I Mina'trentai Singko Na Liheslaturan Guåhan THE THIRTY-FIFTH GUAM LEGISLATURE Bill HISTORY 9/12/2019 1:48 PM

I Mina'trentai Singko Na Liheslaturan Guåhan BILL STATUS

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	FISCAL NOTES	NOTES
205-35 (COR)		AN ACT TO ADD A NEW § 18902 TO ARTICLE 9 OF CHAPTER 18, TITLE 22, GUAM CODE ANNOTATED, AND TO AMEND THE TITLE OF ARTICLE 9 OF CHAPTER 18, TITLE 22, GUAM CODE ANNOTATED, RELATIVE TO REQUIRING PARITY IN CANCER DRUG INSURANCE COVERAGE.	1:56 p.m.						

CLERKS OFFICE Page 1

I MINA'TRENTAI SINGKO NA LIHESLATURAN GUÅHAN 2019 (FIRST) Regular Session

Bill No. 205 (COR) Introduced by:

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Louise B. Muña

AN ACT TO ADD A NEW § 18902 TO ARTICLE 9 OF CHAPTER 18, TITLE 22, GUAM CODE ANNOTATED, AND TO AMEND THE TITLE OF ARTICLE 9 OF CHAPTER 18, TITLE 22, GUAM CODE ANNOTATED, RELATIVE TO REQUIRING PARITY IN CANCER DRUG INSURANCE COVERAGE.

BE IT ENACTED BY THE PEOPLE OF GUAM:

Section 1. Legislative Findings and Intent. I Liheslaturan Guåhan finds 2 that oral chemotherapy is increasingly becoming a standard treatment option for 3 cancer patients. Insurance coverage for cancer treatment, however, has not kept up 4 with science. Traditional IV/injectable treatments are routinely covered under the 5 medical benefit component of a health insurance plan, while orally-administered 6 anti-cancer medications are generally covered under the prescription drug 7 component, which often results in a considerable disparity in cost. 8

I Liheslaturan further finds that bipartisan efforts in Congress to enact the Cancer Parity Drug Act in 2015, 2017, 2018 and 2019 have not been successful and many states have taken the initiative to enact such legislation at the state level.

Currently, over 40 states have passed "oral parity" laws that stop insurers from 12 requiring patients to pay higher cost-sharing rates for oral chemotherapy drugs than

traditional IV/injectable chemotherapies.

It is the intent of I Liheslatura to require insurance coverage and group health plans to provide for cost sharing for oral anticancer drugs on terms no less favorable than the cost sharing provided for anticancer medications administered by a health care provider.

1	Section 2. A new § 18902 is added to Article 9 of Chapter 18, Title 22,
2	Guam Code Annotated, to read as follows:
3	"§ 18902. Parity in Coverage for Cancer Drugs
4 5	(a) A health insurance contract providing benefits for anti-cancer
6	medications that are injected or intravenously administered by a healthcare
7	provider and anti-cancer medications that are patient administered,
8	including, but not limited to, anti-cancer medications that are orally
9	administered, shall not require a higher copayment, deductible, or co-
10	insurance amount for a patient administered anti-cancer medication than the
11	contract requires for injected or intravenously administered anti-cancer
12	medication.
13	(b) As used in this section:
14	(1) "Anti-cancer medication" means drugs and biologics that
15	are used to kill, slow, or prevent the growth of cancerous cells.
16	Unless otherwise indicated, "anti-cancer medication" includes:
17	a. Injected or intravenously administered anti-cancer
18	medication;
19	and
20	b. Patient administered anti-cancer medication;
21	(2) "Cost-sharing requirements" means copayments,
22	coinsurance, deductibles, and any other amounts paid by the
23	covered person for a prescription; and
24	(3) "Health insurance contract" means an agreement to
25	provide benefits consisting of health care, provided directly, through
26	insurance or reimbursement, or otherwise and including items and
27	services paid for as health care, under any policy, certificate, or

1	agreement offered by a health insurance entity. A "health insurance
2	contract" does not include policies or certificates covering only
3	accident; credit; disability income; long-term care; hospital
4	indemnity; Medicare supplement as defined in § 1882(g)(1) of the
5	Social Security Act (42 U.S.C. § 1395ss(g)(1)); specified disease;
6	other limited benefit health insurance; automobile medical payment
7	insurance; or insurance under which benefits are payable with or
8	without regard to fault and that are statutorily required to be
9	contained in any liability insurance policy or equivalent self-
10	insurance.
11	(c) For a health insurance contract that meets the definition of a high
12	deductible plan in 26 U.S.C. § 223(c)(2), the limits described in subsection
13	(a) are applicable only after the minimum annual deductible specified in
14	26 U.S.C. § 223(c)(2) is reached.
15	(d) Compliance.
16	(1) A health insurer shall not comply with this section by imposing an
17	increase in cost-sharing requirements solely for orally administered,
18	intravenously administered, or injected anti-cancer medications.
19	(2) Nothing in this section requires the placement of an anti-cancer
20	medication in any pricing category or tier of a health insurance
21	contract's pharmacy benefit. However, any change in a pricing
22	category or tier of an injected or intravenously administered anti-
23	cancer medication that increases the copayment, deductible, or co-
24	insurance amount must also be applied to the majority of comparable
25	pharmacy benefits covered by the health insurance contract.
26	(3) Notwithstanding any provision of this section to the contrary, a
27	health insurance contract is in compliance with this section if the

1	cost-sharing requirements imposed under the contract for orally
2	administered cancer treatments does not exceed sixty dollars (\$60)
3	per prescription fill for a thirty-day period.
4	(e) This section does not apply to grandfathered health insurance contracts
5	described in Section 1251 of the federal Patient Protection and Affordable
6	Care Act (Pub. L. 111-148) and Section 2301 of the federal Health Care and
7	Education Reconciliation Act of 2010 (Pub. L. 111-152)."
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9	Section 3. The Title of Article 9 of Chapter 18, Title 22. Guam Code
10	Annotated is amended to read as follows:
11	"Article 9
12	Health Insurance Coverage: Blood and Blood Derivatives"