	TREATMENT MEDICATION REVISIONS
	2020 GENERAL SESSION
	STATE OF UTAH
	<b>Chief Sponsor: Daniel Hemmert</b>
	House Sponsor:
L	LONG TITLE
G	General Description:
	This bill amends provisions relating to health insurance coverage for certain cancer
tr	reatments.
H	lighlighted Provisions:
	This bill:
	<ul> <li>defines terms; and</li> </ul>
	<ul> <li>prohibits a health benefit plan from requiring step therapy for certain drugs used to</li> </ul>
tr	reat cancer or associated conditions.
N	Aoney Appropriated in this Bill:
	None
0	Other Special Clauses:
	None
U	Jtah Code Sections Affected:
A	AMENDS:
	31A-22-641, as enacted by Laws of Utah 2013, Chapter 164
B	<i>Be it enacted by the Legislature of the state of Utah:</i>
	Section 1. Section <b>31A-22-641</b> is amended to read:
	31A-22-641. Cancer treatment parity prohibition on step therapy for certain



## **S.B. 184**

28 (1) For purposes of this section: 29 (a) "Cost sharing" means the enrollee's maximum out-of-pocket costs as defined by the 30 health benefit plan. (b) "Health insurer" [is as] means insurer as defined in Subsection 31A-22-634(1). 31 32 (c) "Intravenously administered chemotherapy" means a physician-prescribed cancer 33 treatment that is used to kill or slow the growth of cancer cells, that is administered through 34 injection directly into the patient's circulatory system by a physician, physician assistant, nurse 35 practitioner, nurse, or other medical personnel under the supervision of a physician, and in a 36 hospital, medical office, or other clinical setting. 37 (d) "Oral chemotherapy" means a United States Food and Drug 38 Administration-approved, physician-prescribed cancer treatment that is used to kill or slow the 39 growth of cancer cells, that is taken orally in the form of a tablet or capsule, and may be 40 administered in a hospital, medical office, or other clinical setting or may be delivered to the patient for self-administration under the direction or supervision of a physician outside of a 41 42 hospital, medical office, or other clinical setting. 43 (e) "Relapsed or refractory hematologic cancer" means a cancer that is unlikely to be 44 cured or controlled with treatment. (f) "Stage IV metastatic cancer" means cancer that has spread from the primary or 45 46 original site to other organs, distant sites, tissues, or other parts of the body. 47 (2) (a) This section applies to health benefit plans renewed or entered into on or after October 1, 2013. 48 49  $\left[\frac{3}{3}\right]$  (b) A health benefit plan that covers prescribed oral chemotherapy and 50 intravenously administered chemotherapy shall: 51  $\left[\frac{a}{a}\right]$  (i) except as provided in Subsection  $\left[\frac{3}{b}\right]$  (2)(b)(ii), ensure that the cost sharing 52 applied to the covered oral chemotherapy is no more restrictive than the cost sharing applied to 53 the covered intravenously administered chemotherapy; or 54 [<del>(b)</del>] (ii) if the cost sharing for oral chemotherapy is more restrictive than the cost 55 sharing for intravenous chemotherapy, the health benefit plan may not apply cost sharing for 56 the oral chemotherapy that exceeds \$300 per filled prescription. 57 (3) (a) This Subsection (3) applies to a health benefit plan entered into or renewed on 58 or after January 1, 2021.

## 02-25-20 3:40 PM

59	(b) A health insurer or a pharmacy benefit manager may not require a step therapy
60	protocol for coverage or a prescription drug or a sequence of prescription drugs if:
61	(i) the recommended prescription drug or sequence of prescription drugs is prescribed
62	to treat the enrollee's:
63	(A) stage IV metastatic cancer;
64	(B) relapsed or refractory hematologic cancer; or
65	(C) severe side effects of the cancers described in Subsection (3)(b)(ii)(A) or (B),
66	including anemia, neutropenia, bone complications, nausea, vomiting, oral mucositis, diarrhea,
67	skin toxicity, peripheral neurotoxicity, and pain; and
68	(ii) the use of the prescription drug or series of prescription drugs is:
69	(A) indicated by the United States Food and Drug Administration for treatment of the
70	enrollee's condition under Subsection (3)(b)(i); or
71	(B) supported by peer-reviewed medical literature.
72	(c) This Subsection (3) does not require coverage of a prescription drug that is not on
73	the insurer's prescription drug formulary.
74	(4) (a) A health insurer [shall] may not increase the cost sharing for intravenously
75	administered chemotherapy for the purpose of achieving compliance with this section.
76	(b) The commissioner may adopt administrative rules in accordance with Title 63G,
77	Chapter 3, Utah Administrative Rulemaking Act, to enforce the provisions of this section.