  intravenously administered or injected anticancer medications, for
  expenses for prescribed, orally administered anticancer medications
  used to kill or slow the growth of cancerous cells.
- Pursuant to this requirement, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- The contract or policy is not to achieve compliance with the provisions of this bill by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy as of the effective date of the bill.
- The bill takes effect on the 180th day after enactment and applies to all contracts and policies issued on or after the effective date.

#### **FISCAL IMPACT**:

This bill will result in increased costs to the State for State employees and covered retirees to the extent that cost of an oral cancer drug exceeds the cost of the intravenous cancer drug because the bill prohibits passing additional costs on to patients in the form of additional co-pays or premiums (coinsurance). OLS cannot estimate what the future cost of oral anticancer drugs versus intravenous cancer drugs will be and how often they will be prescribed.

This bill may also result in an increase in costs for local governments and boards of education that do not participate in the SHBP or in the SEHBP, if their existing plans do not already cover oral cancer and related support drugs.

#### **FISCAL NOTE**

[First Reprint]

# SENATE, No. 1834 STATE OF NEW JERSEY 214th LEGISLATURE

DATED: JANUARY 5, 2012

#### **SUMMARY**

**Synopsis:** Requires health insurers to cover oral anticancer medications on no

less favorable basis than intravenous anticancer medications.

Type of Impact: Expenditure increase to the State General Fund, school district and

local government funds.

Agencies Affected: Department of the Treasury, Division of Pensions and Benefits,

school districts, and local governments.

#### Executive Estimate<sup>1</sup>

Fiscal Impact	<u>FY 2013</u>	<u>FY 2014</u>	<u>FY2015</u>
State Cost*	\$2,598,000	\$2,598,000	Not provided
Local Cost*	\$2,752,000	\$2,752,000	Not provided
*(SHBP and SEHBP only)			

<sup>1.</sup> The Executive Branch revised its fiscal note based on information provided by Medco in the Senate Budget and Appropriations hearing on October 13, 2011

#### Office of Legislative Services Estimate

Fiscal Impact	<u>FY 2013</u>	<u>FY 2014</u>	<u>FY 2015</u>
State Cost*		Indeterminate	
Local Cost*		Indeterminate	
*(SHBP and SEHBP only)			

- The Office of Legislative Services (OLS) can neither concur nor disagree with the Executive Branch fiscal estimate because an explanation of the costs used to derive the estimate was not provided.
- This bill would require health insurers and the State Health Benefits Program and the School Employees' Health Benefits Program (SHBP/SEHBP) to cover oral anticancer medications on a basis that is no less favorable than intravenous anticancer medications, stipulates that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications, and



prohibits a contract or policy from achieving compliance with the provisions of the bill by imposing an increase in patient cost sharing for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy.

- According to the Division of Pensions in the Department of the Treasury, the additional costs to the State resulting from this bill are approximately \$5 million for the State and local government entities combined in FY 2013 and 2014.
- The OLS notes that the provision that stipulates that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance eliminates the SHBP/SEHBP's ability to apply utilization management edits for drugs that require prior authorization to verify that the drugs are being prescribed in accordance with federal guidelines, and as such will increase costs to the programs for those drugs that will be automatically authorized that would not have otherwise been authorized.
- The OLS also notes that according to Medco, the pharmacy benefits manager for the SHBP/SEHBP, "there is an issue that the cost sharing arrangement differences between providing oral cancer drugs verses intravenous cancer treatments may have a gap. If the bill requires cost sharing parity, then the SHBP/SEHBP instead of the patient will have to absorb the cost differential."
- The OLS notes that costs for local governments and boards of education that do not participate in the SHBP or the SEHBP may increase as the result of this bill, but the increase cannot be estimated due to insufficient data.
- The provisions of this bill will become effective on the 180th day after enactment and will apply to all contracts and policies issued on or after the effective date.

#### **BILL DESCRIPTION**

Senate Bill No. 1834 (1R) of 2010 provides that health insurance carriers (hospital, medical and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), SHBP, and SEHBP are required to provide coverage, on a basis no less favorable than the policy or contract provides for intravenously administered or injected anticancer medications, for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells. Pursuant to this requirement, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications. The contract or policy is not to achieve compliance with the provisions of this bill by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy as of the effective date of the bill. The bill takes effect on the 180th day after enactment and applies to all contracts and policies issued on or after the effective date.

