The way we treat cancer is changing, with oral anti-cancer medications playing an increasingly important role. These targeted therapies—available in pill form—directly attack cancer cells, often with fewer side effects.

As of May 2015, 39 states and the District of Columbia have passed legislation to limit patient out-of-pocket costs for oral anti-cancer medications. To see which states have passed oral oncology laws, visit www.speac.myeloma.org.

**WHAT IS ORAL ONCOLOGY PARITY?**

Traditional anti-cancer medications were primarily administered intravenously and covered under a health plan’s medical benefit, often requiring patients to pay a minimal co-pay or no cost at all for the medication.

Oral anti-cancer medications are usually part of the health plan’s pharmacy benefit, often resulting in high, burdensome out-of-pocket costs through coinsurance (requiring patients to pay a percentage of the overall cost of the prescription drug).

This disparity negatively impacts patient adherence and forces physicians to make decisions based on outdated health plan benefit designs rather than what is best for the patient.

**HOW CAN MY STATE ACHIEVE ORAL ONCOLOGY PARITY?**

Lawmakers in your state should join the ranks of states like Indiana, New York and Arizona and pass legislation in 2015 that gives cancer patients access to the most effective treatments.

Oral oncology parity laws are intended to address the problem of inequitable coverage between oral and IV anti-cancer medications by requiring health plans to equalize a patient’s out-of-pocket costs between oral and IV therapies.

The laws do not mandate coverage of oral chemotherapy, but simply state that if a health plan covers “chemotherapy” treatment, the patients’ out-of-pocket costs must be the same, regardless of how the therapy is administered.
WHO BENEFITS FROM THESE LAWS?

In the 39 states and D.C. with these laws in place, patients in state-regulated health plans have access to these protections.

State laws can only impact certain health plans. These laws do not impact Medicare and Medicaid. Health plans covered under the federal ERISA law (usually large, multi-state health plans) are also exempt.

Oral oncology parity laws allow many patients and physicians to choose the right therapy that offers the most hope — without worrying about an outdated health plan benefit design that charges patients more simply because the drug they need is only available in pill form.

Oral anticancer medications are the wave of the future. It is estimated that 25-35% of the drugs in the oncology pipeline will only be available in pill form. These laws ensure that patients fighting cancer today—and those who will be diagnosed in the future—have access to the innovative therapies offering them the best chance at survival.

Where can I go for more information or to learn about the law in my state?
Visit the State Patients Equal Access Coalition (SPEAC) website at www.speac.myeloma.org for more information on the important role Oral Oncology Parity laws play and to download state-specific fact sheets on all the existing state laws.