House File 2315 - Introduced

	BY SMITH
Passed House, Date Vote: Ayes Nays Approved	Passed Senate, Date Vote: Ayes Nays

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A BILL FOR

1 An Act requiring health benefit coverage for certain cancer treatment delivered pursuant to approved cancer clinical trials, establishing a cancer clinical trial review board, and 4 providing an applicability date.
5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA: 6 TLSB 5684HH 82 7 av/nh/8

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- Section 1. NEW SECTION. 514C.23 APPROVED CANCER CLINICAL 2 TRIALS COVERAGE.
 - DEFINITIONS. For purposes of this section, unless the 1. 4 context otherwise requires:
- "Approved cancer clinical trial" means a scientific 6 study of a new therapy for the treatment of cancer in human 7 beings that meets the requirements set forth in subsection 3 8 and consists of a scientific plan of treatment that includes 9 specified goals, a rationale and background for the plan, 1 10 criteria for patient selection, specific directions for 1 11 administering therapy and monitoring patients, a definition of 1 12 quantitative measures for determining treatment response, and 1 13 methods for documenting and treating adverse reactions.
- 1 14 b. "Board" means the cancer clinical trial review board 1 15 established in subsection 4.
- 1 16 c. "Institutional review board" means a board, committee, 1 17 or other group formally designated by an institution and 1 18 approved by the national institutes of health, office for 1 19 protection from research risks, to review, approve the 1 20 initiation of, and conduct periodic review of biomedical 1 21 research involving human subjects. "Institutional review 1 22 board" means the same as "institutional review committee" as 1 23 used in section 520(g) of the federal Food, Drug, and Cosmetic 1 24 Act, as codified in 21 U.S.C. } 301 et seq.
- "Routine patient care costs" means physician fees, 1 25 d. 26 laboratory expenses, and expenses associated with the 27 hospitalization, administration of treatment, and evaluation 1 28 of a patient during the course of treatment which are 29 consistent with usual and customary patterns and standards of 30 care incurred whenever an enrollee, subscriber, or insured 1 31 receives medical care associated with an approved cancer 1 32 clinical trial, and which would be covered if such items and 33 services were provided other than in connection with an 34 approved cancer clinical trial.
 - 35 "Therapeutic intent" means that a treatment is aimed at 1 improving a patient's health outcome relative to either 2 survival or quality of life.
- 2 2. COVERAGE REQUIRED. Notwithstanding the uniformity of 4 treatment requirements of section 514C.6, a policy or contract 5 providing for third=party payment or prepayment of health or 6 medical expenses shall provide coverage benefits for routine 2 2 2 7 patient care costs incurred for cancer treatment in an 8 approved cancer clinical trial to the same extent that such 9 policy or contract provides coverage for treating any other 2 10 sickness, injury, disease, or condition covered under the 2 11 policy or contract, if the insured has been referred for such 2 12 cancer treatment by two physicians who specialize in oncology 2 13 and the cancer treatment is given pursuant to an approved 2 14 cancer clinical trial that meets the criteria set forth in 15 subsection 3. Services that are furnished without charge to a 2 16 participant in the approved cancer clinical trial are not 2 17 required to be covered as routine patient care costs pursuant 2 18 to this section.

- 2 19 3. CRITERIA. Routine patient care costs for cancer 2 20 treatment given pursuant to an approved cancer clinical trial 2 21 shall be covered pursuant to this section if all of the 2 22 following requirements are met:
- a. The treatment is provided with therapeutic intent and 2 23 2 24 is provided pursuant to an approved cancer clinical trial that 25 has been authorized or approved by one of the following: 26 (1) The national institutes of health.

