

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 536 Session of 2015

INTRODUCED BY TOMLINSON, VANCE, GREENLEAF, YAW, FONTANA, MENSCH, YUDICHAK, SCHWANK, BREWSTER, PILEGGI, KITCHEN, WARD, VULAKOVICH, BOSCOLA, TARTAGLIONE, COSTA, FOLMER AND RAFFERTY, FEBRUARY 25, 2015

REFERRED TO BANKING AND INSURANCE, FEBRUARY 25, 2015

AN ACT

1 Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An  
 2 act relating to insurance; amending, revising, and  
 3 consolidating the law providing for the incorporation of  
 4 insurance companies, and the regulation, supervision, and  
 5 protection of home and foreign insurance companies, Lloyds  
 6 associations, reciprocal and inter-insurance exchanges, and  
 7 fire insurance rating bureaus, and the regulation and  
 8 supervision of insurance carried by such companies,  
 9 associations, and exchanges, including insurance carried by  
 10 the State Workmen's Insurance Fund; providing penalties; and  
 11 repealing existing laws," in casualty insurance, providing  
 12 for coverage for oral anticancer medications.

13 The General Assembly of the Commonwealth of Pennsylvania  
 14 hereby enacts as follows:

15 Section 1. The act of May 17, 1921 (P.L.682, No.284), known  
 16 as The Insurance Company Law of 1921, is amended by adding a  
 17 section to read:

18 Section 631.1. Coverage for Oral Anticancer Medications.--

19 (a) Whenever a health insurance policy provides coverage that  
 20 includes coverage for cancer chemotherapy or anticancer  
 21 medications which have been approved by the United States Food  
 22 and Drug Administration for general use in the treatment of

1 cancer, the policy shall not provide coverage or impose cost  
2 sharing for a prescribed, orally administered anticancer  
3 medication on a less favorable basis than the coverage it  
4 provides or cost sharing it imposes for intravenously  
5 administered or injected cancer medications.

6 (b) A health insurance policy shall not comply with this  
7 section by imposing an increase in cost sharing solely for  
8 orally administered, intravenously administered or injected  
9 cancer medications.

10 (c) The prohibitions in subsections (a) and (b) do not  
11 preclude a health insurance policy from requiring an enrollee to  
12 obtain prior authorization before orally administered anticancer  
13 medication is dispensed to the enrollee.

14 (d) This section shall apply to those health insurance  
15 policies issued or entered into or renewed on or after the  
16 effective date of this section.

17 (e) As used in this section:

18 "Anticancer medication" means a drug or biological product  
19 that is used to kill, slow or prevent the growth of cancerous  
20 cells.

21 "Cost sharing" means the cost to an individual insured under  
22 a health insurance policy according to any coverage limit,  
23 copayment, coinsurance, deductible or other out-of-pocket  
24 expense requirements imposed by the policy, contract or  
25 agreement.

26 "Health insurance policy" means any individual or group  
27 health, sickness or accident policy, or subscriber contract or  
28 certificate offered, issued or renewed by an entity subject to  
29 one of the following:

30 (1) This act.

1     (2) The act of December 29, 1972 (P.L.1701, No.364), known  
2 as the "Health Maintenance Organization Act."

3     (3) 40 Pa.C.S. Ch. 61 (relating to hospital plan  
4 corporations) or 63 (relating to professional health services  
5 plan corporations).

6     The term does not include accident only, fixed indemnity,  
7 limited benefit, credit, dental, vision, specified disease,  
8 Medicare supplement, Civilian Health and Medical Program of the  
9 Uniformed Services (CHAMPUS) supplement, long-term care or  
10 disability income, workers' compensation or automobile medical  
11 payment insurance.

12     Section 2. The addition of section 631.1 of the act applies  
13 as follows:

14           (1) For health insurance policies for which either rates  
15 or forms are required to be filed with the Insurance  
16 Department or the Federal Government, section 631.1 of the  
17 act shall apply to any such policy for which a form or rate  
18 is first filed on or after the effective date of this  
19 section.

20           (2) For health insurance policies for which neither  
21 rates nor forms are required to be filed with the Insurance  
22 Department or the Federal Government, section 631.1 of the  
23 act shall apply to any such policy issued or renewed on or  
24 after 180 days after the effective date of this section.

25     Section 3. This act shall take effect immediately.