Cancer Drug Coverage Parity Act of 2017 (H.R. 1409)

OVERVIEW

ASCO has endorsed the Cancer Drug Coverage Parity Act of 2017 (H.R. 1409), introduced by Reps. Leonard Lance (R-NJ) and Brian Higgins (D-NY), which would require private health insurance plans offering intravenous chemotherapy benefits to provide parity for orally administered and self-injectable anticancer medications.

BACKGROUND

Due to scientific advances in recent years, oncologists are increasingly able to treat their patients with orally administered medications instead of medications given intravenously. Oral cancer drugs can provide significant clinical advantages over more traditional intravenous and injected anticancer medications. In some instances, they may represent the only or best treatment option.

However, some health plans impose significantly higher cost sharing requirements—copays, coinsurance and other mechanisms—on cancer patients for orally administered medications than for those injected or administered intravenously. This is due to the fact that most traditional anticancer medications are often covered under the medical benefit of most insurance plans, while oral anticancer medications are covered under the prescription drug benefit. Higher cost sharing requirements create significant financial barriers for cancer patients who need access to these critical, life-enhancing oral anticancer medications.

Ensuring that cancer patients have meaningful access to oral anticancer medications is critical. This is not an issue of convenience for the cancer patient or health care provider.

RECOMMENDATIONS

ASCO is committed to ensuring that the safeguards included in H.R. 1409 become available to all Americans and recommends the following as the legislation moved forward:

- Legislative language should be clarified to include supportive care drugs to ensure they are subject to the same safeguards as other drugs used within an anticancer regimen.