

6055

I N S E N A T E

(PREFILED)

January 4, 2012

Introduced by Sen. LANZA -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance

AN ACT to amend the insurance law, in relation to coverage of oral chemotherapy treatment

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. Paragraph 12-a of subsection (i) of section 3216 of the
2 insurance law, as added by chapter 559 of the laws of 2011, is amended
3 to read as follows:
4 (12-a) (A) Every policy delivered or issued for delivery in this state
5 that provides medical, major medical, or similar comprehensive-type
6 coverage and provides coverage for prescription drugs and also [provide]
7 PROVIDES coverage for cancer chemotherapy treatment shall provide cover-
8 age for [a] prescribed, orally administered anticancer [medication]
9 MEDICATIONS used to kill or slow the growth of cancerous cells [and
10 shall apply the lower cost sharing of either (i) anticancer medication
11 under the prescription drug benefit or (ii)]. SUCH COVERAGE MAY BE
12 SUBJECT TO CO-PAYS, COINSURANCE OR DEDUCTIBLES, PROVIDED THAT THE
13 CO-PAYS, COINSURANCE OR DEDUCTIBLES ARE AT LEAST AS FAVORABLE TO AN
14 INSURED AS THE CO-PAYS, COINSURANCE OR DEDUCTIBLES THAT APPLY TO COVER-
15 AGE FOR intravenous or injected anticancer medications. [For the
16 purposes of this section "cost sharing" shall include co-pays, coinsu-
17 rance, and deductibles as deemed appropriate by the superintendent.]
18 (B) An insurer providing coverage under this paragraph and any partic-
19 ipating entity through which the insurer offers health services shall
20 not:
21 (i) vary the terms of the policy for the purpose or with the effect of
22 avoiding compliance with this paragraph;
23 (ii) provide incentives (monetary or otherwise) to encourage a covered
24 person to accept less than the minimum protections available under this
25 paragraph;

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets
[] is old law to be omitted.

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(iii) penalize in any way or reduce or limit the compensation of a health care practitioner for recommending or providing care to a covered person in accordance with this paragraph;

(iv) provide incentives (monetary or otherwise) to a health care practitioner relating to the services provided pursuant to this paragraph intended to induce or have the effect of inducing such practitioner to provide care to a covered person in a manner inconsistent with this paragraph; or

(v) achieve compliance with this paragraph by imposing an increase in cost sharing for an intravenous or injected anticancer medication.

S 2. Paragraph 12-a of subsection (1) of section 3221 of the insurance law, as added by chapter 559 of the laws of 2011, is amended to read as follows:

(12-a) (A) Every policy delivered or issued for delivery in this state that provides medical, major medical, or similar comprehensive-type coverage and provides coverage for prescription drugs and also provides coverage for cancer chemotherapy treatment shall provide coverage for [a] prescribed, orally administered anticancer [medication] MEDICATIONS used to kill or slow the growth of cancerous cells [and shall apply the lower cost sharing of either (i) anticancer medication under the prescription drug benefit or (ii)]. SUCH COVERAGE MAY BE SUBJECT TO CO-PAYS, COINSURANCE OR DEDUCTIBLES, PROVIDED THAT THE CO-PAYS, COINSURANCE OR DEDUCTIBLES ARE AT LEAST AS FAVORABLE TO AN INSURED AS THE CO-PAYS, COINSURANCE OR DEDUCTIBLES THAT APPLY TO COVERAGE FOR intravenous or injected anticancer medications. [For the purposes of this section "cost sharing" shall include co-pays, coinsurance, and deductibles as deemed appropriate by the superintendent.]

(B) An insurer providing coverage under this paragraph and any participating entity through which the insurer offers health services shall not:

(i) vary the terms of the policy for the purpose or with the effect of avoiding compliance with this paragraph;

(ii) provide incentives (monetary or otherwise) to encourage a covered person to accept less than the minimum protections available under this paragraph;

(iii) penalize in any way or reduce or limit the compensation of a health care practitioner for recommending or providing care to a covered person in accordance with this paragraph;

(iv) provide incentives (monetary or otherwise) to a health care practitioner relating to the services provided pursuant to this paragraph intended to induce or have the effect of inducing such practitioner to provide care to a covered person in a manner inconsistent with this paragraph; or

(v) achieve compliance with this paragraph by imposing an increase in cost sharing for an intravenous or injected anticancer medication.

S 3. Subsection (q-1) of section 4303 of the insurance law, as added by chapter 559 of the laws of 2011, is amended to read as follows:

(q-1) (1) Every [policy] CONTRACT issued by a medical expense indemnity corporation, a hospital service corporation or a health service corporation for delivery in this state that provides medical, major medical or similar comprehensive-type coverage and provides coverage for prescription drugs and for cancer chemotherapy treatment shall provide coverage for [a] prescribed, orally administered anticancer [medication] MEDICATIONS used to kill or slow the growth of cancerous cells [and shall apply the lower cost sharing of either (A) anticancer medication under the prescription drug benefit or (B)]. SUCH COVERAGE MAY BE

1 SUBJECT TO CO-PAYS, COINSURANCE OR DEDUCTIBLES, PROVIDED THAT THE
2 CO-PAYS, COINSURANCE OR DEDUCTIBLES ARE AT LEAST AS FAVORABLE TO AN
3 INSURED AS THE CO-PAYS, COINSURANCE OR DEDUCTIBLES THAT APPLY TO COVER-
4 AGE FOR intravenous or injected anticancer medications. [For the
5 purposes of this section "cost sharing" shall include co-payments, coin-
6 surance, and deductibles as deemed appropriate by the superintendent.]

7 (2) An insurer providing coverage under this paragraph and any partic-
8 ipating entity through which the insurer offers health services shall
9 not:

10 (A) vary the terms of the [policy] CONTRACT for the purpose or with
11 the effect of avoiding compliance with this paragraph;

12 (B) provide incentives (monetary or otherwise) to encourage a covered
13 person to accept less than the minimum protections available under this
14 paragraph;

15 (C) penalize in any way or reduce or limit the compensation of a
16 health care practitioner for recommending or providing care to a covered
17 person in accordance with this paragraph;

18 (D) provide incentives (monetary or otherwise) to a health care prac-
19 titioner relating to the services provided pursuant to this paragraph
20 intended to induce or have the effect of inducing such practitioner to
21 provide care to a covered person in a manner inconsistent with this
22 paragraph; or

23 (E) achieve compliance with this paragraph by imposing an increase in
24 cost sharing for an intravenous or injected anticancer medication.

25 S 4. This act shall take effect on the same date and in the same
26 manner as chapter 559 of the laws of 2011, takes effect.