Regular Session, 2009

HOUSE CONCURRENT RESOLUTION NO. 103

BY REPRESENTATIVE TALBOT

INSURANCE/HEALTH: Urges and requests the Department of Insurance to study the disparities in amounts of co-payments between orally and intravenously administered chemotherapy medications

A CONCURRENT RESOLUTION

To urge and request the Department of Insurance to study the disparities in the amounts of co-payments between orally and intravenously administered chemotherapy medications.

WHEREAS, the American Cancer Society estimates that more than five hundred sixty-five thousand six hundred fifty people in the United States, including approximately nine thousand three hundred fifty in Louisiana, died of some form of cancer in 2008; and

WHEREAS, the American Cancer Society also reports that more than one million four hundred thousand new cases of cancer were diagnosed in 2008, including approximately twenty-three thousand three hundred sixty in Louisiana; and

WHEREAS, advances in cancer treatments have led to the availability of oral chemotherapy drugs to treat certain types of cancers, including breast cancer, colon and colorectal cancer, leukemia, lymphoma, lung cancer, Karposi's sarcoma, prostate cancer, ovarian cancer, and brain tumor; and

WHEREAS, oral chemotherapy, which allows a patient to take cancer fighting drugs by mouth in the form of a pill, capsule, or liquid, may be more effective at fighting certain types of cancer and may provide fewer negative side effects in some patients than traditional intravenous chemotherapy; and

WHEREAS, oral chemotherapy drugs do not require administration in a clinical setting and, therefore, allow a patient to maintain a greater degree of normalcy and independence during treatment than traditional intravenous chemotherapy; and

WHEREAS, oral chemotherapy may be more cost-efficient for many patients than traditional intravenous chemotherapy since oral chemotherapy does not require each dose to be administered by medical personnel in a clinical setting; and

WHEREAS, nonetheless despite this emergence of clinically proven safe and effective oral chemotherapy medications, greater patient out-of-pocket cost creates a barrier for such drugs covered under the pharmacy benefits of a health insurance plan; and

WHEREAS, while traditional intravenous chemotherapy is typically covered under a health insurance plan's medical benefits and requires only an office visit co-payment, oral chemotherapy medications are typically covered by the plan's drug benefit and require significant co-payments or coinsurance to fill the prescription at a pharmacy; and

WHEREAS, it is important to ensure that health insurance plans cover all forms of necessary and effective treatment for all cancer patients in this state.

THEREFORE, BE IT RESOLVED that the Legislature of Louisiana does hereby urge and request the Department of Insurance to study the disparities in the amounts of co-payments between orally and intravenously administered chemotherapy medications.

BE IT FURTHER RESOLVED that the Department of Insurance shall report its findings on these disparities to the House and Senate committees on insurance by February 15, 2010.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

Talbot HCR No. 103

Urges and requests the Department of Insurance to study the disparities in the amounts of co-payments between orally and intravenously administered chemotherapy medications and report its findings to the House and Senate insurance committees by Feb. 15, 2010.

Summary of Amendments Adopted by House

Committee Amendments Proposed by House Committee on Insurance to the original bill.

1. Extends the time for the Department of Insurance to report its findings from Jan. 1, 2010, to Feb. 15, 2010.