

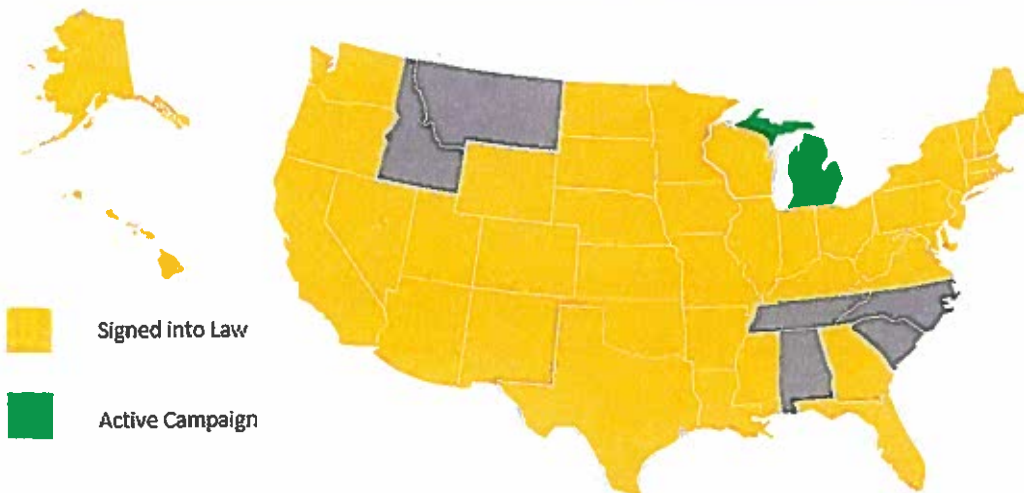


HB 4071 would ensure the out-of-pocket costs for oral and intravenous chemotherapy patients are similar. Oral drug therapy for cancer patients has increased sharply over the last few years, and the insurance benefit design has not kept pace.

According to departments of insurance in several states that have enacted fairness legislation, insurance premiums have not increased or, if they have, it's less than 1%.

This bill does not create a new insurance benefit. If a plan covers cancer treatment, that plan must apply the same rules to both oral and IV drugs. Some oral drugs may actually be cheaper than IV as the insurer does not have to pay for costs associated with administering the drug.

Support HB 4071 and Michigan Cancer Patients



**43 STATES
HAVE PASSED
ORAL
CHEMOTHERAPY
FAIRNESS
LAWS. IT IS TIME
MICHIGAN
ALSO PROTECT
CANCER
PATIENTS.**



fightcancer.org

For more information, please contact Molly Medenblik at molly.medenblik@cancer.org

State	Premium Impact	Number of Carriers	Percentage Covered ⁱ	State Population
California ⁱⁱ	.0005% increase	48	91%	38,332,521
Colorado ⁱⁱⁱ	Impact Unknown	17	91%	5,268,367
Connecticut ^{iv}	.2% increase	20	94%	3,596,080
District of Columbia ^v	.025% increase	4	96%	646,449
Illinois ^{vi}	No Impact	13	93%	12,882,135
Indiana ^{vii}	Less than .50 Per Member Per Month	7	90%	6,570,902
Kansas ^{viii}	No Impact	12	90%	2,893,957
Kentucky ^{ix}	.13-1.6% increase \$10.47-13.08 per year	2	94%	4,395,295
Massachusetts ^x	.008-.044% increase 0.04-.23 cents per month increase	16	97%	6,692,824
Oregon ^{xi}	No Impact	6	93%	3,930,065
Texas ^{xii}	No Impact	28	83%	26,448,193
Washington ^{xiii}	.2% increase for Regence Blue Cross Less than 1% for Premara Blue Cross	3	93%	6,971,406
Wisconsin ^{xiv}	Impact Unknown	12	94%	5,742,713

Source: U.S. Census Bureau. Population Without Health Insurance Coverage by State: 2015. ii Fitch, K., RN, M Ed, Iwasaki, K., FIAJ, MAAA, MBA, & Pyenson, B., FSA, MAAA. (2010). Parity for Oral and Intravenous/Injected Cancer Drugs (Rep.). New York, New York: Milliman. iii Riesberg, J. (2011, July 11). Inquiry about Experience with Oral Chemotherapy Legislation [Letter to The Honorable Glen Casada]. Denver, Colorado. iv Cook, N. B. (2012, July 2). Oral Chemotherapy [Letter to The Honorable Glen Casada]. Hartford, Connecticut. v Tanhehco, E. (2012, July 11). In Regards to your 6-22-2012 Letter to DC Commissioner White (DISB) [E-mail to G. Casada]. vi Boron, A. (2012, July 18). Public Act 97-0198, Illinois Cancer Drug Parity [Letter to The Honorable Glen Casada]. Chicago, Illinois. vii Harrison, L. P. (2012, July 25). [Letter to The Honorable Glen Casada]. Indianapolis, Indiana. viii Sheppard, L. (2012, July 16). Oral Chemotherapy Parity Legislation [E-mail to G. Casada]. ix Drennan, J. E. (2014). Financial Impact Statement (Issue brief). Duluth, Georgia: Optum. x Fitch, K., RN, MEd, Iwasaki, K., FIAJ, MAAA, MBA, & Pyenson, B., FSA, MAAA. (2010). Parity for Oral and Intravenous/Injected Cancer Drugs (Rep.). New York, New York: Milliman. xi Savage, L. (2012, July 23). Your Inquiry Regarding Oregon's Oral Anticancer Medication Parity Mandate [Letter to The Honorable Glen Casada]. Salem, Oregon. xii Brown, C. (2012, July 18). [Letter to The Honorable Glen Casada]. Austin, Texas. xiii Williams, B. (2012, July 2). [Letter to The Honorable Glen Casada]. Olympia, Washington. xiv Nickel, T. K. (2011, October 26). September 23, 2011 letter on AB 151 / SB 101 [Letter to The Honorable Alberta Darling; The Honorable Pat Strachota]. Madison, Wisconsin.