

# **FISCAL NOTE**

LLS 18-0522 Date: February 16, 2018 **Drafting Number:** 

Bill Status: House Public Health Care and **Prime Sponsors:** Rep. Michaelson Jenet Sen. Crowder

**Human Services** 

Fiscal Analyst: Bill Zepernick | 303-866-4777

Bill.Zepernick@state.co.us

STAGE FOUR ADVANCED METASTATIC CANCER STEP THERAPY **Bill Topic:** 

Summary of □ State Revenue TABOR Refund

 State Expenditure (minimal, potential) □ Local Government (potential) **Fiscal Impact:** 

□ State Transfer □ Statutory Public Entity

This bill prohibits health insurers from requiring step therapy during the treatment of stage four metastatic cancer. It will minimally increase state workload, and potentially increase state and local government expenditures on employee health

insurance on an ongoing basis.

**Appropriation Summary:** 

No appropriation is required.

**Fiscal Note** Status:

The fiscal note reflects the introduced bill.

# **Summary of Legislation**

The bill prohibits health insurers from requiring that a person undergo step therapy prior to receiving a federally approved drug for stage four metastatic cancer if the use of the drug is consistent with best practices for treatment of the cancer. Step therapy is a protocol under which a health insurer first requires that a certain drug or sequence of drugs be tried before coverage is provided for the drug that was recommended by a health care provider. Under current law, health insurers are only prohibited from requiring step therapy in instances where a prescription drug mandated under a step therapy protocol has previously been tried by the covered person but was discontinued due to lack of efficacy or adverse event.

# **State Expenditures**

This bill may affect state workload and expenditures in two ways. First, the Division of Insurance in the Department of Regulatory Agencies will have a one-time increase in workload in FY 2018-19 to incorporate the changes in the bill into its policies and to communicate the changes to insurance carriers. This work is expected to require a minimal amount of staff time.

Second, to the extent that the prohibition on step therapy results in more expensive prescription drugs being paid for by health benefit plans, state agencies' costs for employee health insurance may increase. Because state employee health insurance contributions are based upon prevailing market rates, with costs shared between the employer and employee, this bill is not expected to affect the state's share of employee health insurance premiums until FY 2019-20. Because insurance rates are influenced by a number of variables, the exact effect of this bill cannot be determined. Any increase caused by the bill will be addressed through the total compensation analysis included in the annual budget process.

## **Local Government**

Similar to the state impact discussed above, local governments offering health insurance coverage to their employees may experience an increase in costs. To the extent that the prohibition on step therapy increases insurance premiums, local government costs for employee health insurance may increase. Health insurance premiums depend on a variety of factors and an exact estimate of any potential increase cannot be determined.

### **Effective Date**

The bill takes effect January 1, 2019, assuming no referendum petition is filed. It applies to health benefit plans issued, amended, or renewed on or after this date.

### **State and Local Government Contacts**

Health Care Policy and Financing Law Regulatory Agencies Information Technology Personnel