

NORTH CAROLINA GENERAL ASSEMBLY AMENDMENT

Senate Bill 493

AMENDMENT NO. A5

(to be filled in by
Principal Clerk)

S493-ATK-142 [v.3]

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Comm. Sub. [NO] Amends Title [NO] Fifth Edition

Date	,	2014
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Representative Lewis

moves to amend the bill on page 14, lines 24-25, by inserting the following between the lines:

"NORTH CAROLINA CANCER TREATMENT FAIRNESS ACT

SECTION 14.2.(a) Article 3 of Chapter 58 of the General Statutes is amended by adding a new section to read as follows:

"§ 58-3-282. Coverage for orally administered anticancer drugs.

- (a) Every health benefit plan offered by an insurer, as defined in G.S. 58-3-167(a), that provides coverage for prescribed, orally administered anticancer drugs that are used to kill or slow the growth of cancerous cells and that provides coverage for intravenously administered or injected anticancer drugs shall provide coverage for prescribed, orally administered anticancer drugs on a basis no less favorable than the coverage the policy, contract, or plan provides for the intravenously administered or injected anticancer drugs.
- (b) Coverage for orally administered anticancer drugs shall not be subject to any prior authorization, dollar limit, co-payment, coinsurance, or deductible provision or to any other out-of-pocket expense that does not apply to intravenously administered or injected anticancer drugs.
- (c) A policy, contract, or plan provider shall not achieve compliance with this section by reclassifying anticancer drugs or by increasing patient cost-sharing, including any coinsurance, co-payment, deductible, or other out-of-pocket expenses imposed on anticancer drugs. Any policy, contract, or plan change that otherwise increases an out-of-pocket expense applied to anticancer drugs must also be applied to the majority of comparable medical or pharmaceutical benefits covered by the policy, contract, or plan.
- (d) An insurer that limits the total amount paid by a covered person through all in-network, cost-sharing requirements to no more than one hundred dollars (\$100) per filled prescription for any orally administered anticancer drug shall be considered in compliance with this section. For purposes of this subsection, "cost-sharing requirements" shall include co-payments, coinsurance, and deductibles, except in regard to a high deductible health plan or policy that is qualified to be used in conjunction with a health savings account, a medical savings account, or other similar program authorized by 26 U.S.C. 220 et seq."

SECTION 14.2.(b) This section becomes effective January 1, 2015, and applies to insurance contracts or policies issued, renewed, or amended on or after that date, but the section shall not become effective if the section is determined by the federal government to create a



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AMENDMENT

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ADOPTED

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2 3 4	155.170(a)(3	3).".	nerits pursuant to 43 C.	г.K.
5	SIGNED			
	SIGNED _	Amendment Sponsor	_	
	SIGNED _		_	
		Committee Chair if Senate Committee Amendment		
	ADOPTED	FAILED	TABLED	

The official copy of this document, with signatures and vote information, is available in the House Principal Clerk's Office