



## Tending the Legislative Garden

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by Christian Downs

**T**he legislative process is like gardening. In the fall seeds are carefully planted. Throughout the winter they must be protected from foragers. Hopefully in the spring, they bloom into something resembling the picture on the seed packet.

Legislation is much the same. In the fall, ACCC carefully plans which bills to support and where. Over the winter we try to protect those bills from harmful changes, with the hope that in the spring the legislature passes something that looks like what we proposed in the fall.

It's spring, so let's take a look at the legislative garden.

### READY TO BLOOM

**Kansas.** Senate Bill (SB) 108 was presented to the governor on April 16. If signed, this law would prohibit insurance companies and health maintenance organizations that provide coverage for prescription drugs from excluding coverage of a prescription drug for cancer treatment on the grounds that the drug has not been approved by the Food and Drug Administration for a particular indication. The drug being prescribed for off-label use would be recognized for treatment if the indication appears in one of the standard reference compendia or in widely accepted peer-reviewed medical literature. SB 108 was supported by the American Cancer Society and the Kansas Medical Society.

**Nevada.** The Nevada Senate has passed a similar off-label bill. SB 56 now sits in the House and should be assigned to a committee within the next several weeks. The Nevada Oncology Society, along with the American Cancer Society, has been a major supporter of this bill.

### NEED WATER, SUNLIGHT, AND TIME

**Illinois.** The Illinois Medical Oncology Society has been working on a bill that would require insurers in the state to pay for the routine patient care costs of clinical trials. House Bill (HB) 1622, introduced by Reps. Madigan and Currie, passed the House overwhelmingly and now sits in the Senate Insurance and Pensions Committee. At press time, negotiations were taking place between all interested parties.

**New Hampshire.** On February 11, 1999, Sen. Katherine Wheeler introduced SB 167 requiring insurers to cover the off-label use of drugs in medically appropriate situations. A hearing was held on April 19, and the bill was reported to the Senate floor. The state oncology society has worked closely with other organizations and interested parties to move this bill forward.

**Federal (APCs).** Rep. Gene Green (D-Tex.) has introduced House Resolution 1090, the Medicare Full Access to Cancer Treatment Act of 1999. This legislation would direct HCFA to carve out chemotherapy and supportive care drugs from the Ambulatory Payment Classifications (APCs) proposal and reimburse them under the current methodology. On March 11, Rep Green's bill was assigned to both the House Commerce and House Ways and Means Committees. While the bill currently has more than twenty-five sponsors, ACCC is asking its membership to write their representatives in Congress and ask them to co-sponsor the bill. You can find your congressperson's address at [www.house.gov](http://www.house.gov) or by calling the Capitol at (202) 225-3121.

**Federal (Cash Basis of Accounting).** Rep. Donald Manzullo

(R-Ill.) has introduced the Accounting Fairness for Physicians and Dentists Act of 1999, which would allow physicians and dentists to use the cash basis of accounting for income tax purposes. Over the past few years, the Internal Revenue Service has forced oncologists who maintain an inventory of chemotherapy drugs to use the accrual accounting method rather than the cash basis used by most physicians. Rep. Manzullo's bill, HR 1004, has been referred to the Committee on Ways and Means.

### WEEDS

**Federal (Drug Payment at the Federal Supply Schedule).** Rep. Thomas Allen (D-Maine) has introduced HR 664, the Prescription Drug Fairness for Seniors Act of 1999. This bill would require manufacturers to make chemotherapy drugs available to Medicare beneficiaries at the lowest price paid for the covered outpatient drug by any agency or department of the United States.

This bill would allow Medicare to reimburse oncologists in some cases at less than acquisition cost and almost always below 95 percent of average wholesale price (AWP). If enacted, these proposals could seriously threaten the delivery of cancer therapy in the office setting. Rep. Allen's bill is currently in both the House Ways and Means and Commerce Committees. Sen. Kennedy (D-Mass.) just recently introduced a companion bill in the Senate.

ACCC will continue to stay abreast of these issues and report to its membership and the oncology community on these legislative matters of vital interest to patients with cancer. ■