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#### FISCAL ANALYSIS

#### EXECUTIVE BRANCH

According to the Division of Pensions in the Department of the Treasury, Medco estimates that the additional costs to the State and local entities to cover oral cancer medications on a no less favorable basis than intravenous anticancer medications would be approximately \$2.428 million and \$2.572 million, respectively, in FY 2012.

#### OFFICE OF LEGISLATIVE SERVICES

The OLS can neither concur nor disagree with the Executive Branch fiscal estimate because an explanation of the cost factors used to derive the estimate was not provided. The OLS notes that the provision that stipulates that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization eliminates the SHBP/SEHBP's ability to apply utilization management edits for drugs that require prior authorization to verify that the drugs are being prescribed in accordance with federal guidelines. Consequently, this provision will increase costs to the State for those drugs that will be automatically authorized that would not have otherwise been authorized. The OLS notes that according to Medco "there is an issue that the cost sharing arrangement differences between providing oral cancer drugs verses intravenous cancer treatments may have a gap. If the bill requires cost sharing parity, then the SHBP/SEHBP instead of the patient will have to absorb the cost differential."

The OLS notes that this bill may also result in an increase in costs for local governments and boards of education that do not participate in the SHBP or in the SEHBP, if their existing plans do not already cover oral cancer and related support drugs. Nevertheless, this fiscal note reflects potential costs associated with the SHBP and the SEHBP only. Thus, costs to local governments that contract with a commercial health care benefit provider, for example, are not reflected in this fiscal note. The OLS is not able to estimate the number of local agencies that contract with a commercial health care benefit provider and the cumulative amount of premiums paid by local governments due to a lack of data.

Section: State Government Section

Analyst: Kimberly McCord Clemmensen

Senior Fiscal Analyst

Approved: David J. Rosen

Legislative Budget and Finance Officer

This fiscal note has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).

# ASSEMBLY, No. 2666

# STATE OF NEW JERSEY

### 214th LEGISLATURE

INTRODUCED MAY 13, 2010

**Sponsored by:** 

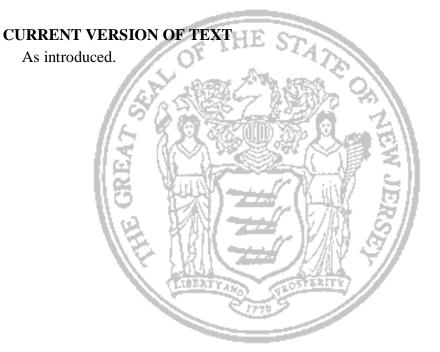
Assemblywoman VALERIE VAINIERI HUTTLE
District 37 (Bergen)
Assemblywoman LINDA R. GREENSTEIN
District 14 (Mercer and Middlesex)
Assemblywoman NANCY F. MUNOZ
District 21 (Essex, Morris, Somerset and Union)
Assemblyman RUBEN J. RAMOS, JR.
District 33 (Hudson)

Co-Sponsored by:

Assemblywoman Angelini

#### **SYNOPSIS**

Requires health insurers to cover oral cancer drugs and related support drugs on same basis as intravenous cancer medications and related support drugs.



(Sponsorship Updated As Of: 6/14/2011)

**AN ACT** concerning health benefits coverage for oral cancer medications and revising various parts of statutory law.

**BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

1. A hospital service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

This section shall apply to those hospital service corporation contracts in which the hospital service corporation has reserved the right to change the premium.

2. A medical service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1940, c.74 (C.17:48A-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

 contracts in which the medical service corporation has reserved the right to change the premium.

This section shall apply to those medical service corporation

3. A health service corporation contract that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et seq.), or approved for issuance or renewal in this State by the

Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. 

This section shall apply to those health service corporation contracts in which the health service corporation has reserved the right to change the premium.

4. An individual health insurance policy that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to N.J.S.17B:26-1 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications. The policy shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications.

This section shall apply to those policies in which the insurer has reserved the right to change the premium.

5. A group health insurance policy that provides hospital and medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to N.J.S.17B:27-26 et seq., or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications. The policy shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the policy provides for intravenously administered or injected cancer medications.

This section shall apply to those policies in which the insurer has reserved the right to change the premium.

6. An individual health benefits plan that is delivered, issued, executed, or renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et seq.), on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications. The health benefits plan shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications.

This section shall apply to those health benefits plans in which the carrier has reserved the right to change the premium.

