STATE OF CONNECTICUT

INSURANCE DEPARTMENT

Bulletin HC-58
November 30, 2001

TO: ALL HEALTH CARE CENTERS AND INSURERS LICENSED TO WRITE ACCIDENT AND HEALTH INSURANCE

RE: HEALTH INSURANCE COVERAGE FOR ROUTINE CARE ASSOCIATED WITH CANCER CLINICAL TRIALS

The purpose of this bulletin is to provide guidance to carriers regarding filing requirements under Public Act 01-171 for coverage of routine care associated with cancer clinical trials. This bulletin also provides the form that carriers must accept for requests for coverage for routine care associated with cancer clinical trials.

Section 7 of Public Act 01-171 requires insurers and health care centers with coverage policies for care in cancer clinical trials to submit such policies to the Insurance Department for evaluation and approval. The Department is required to certify that such coverage policies are substantially equivalent to the requirements set forth in sections 1 through 7 of the Public Act.

A coverage policy of a carrier includes but is not limited to the following:

- Determination that services constitute a cancer clinical trial.
- Eligibility requirements for persons seeking coverage for a cancer clinical trial.
- Definition of routine patient care costs associated with cancer clinical trials.
- Any terms, conditions, exclusions and limitations on routine care associated with cancer clinical trials.
- Procedure to request coverage for routine care costs associated with cancer clinical trials.
- Grievance and Appeal process.

The Insurance Department has developed a form that must be signed by an officer of the company certifying that existing coverage policies for care in cancer clinical trials are substantially equivalent to the requirements of sections 1 to 7. This certification must be completed and returned to the Insurance Department no later than December 31, 2001 along with the coverage policy. Any changes to an existing coverage policy must be submitted along with a revised certification for approval prior to use.

The filing should highlight items where the carrier's coverage plan deviates from the requirements set forth in the Public Act.

Each carrier that uses a coverage policy must submit to the Insurance Department by January 1, 2003 and annually thereafter that there have been no changes in the policy.

Susan F. Cogswell

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Insurance Commissioner

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