



AMENDMENTS FOR HB 4071 (H-1) ORAL CHEMOTHERAPY PARITY

Amendment #1: Page 2, line 3 – change \$150.00 to **\$250.00**

Rationale: Increase the monthly allowable cost sharing for oral chemotherapy drugs from \$150 to \$250 per month.

Amendment #2: Amend page 2, line 21, after “limits” by inserting a new (4).

(4) This section does not apply to a qualifying health plan once/after the deductible is met for a health savings account to the extent necessary to preserve the enrollee's ability to claim tax-exempt contributions and withdrawals from the enrollee's health savings account under internal revenue service laws, regulations, and guidance.

Rationale: This is standard language that has been used in many other states to cap cost-sharing on services while carving out qualified High Deductible Health Plans (HDHP) to ensure that those with HDHP aren't violating federal law or paying a big tax bill after the fact. Because oral chemotherapy is not a preventative service under HHS rules, HDHP should be excluded.

Amendment #3: Page 2, new language inserted after subsection (4) by inserting a new (5)

(5) The manufacturers of orally administered anticancer medications and intravenously administered or injectable anticancer medications shall not increase these anticancer the price of the drug price more than the cumulative annual change in the prescription drug index of the medical care component of the United States Consumer Price Index.

Rationale: This would cap both oral chemotherapy drugs and intravenously administered injectables at a cost not to exceed the rate of inflation. If health plans must limit their copays for their drugs by inflation, drug manufacturers should limit the cost of their manufactured drugs by inflation too.

Amendment #4: Page 3, line 8 by deleting 2024 and inserting **2025**.

Rationale: Michigan Health Insurers have to file their rates for the upcoming year in May. Thus 2024 rates have already been filed.