Hawaii’s Oral Anticancer Treatment Access Law: What Clinicians Need to Know

Outdated coverage policies in Hawaii USED TO limit cancer patients’ access to life-saving drugs!

Traditionally, IV chemotherapy treatments are covered under a health plan’s medical benefit where the patient is required to pay an office visit copay, usually between $20 and $30. Conversely, oral anticancer medications are covered under a health plan’s prescription benefit and, many times, patients are responsible for extremely high and unmanageable copays, creating an enormous barrier for patients to access orally administered drugs. According to a recent study published in the Journal of Oncology Practice and American Journal of Managed Care, 10% of cancer patients failed to fill their initial prescriptions for oral anticancer medications due to high out-of-pocket costs.

Legislative Solution

In an effort to remove barriers to accessing life-saving oral anti-cancer medications, Hawaii implemented legislation, on January 1, 2010. This law directs individual and group accident and health or sickness policies that provide coverage for the treatment of cancer to provide coverage for orally administered chemotherapy at a cost no less favorable to intravenously administered or injected chemotherapy. To view Hawaii’s oral parity law, please see next page.

What Does This Mean for Patients?

If a patient is privately insured (the law does not apply to Medicare), and their plan covers chemotherapy, an FDA-approved, orally administered drug should have the same out-of-pocket costs for the patient as an intravenously administered drug.

What to do if an insurance plan does not comply & to find out if the law applies to your health plan:

Visit the Hawaii Department of Commerce & Consumer Affairs, Insurance Division on the web at www.hawaii.gov/dcca/ins/consumer and click on “Health Insurance” to download information about filing a complaint or call (808) 586-2804. For information about our oral parity work in Washington, DC, please go to: peac.myeloma.org.
HAWAII REVISED STATUTES ANNOTATED

DIVISION 2. BUSINESS
	TITLE 24 Insurance
	CHAPTER 432 Benefit Societies
	Article 1. Mutual Benefit Societies
	PART VI. Required Provisions and Benefits

HRS § 432:1-616 (2011)

[§ 432:1-616.] Chemotherapy services.

(a) All individual and group hospital and medical service plan contracts that include coverage or benefits for the treatment of cancer shall provide payment or reimbursement for all chemotherapy that is considered medically necessary as defined in section 432E-1.4, including orally administered chemotherapy, at the same copayment percentage or relative coinsurance amount as is applied to intravenously administered chemotherapy; provided that this section shall not apply to an accident only, specified disease, hospital indemnity, long-term care, or other limited benefit health insurance policy.

(b) For the purposes of this section:

"Intravenously administered chemotherapy" means a physician-prescribed cancer treatment that is administered through injection directly into the patient's circulatory system by a physician, physician assistant, nurse practitioner, nurse, or other medical personnel under the supervision of a physician and in a hospital, medical office, or other clinical setting.

"Oral chemotherapy" means a United States Food and Drug Administration-approved, physician-prescribed cancer treatment that is taken orally in the form of a tablet or capsule and may be 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 hospital, medical office, or other clinical setting.
ARTICLE 10A. Accident and Health or Sickness Insurance Contracts
PART I. Individual Accident and Health or Sickness Policies

HRS § 431:10A-126 (2011)

[§ 431:10A-126.] Chemotherapy services.

(a) Notwithstanding section 23-51, all individual and group accident and health or sickness insurance policies that include coverage or benefits for the treatment of cancer shall provide payment or reimbursement for all chemotherapy that is considered medically necessary as defined in section 432E-1.4, including orally administered chemotherapy, at the same copayment percentage or relative coinsurance amount as is applied to intravenously administered chemotherapy; provided that this section shall not apply to an accident only, specified disease, hospital indemnity, long-term care, or other limited benefit health insurance policy.

(b) For the purposes of this section:

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