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By: Senator Bromwell Introduced and read first time: January 20, 1999 Assigned to: Finance							
Committee Report: Favorable Senate action: Adopted Read second time: February 23, 1999							
CHAPTER							
AN ACT concerning							
Health Insurance - Medical Clinical Trials - Coverage							
FOR the purpose of requiring certain insurers, nonprofit health service plans, and health maintenance organizations to provide coverage under certain circumstances for certain patient cost incurred as a result of treatment being provided in a Phase I clinical trial for a life-threatening condition other than cancer; providing for the application of this Act; and generally relating to coverage for patient cost incurred as a result of a treatment being provided in accordance with a clinical trial. BY repealing and reenacting, with amendments, Article - Insurance Section 15-827 Annotated Code of Maryland (1997 Volume and 1998 Supplement) SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:							
7 Article - Insurance							
8 15-827.							
9 (a) (1) In this section the following words have the meanings indicated.							
0 (2) (i) "Cooperative group" means a formal network of facilities that 1 collaborate on research projects and have an established NIH-approved Peer Review 2 Program operating within the group.							

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1		(ii)	"Cooper	rative group" includes:
2			1.	the National Cancer Institute Clinical Cooperative Group
3	Oncology Program;		2.	the National Cancer Institute Community Clinical
5			3.	the AIDS Clinical Trials Group; and
6			4.	the Community Programs for Clinical Research in AIDS.
7	(3)	"FDA" ı	means th	e federal Food and Drug Administration.
	(4) holder or a covered of holder.			s a policyholder, subscriber, insured, or certificate cyholder, subscriber, insured, or certificate
13 14	the relationship of th	ederal Dep ne instituti t the respo	oartment on to the onsibilitie	assurance contract" means a contract between an of Health and Human Services that defines federal Department of Health and Human as of the institution and the procedures that thuman subjects.
16	(6)	"NIH" n	neans the	National Institutes of Health.
	(7) care service that is in member for purpose		a result	cost" means the cost of a medically necessary health of the treatment being provided to the al.
20		(ii)	"Patient	cost" does not include:
21			1.	the cost of an investigational drug or device;
	required to receive a clinical trial;	s a result	2. of the tre	the cost of nonhealth care services that a patient may be atment being provided for purposes of the
25 26	with the clinical tria	l; or	3.	costs associated with managing the research associated
27 28	plan, or contract for	noninvest	4. igational	costs that would not be covered under the patient's policy treatments.
29	(b) This se	ction appl	ies to:	
32		pharmace sis under	eutical be	profit health service plans that provide hospital, enefits to individuals or groups on an insurance policy or contract issued or

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	surgical, or p		utical ben	naintenance organizations that provide hospital, medical, neefits to individuals or groups under contracts that are				
4 5	(c) This section does not apply to a policy, plan, or contract paid for under Title XVIII or Title XIX of the Social Security Act.							
6 7	(d) patient cost t	(d) A policy, plan, or contract subject to this section shall provide coverage for atient cost to a member in a clinical trial, as a result of:						
8		(1)	treatmen	at provided for a life-threatening condition; or				
9		(2)	preventi	on, early detection, and treatment studies on cancer.				
10	(e)	The cov	erage unc	der subsection (d) of this section shall be required if:				
11 12	conducted in	(1) n a Phase	(i) I, Phase	the treatment is being provided or the studies are being II, Phase III, or Phase IV clinical trial for cancer; or				
13 14	III, or Phase	IV clinic	(ii) cal trial fo	the treatment is being provided in a PHASE I, Phase II, Phase or any other life-threatening condition;				
15		(2)	the treat	ment is being provided in a clinical trial approved by:				
16			(i)	one of the National Institutes of Health;				
17			(ii)	an NIH cooperative group or an NIH center;				
18			(iii)	the FDA in the form of an investigational new drug application;				
19			(iv)	the federal Department of Veterans Affairs; or				
				an institutional review board of an institution in the state ssurance contract approved by the Office of Protection ational Institutions of Health;				
	doing so by maintain ex			ity and personnel providing the treatment are capable of erience, training, and volume of patients treated to				
26 27	and	(4)	there is a	no clearly superior, noninvestigational treatment alternative;				
	expectation alternative.	(5) that the t		able clinical or preclinical data provide a reasonable will be at least as effective as the noninvestigational				
	[(f) The coverage under subsection (d) of this section may be provided on a case by case basis if the treatment is being provided in a Phase I clinical trial for any life-threatening condition other than cancer.]							

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1 (F) In conjunction with the provisions of subsection (d) of this section, a [(g)]2 policy, plan, or contract shall provide coverage for patient cost incurred for drugs and 3 devices that have been approved for sale by the FDA whether or not the FDA has 4 approved the drug or device for use in treating the patient's particular condition, to 5 the extent that the drugs or devices are not paid for by the manufacturer, distributor, 6 or provider of that drug or device. 7 (G) An entity seeking coverage for treatment in a clinical trial [(h)](1) 8 approved by an institutional review board under subsection (e)(2)(v) of this section 9 shall post electronically and keep up-to-date a list of the clinical trials meeting the 10 requirements of subsections (d) and (e) of this section. 11 (2) The list shall include, for each clinical trial: 12 (i) the phase for which the trial is approved; 13 (ii) the entity approving the trial; 14 whether the trial is for treatment of cancer or another (iii) 15 life-threatening disease and, if not cancer, the particular disease; and the estimated number of participants in the trial. 16 (iv) 17 This section may not be construed to affect compliance with § 15-804 18 of this subtitle regarding coverage for off-label use of drugs. SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all 19 20 new policies, contracts, or health benefit plans issued or delivered in the State on or 21 after July 1, 1999, and to the renewal of all policies, contracts, or health benefit plans 22 in effect before that date, except that any policy, contract, or health benefit plan in 23 effect before July 1, 1999, shall comply with the provisions of this Act no later than 24 January 1, 2000. 25 SECTION 3. AND BE IT FURTHER ENACTED, That, subject to Section 2 of 26 this Act, this Act shall take effect July 1, 1999.