Recent science has led to the availability of more oral therapies to treat different types of cancer. But some health insurance plans require patients to pay a greater share of the cost for these oral therapies than they would for intravenous (IV) (administered through a needle) therapies. Oral oncology parity laws are designed to remove this cost difference. Oral oncology parity laws require health insurance plans to cover oral anti-cancer medications at the same out-of-pocket costs as IV anti-cancer medications.

KEY POINTS
1. Today, more oral anti-cancer therapies are available, allowing more people to take their anti-cancer medications outside of the hospital or a doctor’s office
2. Oral oncology parity laws require health insurance plans to cover oral anti-cancer therapies at the same out-of-pocket costs as IV anti-cancer therapies
3. Many states have already passed oral parity laws and other states are considering similar laws

WHAT IS ORAL ONCOLOGY PARITY?
Some oral anti-cancer medications are not covered by insurance in the same way as IV anti-cancer therapies. Oral anti-cancer medications are usually covered as part of a health plan’s pharmacy benefit. This often results in high out-of-pocket costs through coinsurance (which requires patients to pay a percentage of the overall medication cost).

IV anti-cancer medications are typically covered under a health plan’s medical benefit. This often requires patients to pay only a small co-pay or no cost at all for the medication.

Oral oncology parity requires the same out-of-pocket costs for oral anti-cancer medications and IV anti-cancer medications.

WHAT DO ORAL ONCOLOGY PARITY LAWS DO?
Oral oncology parity laws are designed to remove the difference in patients’ out-of-pocket costs between oral and IV anti-cancer therapies. They require any health plan that covers “chemotherapy” treatment to cover both oral and IV chemotherapy at the same level—with patients’ out-of-pocket costs being the same no matter how their therapy is given.

WHO BENEFITS FROM THESE LAWS?
Oral oncology parity laws help ensure equal out-of-pocket patient costs for all forms of anti-cancer medications so that patients, together with their physicians, can choose the right therapy based on the risk and benefit profile instead of cost to the patient. As of 2009, it was estimated that up to 35% of the anti-cancer therapies being developed were oral therapies. These laws ensure that patients fighting cancer today—and those who will be diagnosed in the future—don’t have to pay more for oral anti-cancer medications.
Many states have already passed oral oncology parity laws and other states are considering similar laws. However, state laws can only impact certain health plans and do not apply to Medicare or Medicaid. Health plans covered under the federal Employee Retirement Income Security Act (ERISA) are also exempt.

In addition, a federal bill called the Cancer Drug Coverage Parity Act has been introduced in Congress. To track a bill through the US Congress, visit www.Congress.gov.

WHERE CAN I GO FOR MORE INFORMATION OR TO LEARN ABOUT THE LAW IN MY STATE?
Visit the State Patients Equal Access Coalition website at www.speac.myeloma.org for more information about the important role that oral oncology parity laws play, and to download state-specific fact sheets on all the existing state laws. For more information on efforts to pass a federal bill ensuring oral oncology parity, please visit www.peac.myeloma.org.

Information about these independent organizations is provided as an additional resource for obtaining information related to oral oncology parity laws. It does not indicate endorsement by Celgene Corporation of an organization or its communications.

Your healthcare team is your best source of information about cancer treatments.