

# HOUSE BILL No. 4099

January 29, 2019, Introduced by Reps. Rendon, LaFave, Brann, Slagh, Warren, Calley, Ellison, Howell, Guerra, Yaroch, Coleman, Stone, Crawford, Wittenberg, Manoogian, Chirkun, Hope, Frederick, Allor, Schroeder and Love and referred to the Committee on Government Operations.

A bill to amend 1956 PA 218, entitled  
"The insurance code of 1956,"  
(MCL 500.100 to 500.8302) by adding section 3406u.

**THE PEOPLE OF THE STATE OF MICHIGAN ENACT:**

1           **SEC. 3406U. (1) A HEALTH INSURANCE POLICY DELIVERED, ISSUED**  
2           **FOR DELIVERY, OR RENEWED IN THIS STATE THAT PROVIDES COVERAGE FOR**  
3           **PRESCRIBED ORALLY ADMINISTERED ANTICANCER MEDICATIONS AND**  
4           **INTRAVENOUSLY ADMINISTERED OR INJECTED ANTICANCER MEDICATIONS MUST**  
5           **ENSURE BOTH OF THE FOLLOWING:**

6           **(A) THAT COST-SHARING REQUIREMENTS APPLICABLE TO PRESCRIBED**  
7           **ORALLY ADMINISTERED ANTICANCER MEDICATIONS ARE NO HIGHER THAN THE**  
8           **COST-SHARING REQUIREMENTS APPLIED TO INTRAVENOUSLY ADMINISTERED OR**  
9           **INJECTED ANTICANCER MEDICATIONS THAT ARE COVERED BY THE HEALTH**

1 INSURANCE POLICY.

2 (B) THAT TREATMENT LIMITATIONS APPLICABLE TO PRESCRIBED ORALLY  
3 ADMINISTERED ANTICANCER MEDICATIONS ARE NO MORE RESTRICTIVE THAN  
4 THE TREATMENT LIMITATIONS APPLIED TO INTRAVENOUSLY ADMINISTERED OR  
5 INJECTED ANTICANCER MEDICATIONS THAT ARE COVERED BY THE HEALTH  
6 INSURANCE POLICY.

7 (2) AN INSURER CANNOT ACHIEVE COMPLIANCE WITH THIS SECTION BY  
8 INCREASING COST-SHARING REQUIREMENTS, RECLASSIFYING BENEFITS WITH  
9 RESPECT TO ANTICANCER MEDICATIONS, OR IMPOSING MORE RESTRICTIVE  
10 TREATMENT LIMITATIONS ON PRESCRIBED ORALLY ADMINISTERED ANTICANCER  
11 MEDICATIONS OR INTRAVENOUSLY ADMINISTERED OR INJECTED ANTICANCER  
12 MEDICATIONS COVERED UNDER A HEALTH INSURANCE POLICY DESCRIBED IN  
13 SUBSECTION (1).

14 (3) AS USED IN THIS SECTION:

15 (A) "ANTICANCER MEDICATION" MEANS A MEDICATION USED TO KILL,  
16 SLOW, OR PREVENT THE GROWTH OF CANCEROUS CELLS.

17 (B) "COST-SHARING REQUIREMENT" MEANS DEDUCTIBLES, COPAYMENTS,  
18 COINSURANCE, OUT-OF-POCKET EXPENSES, AGGREGATE LIFETIME LIMITS, AND  
19 ANNUAL LIMITS.

20 (C) "TREATMENT LIMITATION" MEANS LIMITS ON THE FREQUENCY OF  
21 TREATMENT, DAYS OF COVERAGE, OR OTHER SIMILAR LIMITS ON THE SCOPE  
22 OR DURATION OF TREATMENT.

23 Enacting section 1. This amendatory act applies to health  
24 insurance policies delivered, issued for delivery, or renewed in  
25 this state on or after the effective date of this amendatory act.