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- The United States food and drug administration.
- (3) The United States department of defense.
- The United States department of veterans affairs.
- b. The proposed treatment has been reviewed and approved 2 31 by the applicable qualified institutional review board.
 - 32 c. The available clinical or preclinical data indicate 33 that the treatment that will be provided pursuant to the 34 approved cancer clinical trial will be at least as effective 35 as the standard therapy and is anticipated to constitute an improvement in therapeutic effectiveness for the treatment of 2 the disease in question.
 - 4. CANCER CLINICAL TRIAL REVIEW BOARD.
 - A cancer clinical trial review board is established in a. 5 the department of public health.
 - b. The board shall consist of the director of public health or the director's designee, and the following additional members appointed by the governor and subject to 9 confirmation by the senate:
- 3 10 (1) One member who is a physician licensed to practice 11 medicine and surgery in this state and who specializes in 3 12 oncology, is a member of a community medical oncology 3 13 practice, and is not on the staff of a comprehensive or 14 clinical cancer center designated by the national cancer 3 15 institute.
- (2) One member who is a physician licensed to practice 3 17 medicine and surgery in this state who specializes in oncology 3 18 and is on the staff of a comprehensive or clinical cancer 3 19 center designated by the national cancer institute.
- (3) One member who is a medical ethicist recognized for 21 expertise in evaluating ethical implications of health care 3 22 practices and procedures.
- 3 23 (4) One member who is a medical economist recognized for 24 expertise in evaluating economic implications of health care 3 25 practices and procedures.
 - (5) One member who is a physician licensed to practice 27 medicine and surgery in this state who is employed by or 28 represents an insurer.
- (6) One member who is a physician licensed to practice 3 30 medicine and surgery in this state who is employed by or 31 represents a nonprofit health care service plan.
 - (7) One member who is a physician licensed to practice 33 medicine and surgery in this state who is employed by or 34 represents a health maintenance organization.
 - (8) One member who is a resident of this state who represents residents with health insurance who are consumers 2 of oncology services.
 - The members of the board shall annually elect one 4 member as chairperson and one as vice chairperson.
 - d. The board shall meet not less than four times per year 5 6 at the call of the chairperson or at the request of a majority of the board's members.
- e. The appointed members of the board shall be appointed 4 9 for terms of four years beginning and ending as provided in 4 10 section 69.19. A member of the board is eligible for The governor shall fill a vacancy for the 4 11 reappointment. 4 12 remainder of the unexpired term. An appointed member of the 4 13 board may be removed by the governor for misfeasance, 4 14 malfeasance, or willful neglect of duty or other cause after 4 15 notice and a public hearing unless the notice and hearing are
- 4 16 waived by the member in writing.
 4 17 f. A majority of the members of the board constitutes a 4 18 quorum. The affirmative vote of a majority of the members is 4 19 necessary for any action taken by the board. The majority 4 20 shall not include a member who has a conflict of interest and 4 21 a statement by a member of a conflict of interest is 22 conclusive for this purpose. A vacancy in the membership of 23 the board does not impair the right of a quorum to exercise 24 the rights and perform the duties of the board.
- g. The board has the power and duty to hold hearings and 26 issue adjudications of disputes referred to the board by the 27 commissioner of insurance involving third=party reimbursement 4 28 for routine patient care costs incurred in association with 4 29 approved cancer clinical trials, subject to review and appeal,

4 30 pursuant to chapter 17A.

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h. Members of the board shall not receive compensation for 4 32 the performance of their duties as members but each member 33 shall be paid necessary expenses incurred while engaged in the 4 34 performance of the duties of the board.

5. APPLICABILITY.

- This section applies to the following classes of a. third=party payment provider contracts or policies delivered, 3 issued for delivery, continued, or renewed in this state on or 4 after July 1, 2008:
- (1) Individual or group accident and sickness insurance 6 providing coverage on an expense=incurred basis.
- (2) An individual or group hospital or medical service 8 contract issued pursuant to chapter 509, 514, or 514A.
- (3) An individual or group health maintenance organization 10 contract regulated under chapter 514B.
- 5 11 (4) Any other entity engaged in the business of insurance, 5 12 risk transfer, or risk retention, which is subject to the 5 13 jurisdiction of the commissioner.
 - (5) A plan established pursuant to chapter 509A for public 15 employees.
- (6) An organized delivery system licensed by the director 5 17 of public health.
- This section shall not apply to accident=only, b. 19 specified disease, short=term hospital or medical, hospital 5 20 confinement indemnity, credit, dental, vision, Medicare 5 21 supplement, long=term care, basic hospital and 22 medical=surgical expense coverage as defined by the 5 23 commissioner, disability income insurance coverage, coverage 5 24 issued as a supplement to liability insurance, workers' 25 compensation or similar insurance, or automobile medical 26 payment insurance.

EXPLANATION

This bill requires health benefit coverage for cancer 29 treatment delivered pursuant to an approved cancer clinical 5 30 trial. The bill defines "approved cancer clinical trial" as a 31 scientific study of a new therapy for the treatment of cancer 32 in human beings that meets requirements specified in the bill 33 and consists of a scientific plan of treatment.

The bill requires that a policy or contract provide health 35 benefit coverage for routine patient care costs incurred for 1 cancer treatment in an approved cancer clinical trial to the 2 same extent that the policy or contract provides coverage for 3 treating any other sickness, injury, disease, or condition 4 covered under the policy or contract, if the insured has been 5 referred for such cancer treatment by two physicians who 6 specialize in oncology, and the cancer treatment is given pursuant to an approved cancer clinical trial as set forth in 8 the bill.

The bill also establishes the cancer clinical trial review 10 board in the department of public health, consisting of the 11 director of public health and eight additional members with 6 12 specified expertise, appointed by the governor and subject to 13 confirmation by the senate. The purpose of the board is to 14 hold hearings and issue adjudications of disputes referred to 6 15 the board by the commissioner of insurance involving 6 16 third=party reimbursement for routine patient care costs for 17 cancer treatment incurred in association with approved cancer 6 18 clinical trials, subject to review and appeal, pursuant to 6 19 Code chapter 17A.

6 The bill applies to specified classes of third-party 2.0 6 21 payment provider contracts or policies delivered, issued for 6 22 delivery, continued, or renewed in this state on or after July 6 23 1, 2008.

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