

HCS HB 192 -- HEALTH INSURANCE

SPONSOR: Holand (Luetkemeyer)

COMMITTEE ACTION: Voted "do pass" by the Committee on Health Care Policy by a vote of 11 to 1 with 2 present.

Current law requires health insurers to provide coverage to cancer patients for routine patient costs incurred as a result of drugs and devices used in clinical trials, even if those drugs and devices have not been approved by the U. S. Food and Drug Administration (FDA) for use in treating the patient's particular condition. This substitute would not require accident-only policies, specified disease policies, Medicare supplement policies, and other types of limited benefit health insurance policies to cover these costs.

FISCAL NOTE: Not available at time of printing.

PROPONENTS: Supporters say that the bill adds clarifying language which excludes limited benefit type insurance policies from covering routine patient costs incurred as a result of participating in a phase III or phase IV clinical cancer trial. If a patient develops an additional disease while participating in a clinical trial, expenses incurred as a result of the secondary illness would be covered.

Testifying for the bill were Representative Luetkemeyer; Missouri Association of Health Plans; Blue Cross Blue Shield of Missouri; United Healthcare; Group Health Plan and Coventry Health Plans of Kansas City; Golden Rule Insurance Company; American Cancer Society; and AFLAC.

OPPONENTS: There was no opposition voiced to the committee.

OTHERS: Others testifying on the bill say that a shift in health care costs would not occur if the bill is enacted. In addition, routine patient costs incurred as a result of having x-rays taken or contracting a secondary illness have not been covered for some patients.

Testifying as a technical witness was Siteman Cancer Center of St. Louis.

Joseph Deering, Legislative Analyst