



Mandates on States & Premium Increases for All?

A Snapshot of Impact of Providing Cancer Patients Affordable Access to Oral Anticancer Treatments

STATE	YEAR PARITY LAW ENACTED OR	REVIEWED AS MANDATE & FOR	OUTCOME OF REVIEW
	PENDING LEGISLATION	FISCAL IMPACT BY POLICYMAKERS	
California	January 1, 2015	Analysis conducted by California	Analysis found a negligible increase
		Health Benefits Review Program.	in premiums of .00144%.
Colorado	January 1, 2011	An official study was not conducted	In response to the TN legislator, CO
		by the Division of Insurance (DOI), but	Comm. of Insurance stated,
		DOI did respond to an inquiry from a	"Because of the extent of changes
		Tennessee legislator, regarding	to state and federal law, affecting
		premium increases since enactment	health insurance premiums and
		of parity law.	cost sharing, we cannot attribute
			any change due to this specific
			provision."
Connecticut	January 1, 2011	Official study not conducted by the CT	In response to the TN legislator, CT
		Insurance Department, but	Insurance Department Counsel, N.
		department did respond to an inquiry	Beth Cook states, "while [health]
		from a TN legislator, regarding	plans raised concerns during the
		premium increases since enactment	legislative process, once the law
		of parity law.	was enacted, we have not had
			concerns raised.
Illinois	January 1, 2012	An official study was not conducted	Q : "Have any health plans raised
		by the Illinois Department of	specific concerns about the oral
		Insurance, but the department did	chemotherapy parity requirement
		respond to an inquiry from a	and/or claimed that the new
		Tennessee legislator, regarding	requirement has resulted in an
		premium increases since enactment	increase in health insurance
		of parity law.	premiums?"
			<u>A:</u>
			"Yes; but that has been a standard
			defense against any new mandates.
			To date, such claims have not been
			supported by actual rate increases."

 $Speac.myeloma.org \cdot \underline{speac@myeloma.org}$

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Indiana	January 1, 2010	Yes. Bill sponsor sent letter to Indiana Insurance Department, asking if premiums had increased, as a result of enactment of oral chemotherapy parity law.	Indiana Department of Insurance confirmed one year after enactment that "no increase [in premiums] has materialized at this time."
Kansas	April 1, 2010	The Kansas State Employees Health Care Commission conducted a review of impact on premiums.	KS State Employees Health Care Commission found "minimal impact to the health plan finances."
Kentucky	January 1, 2015	Yes. Study conducted by the Kentucky Department of Insurance.	Determined an increase in all premiums between 67-84 cents per month per member.
Maine	January 1, 2015	Yes. Study conducted by the Maine Department of Insurance.	Determined no increase in premiums.
Massachusetts	May 1, 2013	Mandated Benefit Review of SB 1070 (An Act to Relative to Oral Cancer Therapy) conducted by the Division of Health Care Policy and Finance.	Found that bill would cause no more than a 0.044 percent increase in insurance premiums. The five-year total estimated impact on premiums ranges from 0.008 to 0.044 percent of annual premium."
Missouri	January 1, 2015	Report commissioned by Missouri Joint Committee on Legislative Research- Oversight Division.	Report estimated a 0.23%, or \$0.81, per member increase.
Oregon	January 1, 2008	Yes, the Oregon Insurance Division (OID) conducted a review.	OID stated impact on premiums "very MINIMAL." Just 9 out of 79 plans cited a minimal impact on premium rates.
Texas	September 1, 2011 (The bill was signed into law by Governor Rick Perry.)	Yes. Study conducted by the Texas Department of Insurance, PRIOR to introduction of bill, at the request of	Study found, "The implication of reducing patient out-of-pocket costs for pharmacy benefits is that

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		Governor Rick Perry.	costs are effectively shifted from the patient to health plans. The cost of implementing chemotherapy parity is estimated at less than \$0.50 per member per month in most cases, although estimate can increase to \$1.30 per member per month in cases where an enrollee faces high cost sharing requirements for pharmacy benefits and low cost sharing requirements for medical benefits."
Vermont	April 1, 2010	Yes, an analysis was conducted by the Vermont Department of Banking, Insurance, Securities and Health Care Administration (BISHCA).	Final BISHCA analysis concluded, "The Department has not received information indicating that mandating coverage for orally administered anticancer medications will significantly impact premiums.
Washington (State)	January 1, 2012	Review conducted by Washington Department of Insurance.	Review found a nominal increase in premiums of 0.2% as result of enactment of oral chemotherapy parity law.
Wisconsin	January 1, 2015	Bill reviewed by Wisconsin Office of the Commissioner of Insurance (OCI).	Deemed to NOT be a mandate by OCI.

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