



Improving Lives • Finding the Cure

## Delaware Cancer Treatment Access Coalition

### Increasing Access to Chemotherapy for All Delaware Cancer Patients



#### Issue Background

Intravenous/infused anti-cancer medications are typically covered under a health plan's medical benefit. In this situation, patients are usually required to pay an office visit co-payment usually around \$20-\$30 at the time of the visit. Orally-administered anti-cancer medications are covered under a health plan's pharmacy benefit. Under the pharmacy benefit, oral anticancer medications require patients to pay higher co-payments, which can sometimes be a percentage of the drug's cost (e.g. 25-30% of total cost--which can be thousands of dollars each month). This disparity restricts patient access to life-saving oral cancer therapies. When an oral treatment is determined most effective, patients are sometimes forced to make their treatment choice based on cost, rather than efficacy. Whether to incur a large financial burden for an oral anti-cancer medication can be a life or death decision.

#### Quick Facts:

- **10% of cancer patients failed to fill their initial prescriptions** for oral anti-cancer medications due to high out-of-pocket costs, according to a new study published in the Journal of Oncology Practice and American Journal of Managed Care.
- For many oral anti-cancer medications, there are no intravenous substitutes—so patients have no choice but to pay much more for their treatment.
- Use of oral anti-cancer medications usually results in fewer hospital visits, which means less staff and administrative costs and fewer risks of infection, illness and complications, reducing the overall cost of healthcare.
- Every cancer patient should have access to the most appropriate treatments recommended by their physicians. Patients should not be subject to cost discrimination based on the type of therapy provided or the mechanism for the delivery of that therapy.
- Oral anti-cancer medications (e.g. pills) have become the standard of care in the treatment of many types of cancers including multiple myeloma and chronic myelogenous leukemia (CML) as well as breast, lung and kidney cancers and account for approximately 25-35 percent of the drugs currently being developed to treat cancer.
- Patients taking oral anti-cancer medications often enjoy a continued quality of life with fewer traditional chemotherapy side effects such as hair loss. And, are able to receive treatment in the comfort of their home allowing them to continue to work.
- To date, 15 states and the District of Columbia have enacted oral chemotherapy access legislation including New Jersey, New York, Illinois, Minnesota, New Mexico, and Texas.



"Education, Leadership, Advocacy"



The members of the Delaware Cancer Treatment Access Coalition believe that every cancer patient should have access to the most appropriate treatments recommended by their physicians and should not suffer from cost discrimination based on the type of therapy provided or the mechanism for the delivery of that therapy.



We support legislation introduced by introduced by a bi-partisan group of legislators (Reps. Deborah Hudson, Ruth Briggs King and Bryon Short and Senators Patricia Blevins and Liane Sorenson). This bill would require health insurance plans in Delaware that cover cancer treatments to provide coverage for orally administered anti-cancer medications on a basis no less favorable than coverage for intravenously administered or injected anti-cancer medications.



- The International Myeloma Foundation • Delaware Breast Cancer Coalition • Cancer Support Community Delaware (formerly, The Wellness Community) • American Cancer Society • Susan G. Komen for the Cure® Advocacy Alliance • Leukemia & Lymphoma Society • International Cancer Advocacy Network • National Patient Advocate Foundation • Delaware Diamond Chapter of the Oncology Nursing Society • Community Oncology Alliance • The Hospice & Palliative Care Network of Delaware