## SENATE SUMMARY OF HOUSE AMENDMENTS

SB 204 2020 Regular Session Talbot

## KEYWORD AND SUMMARY AS RETURNED TO THE SENATE

INSURANCE POLICIES. Provides for health insurance coverage of cancer treatments. (1/1/21)

## SUMMARY OF HOUSE AMENDMENTS TO THE SENATE BILL

- 1. Modify the title to add citations and descriptions relative to Phase 1 clinical trials for cancer.
- 2. Provide that a health coverage plan is not required to cover non-healthcare services, costs for managing research data, investigational drugs, devices, items, or services associated with clinical trials.
- 3. Prohibit a health coverage plan from denying coverage for the treatment of metastatic or unresectable tumors with a medically necessary drug prescribed by a physician under certain circumstances.
- 4. Provide that coverage may be denied if an alternative treatment proves to be more effective in published randomized clinical trials and is not contraindicated in the patient.
- 5. Modify <u>proposed law</u> to require a health coverage plan to continue to provide coverage of a prescribed drug after the initial treatment period if the drug is physician-certified as medically necessary for the treatment of the patient's cancer, based on documented improvement of the patient.
- 6. Provide an effective date of Jan. 1, 2021 and require any policy, contract, or health coverage plan currently in place to comply with <u>present</u> and <u>proposed</u> law by Jan. 1, 2022.
- 7. Make technical changes.

## DIGEST OF THE SENATE BILL AS RETURNED TO THE SENATE

<u>Present law</u> requires a health insurance issuer to provide coverage for the costs of investigational treatments and associated protocol-related patient care if treatment is provided or a study is conducted in a Phase II, Phase III, or Phase IV clinical trial for cancer.

<u>Proposed law</u> retains <u>present law</u> and extends coverage to a treatment provided or study conducted in a Phase I clinical trial for cancer.

<u>Proposed law</u> does not require a health insurance issuer to provide coverage for the following:

- (1) Non-healthcare services provided as part of the clinical trial.
- (2) Costs for managing research data associated with the clinical trial.
- (3) Investigational drugs, devices, items, or services associated with the clinical trial.

<u>Proposed law</u> prohibits a health coverage plan delivered or issued for delivery in this state from denying coverage for the treatment of metastatic or unresectable tumors with a medically necessary drug prescribed by a physician on the sole basis that the drug is not indicated for the location in the body of the patient's cancer, if the drug is approved by the

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United States Food and Drug Administration (FDA) for the treatment of the specific mutation of the patient's cancer.

<u>Proposed law</u> further provides that coverage may be denied if an alternative treatment has proven to be more effective in published randomized clinical trials and is not contraindicated in the patient.

<u>Proposed law</u> requires any health coverage plan delivered or issued for delivery in this state to include coverage for a minimum initial treatment period of at least 3 months for a medically necessary drug prescribed by a physician that is not indicated for the location in the body of the patient's cancer, if the drug is approved by the FDA for the treatment of the specific mutation of the patient's cancer.

<u>Proposed law</u> requires the health coverage plan to continue to provide coverage of the prescribed drug after the initial treatment period if the treating physician certifies that the prescribed drug is medically necessary for the treatment of the patient's cancer, based on documented improvement of the patient.

Effective January 1, 2021.

(Amends R.S. 22:1044(E)(2); Adds R.S. 22:1054.1)

Thomas L. Tyler