
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 167 Session of
2021

INTRODUCED BY DeLUCA, BOBACK, HILL-EVANS, CIRESI, LONGIETTI,
KINSEY, SAMUELSON, FREEMAN, IRVIN, DEASY, WEBSTER, SCHWEYER
AND ROZZI, JANUARY 14, 2021

REFERRED TO COMMITTEE ON INSURANCE, JANUARY 14, 2021

AN ACT

1 Providing for insurance coverage for patient costs associated
2 with cancer clinical trials.

3 The General Assembly of the Commonwealth of Pennsylvania
4 hereby enacts as follows:

5 Section 1. Short title.

6 This act shall be known and may be cited as the Cancer
7 Clinical Trials Act.

8 Section 2. Definitions.

9 The following words and phrases when used in this act shall
10 have the meanings given to them in this section unless the
11 context clearly indicates otherwise:

12 "Carrier." An insurance company, health service corporation,
13 hospital service corporation, medical service corporation or
14 health maintenance organization authorized to issue health
15 benefits plans in this Commonwealth.

16 "Cooperative group." A formal network of facilities that
17 collaborate on research projects and that has an established

1 National Institutes of Health approved peer review program
2 operating within the group, including the National Cancer
3 Institute clinical cooperative group and the National Cancer
4 Institute community clinical oncology program.

5 "Health benefits plan." As follows:

6 (1) Any of the following, which is delivered or issued
7 for delivery in this Commonwealth by a carrier:

8 (i) A hospital and medical expense insurance policy
9 or certificate.

10 (ii) A health, hospital or medical service
11 corporation contract or certificate.

12 (iii) A health maintenance organization subscriber
13 contract or certificate.

14 (2) The term does not include any of the following
15 plans, policies or contracts:

16 (i) Specified disease.

17 (ii) CHAMPUS supplement.

18 (iii) Accident only.

19 (iv) Credit.

20 (v) Disability.

21 (vi) Long-term care.

22 (vii) Coverage for Medicare services pursuant to a
23 contract with the Federal Government.

24 (viii) Medicare supplement.

25 (ix) Dental only.

26 (x) Vision only.

27 (xi) Insurance issued as a supplement to liability
28 insurance.

29 (xii) Coverage arising out of a workers'
30 compensation or similar law.

1 (xiii) Hospital confinement or other supplemental
2 limited benefit insurance coverage.

3 (xiv) Automobile medical payment insurance.

4 "Institution." A hospital or organization that is involved
5 in administering clinical trials.

6 "Institutional review board." A board, committee or other
7 group that is:

8 (1) formally designated by an institution to approve the
9 initiation of and to conduct periodic review of biomedical
10 research involving human subjects and in which the primary
11 purpose of the review is to assure the protection of the
12 rights and welfare of the human subjects and not to review a
13 clinical trial for scientific merit; and

14 (2) approved by the National Institutes of Health Office
15 for Protection from Research Risks.

16 "Multiple project assurance contract." A contract between an
17 institution and the United States Department of Health and Human
18 Services that defines the relationship of the institution to the
19 United States Department of Health and Human Services and that
20 sets out the responsibilities of the institution and the
21 procedures that will be used by the institution to protect human
22 subjects.

23 "Patient." The subscriber, insured or enrollee or the
24 covered dependent of the subscriber, insured or enrollee.

25 "Routine care costs." Physician fees, laboratory expenses
26 and expenses associated with the hospitalization, administering
27 of treatment and evaluation of the patient during the course of
28 treatment that:

29 (1) are consistent with usual and customary patterns and
30 standards of care incurred whenever an enrollee, subscriber

1 or insured receives medical care associated with an approved
2 cancer clinical trial; and

3 (2) would be covered if the items and services were
4 provided other than in connection with an approved cancer
5 clinical trial.

6 Section 3. Coverage for clinical cancer trials.

7 (a) General rule.--A carrier is not obligated to pay any
8 costs, other than routine care costs, that are directly
9 associated with a cancer clinical trial that is offered in this
10 Commonwealth and in which the subscriber, insured or enrollee
11 participates voluntarily. A cancer clinical trial is a course of
12 treatment in which all of the following apply:

13 (1) The treatment is part of a scientific study of a new
14 therapy or intervention that is being conducted at an
15 institution in this Commonwealth, that is for the treatment,
16 palliation or prevention of cancer in humans and in which the
17 scientific study includes all of the following:

18 (i) Specific goals.

19 (ii) A rationale and background for the study.

20 (iii) Criteria for patient selection.

21 (iv) Specific directions for administering the
22 therapy and monitoring patients.

23 (v) A definition of quantitative measures for
24 determining treatment response.

25 (vi) Methods for documenting and treating adverse
26 reactions.

27 (2) The treatment is being provided as part of a study
28 being conducted in a Phase I, Phase II, Phase III or Phase IV
29 cancer clinical trial.

30 (3) The treatment is being provided as part of a study

1 being conducted in accordance with a clinical trial approved
2 by at least one of the following:

3 (i) One of the National Institutes of Health.

4 (ii) A National Institutes of Health cooperative
5 group or center.

6 (iii) The United States Food and Drug Administration
7 in the form of an investigational new drug application.

8 (iv) The United States Department of Defense.

9 (v) The United States Department of Veterans
10 Affairs.

11 (vi) A qualified research entity that meets the
12 criteria established by the National Institutes of Health
13 for grant eligibility.

14 (vii) A panel of qualified recognized experts in
15 clinical research within academic health institutions in
16 this Commonwealth.

17 (4) The proposed treatment or study has been reviewed
18 and approved by an institutional review board of an
19 institution in this Commonwealth.

20 (5) The personnel providing the treatment or conducting
21 the study:

22 (i) Are providing the treatment or conducting the
23 study within their scope of practice, experience and
24 training and are capable of providing the treatment
25 because of their experience, training and volume of
26 patients treated to maintain expertise.

27 (ii) Agree to accept reimbursement as payment in
28 full from the carrier at the rates that are established
29 by the carrier and that are not more than the level of
30 reimbursement applicable to other similar services

1 provided by health care providers with the carrier's
2 provider network.

3 (6) There is no clearly superior, noninvestigational
4 treatment alternative.

5 (7) The available clinical or preclinical data provide a
6 reasonable expectation that the treatment will be at least as
7 efficacious as any noninvestigational alternative.

8 (b) Liability.--Pursuant to the patient informed consent
9 document, no party is liable for damages associated with the
10 treatment provided during any phase of a cancer clinical trial.

11 (c) Benefits.--Each health benefits plan delivered or issued
12 for delivery in this Commonwealth shall provide benefits under
13 the plan, and those benefits may not supplant any portion of the
14 clinical trial that is customarily paid for by government,
15 biotechnical, pharmaceutical or medical device industry sources.

16 (d) Remedy.--This section does not create any private right
17 or cause of action for or on behalf of any patient against the
18 carrier. This section provides solely an administrative remedy
19 for any violation of this section or any related rule.

20 (e) Deductibles and other cost sharing.--Nothing in this
21 section prohibits the carrier from imposing deductibles,
22 coinsurance or other cost-sharing measures in relation to
23 benefits provided under this section.

24 Section 4. Applicability.

25 This act applies to health benefits plans issued or renewed
26 on or after January 1, 2022.

27 Section 5. Effective date.

28 This act shall take effect immediately.