7. A small employer health benefits plan that is delivered, issued, executed, or renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.), on or after the effective date of this act, shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications. The health benefits plan shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the plan provides for intravenously administered or injected cancer medications.

This section shall apply to those health benefits plans in which

the carrier has reserved the right to change the premium.

8. A health maintenance organization contract for health care services that is delivered, issued, executed, or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, shall provide health care services for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for covered intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and

conditions as the contract provides for intravenously administered or injected cancer medications.

This section shall apply to those contracts for health care services under which the right to change the schedule of charges for enrollee coverage is reserved.

9. The State Health Benefits Commission shall ensure that every contract purchased on or after the effective date of this act that provides hospital or medical expense benefits shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

10. The School Employees' Health Benefits Commission shall ensure that every contract purchased on or after the effective date of this act that provides hospital or medical expense benefits shall provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications. The contract shall also provide coverage for expenses for medically necessary medications, such as medications that maintain red or white cell counts and treat nausea, that support the orally administered anticancer medications, under the same terms and conditions as the contract provides for intravenously administered or injected cancer medications.

11. This act shall take effect on the 180th day after enactment and shall apply to all contracts and policies issued on or after the effective date.

#### **STATEMENT**

This bill requires health insurance carriers (hospital, medical and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), the State Health Benefits Program (SHBP), and the School Employees' Health Benefits Program (SEHBP) to provide coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells under

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- the same terms and conditions as the policy or contract provides for intravenously administered or injected cancer medications. The bill
- 3 also requires carriers, SHBP and SEHBP to provide coverage for
- 4 expenses for medically necessary medications, such as medications
- 5 that maintain red or white cell counts and treat nausea, that support
- 6 the orally administered anticancer medications, under the same
- 7 terms and conditions as the policy or contract provides for
- 8 intravenously administered or injected cancer medications.

#### ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

#### STATEMENT TO

#### ASSEMBLY, No. 2666

with committee amendments

## STATE OF NEW JERSEY

DATED: JUNE 13, 2011

The Assembly Health and Senior Services Committee reports favorably and with committee amendments Assembly Bill No. 2666.

As amended by the committee, this bill requires health insurers, the State Health Benefits Program (SHBP), and the School Employees' Health Benefits Program (SEHBP) to cover oral anticancer medications on a basis no less favorable than intravenous anticancer medications.

The bill provides specifically as follows:

- Its provisions apply to health insurance carriers (hospital, medical and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), SHBP, and SEHBP.
- These carriers and programs are required to provide coverage, on a
  basis no less favorable than the policy or contract provides for
  intravenously administered or injected anticancer medications, for
  expenses for prescribed, orally administered anticancer medications
  used to kill or slow the growth of cancerous cells.
- Pursuant to this requirement, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications.
- The contract or policy is not to achieve compliance with the provisions of this bill by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy as of the effective date of the bill.
- The bill takes effect on the 180th day after enactment and applies to all contracts and policies issued on or after the effective date.

#### **COMMITTEE AMENDMENTS**

The committee amendments to the bill:

- -- require insurers to provide coverage for prescribed, orally administered anticancer medications on a basis no less favorable than the policy or contract provides for intravenously administered or injected anticancer medications;
- -- stipulate that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications; and
- -- prohibit a contract or policy from achieving compliance with the provisions of the bill by imposing an increase in patient cost sharing for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy as of the effective date of the bill.

#### **FISCAL NOTE**

[First Reprint]

# ASSEMBLY, No. 2666 STATE OF NEW JERSEY 214th LEGISLATURE

DATED: JUNE 28, 2011

#### **SUMMARY**

**Synopsis:** Requires health insurers to cover oral anticancer medications on no

less favorable basis than intravenous anticancer medications.

Type of Impact: Expenditure increase to the State General Fund, school district and

local government funds.

Agencies Affected: Department of the Treasury, Division of Pensions and Benefits,

school districts, and local governments.

#### **Executive Estimate**

Fiscal Impact	FY 2011	<u>FY 2012</u>	<u>FY2013</u>
State Cost* No Impact – See comments below			ow
Local Cost* No Impact – See comments below		OW	
*(SHBP and SEHBP only)			

#### Office of Legislative Services Estimate

Fiscal Impact	FY 2011	<u>FY 2012</u>	<u>FY2013</u>	
State Cost*	ate Cost* Indeterminate – See comments below			
Local Cost*	Local Cost* Indeterminate – See comments below		ow	
*(SHBP and SEHBP only)				

- The Office of Legislative Services (OLS) **does not concur** with the Executive Branch fiscal estimate.
- This bill would require health insurers and the State Health Benefits Program and the School Employees Health Benefit Program (SHBP/SEHBP) to cover oral anticancer medications on a basis that is no less favorable than intravenous anticancer medications, stipulates that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications, and prohibits a contract or policy from achieving compliance with the provisions of the bill by



imposing an increase in patient cost sharing for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy.

- According to the Division of Pensions in the Department of the Treasury, there would be no additional costs to the State resulting from this bill because "the benefits mandated by this bill are already covered by the SHBP/SEHBP."
- The OLS notes that the provision that stipulates that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance eliminates the SHBP/SEHBP's ability to apply utilization management edits for drugs that require prior authorization to verify that the drugs are being prescribed in accordance with federal guidelines, and as such will increase costs to the programs for those drugs that will be automatically authorized that would not have otherwise been authorized.
- The OLS also notes that according to Medco "there is an issue that the cost sharing arrangement differences between providing oral cancer drugs verses intravenous cancer treatments may have a gap. If the bill requires cost sharing parity, then the SHBP/SEHBP instead of the patient will have to absorb the cost differential."
- The OLS notes that costs for local governments and boards of education that do not participate in the SHBP or the SEHBP may increase as the result of this bill, but the increase cannot be estimated due to insufficient data.
- The provisions of this bill will become effective on the 180th day after enactment and shall apply to all contracts and policies issued on or after the effective date.

#### **BILL DESCRIPTION**

Assembly Bill No. 2666 (1R) of 2010 provides that health insurance carriers (hospital, medical and health service corporations, individual, small employer, and larger group commercial insurers, and health maintenance organizations), SHBP, and SEHBP are required to provide coverage, on a basis no less favorable than the policy or contract provides for intravenously administered or injected anticancer medications, for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells. Pursuant to this requirement, coverage for expenses for prescribed, orally administered anticancer medications used to kill or slow the growth of cancerous cells are not to be subject to any prior authorization, dollar limit, copayment, deductible or coinsurance provision that does not apply to intravenously administered or injected anticancer medications. The contract or policy is not to achieve compliance with the provisions of this bill by imposing an increase in patient cost sharing, including any copayment, deductible or coinsurance, for anticancer medications, whether intravenously administered or injected or orally administered, that are covered under the contract or policy as of the effective date of the bill. The bill takes effect on the 180th day after enactment and applies to all contracts and policies issued on or after the effective date.

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#### FISCAL ANALYSIS

#### **EXECUTIVE BRANCH**

According to the Division of Pensions in the Department of the Treasury, there would be no additional costs to the programs resulting from this bill because "the benefits mandated by this bill are already covered by the SHBP/SEHBP" under the current Medco contract. Temodor, Afinitor, and Tykerb are examples of oral cancer drugs that are included in the SHBP/SEHBP Medco formulary for treating cancer.

#### OFFICE OF LEGISLATIVE SERVICES

The OLS does not concur with the Executive Branch fiscal estimate. The OLS notes that the provision that stipulates that coverage for prescribed, orally administered anticancer medications are not to be subject to any prior authorization eliminates the SHBP/SEHBP's ability to apply utilization management edits for drugs that require prior authorization to verify that the drugs are being prescribed in accordance with federal guidelines. Consequently, this provision will increase costs to the State for those drugs that will be automatically authorized that would not have otherwise been authorized. The OLS also notes that according to Medco "there is an issue that the cost sharing arrangement differences between providing oral cancer drugs verses intravenous cancer treatments may have a gap. If the bill requires cost sharing parity, then the SHBP/SEHBP instead of the patient will have to absorb the cost differential."

The OLS also notes that this bill may also result in an increase in costs for local governments and boards of education that do not participate in the SHBP or in the SEHBP, if their existing plans do not already cover oral cancer and related support drugs. Nevertheless, this fiscal note reflects potential costs associated with the SHBP and SEHBP only. Thus, the costs to local governments that contract with a commercial health care benefit provider, for example, are not reflected in this fiscal note. The OLS is not able to estimate the number of local agencies that contract with a commercial health care benefit provider and the cumulative amount of premiums paid by local governments due to a lack of data.

Section: State Government

Analyst: Kimberly McCord Clemmensen

Senior Fiscal Analyst

Approved: David J. Rosen

Legislative Budget and Finance Officer

This fiscal note has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).