



Fred Hutchinson Cancer Research Center
UW Medicine
Seattle Children's

August 20, 2014

The Honorable Mike Kreidler, Commissioner
Office of the Insurance Commissioner
P.O. Box 40255
Olympia, WA 98504-0255

Sent via email to RulesCoordinator@oic.wa.gov

RE: Comments on 2016 network access rulemaking

Dear Commissioner Kreidler,

Seattle Cancer Care Alliance (SCCA) appreciates the opportunity to submit comments regarding the provider network rulemaking for 2016.

We have serious concerns about the 2015 rule as adopted because we believe it does not go far enough to ensure that patients will have access to all covered services within their plan's network. As we have stated previously, it is critically important that the rules ensure inclusion of an NCI-designated comprehensive cancer center within their networks because such facilities are the only providers of certain life-saving therapies. For example, SCCA is the only facility in the state of Washington that performs allogeneic bone marrow/stem cell transplantation, which is most commonly used in the treatment of leukemia and lymphoma. Even people who have not found a matched donor may receive treatment here, and nowhere else in the state, using a cord blood transplant or a haploidentical transplant.

We appreciate the language in the December 2013 exposure draft (WAC 284-43-251) which emphasizes access to participating (contracted) providers for covered services. Merely providing access to out-of-network providers and facilities at in-network benefit levels leaves open the possibility that patients could be subject to higher out-of-pocket costs, as the consumer protection provisions in participating provider contracts would be absent.

Issuers should be prohibited from avoiding risk by applying criteria that may discriminate against providers or facilities that specialize in the treatment of high-risk patients. We support the language that was included in the December exposure draft (WAC 284-43-310).

825 Eastlake Avenue E., P.O. Box 19023, Seattle, WA 98109-1023, www.seattlecca.org

**FRED HUTCHINSON
CANCER RESEARCH CENTER**
A LIFE OF SCIENCE

UW Medicine

 **Seattle Children's**
HOSPITAL • RESEARCH • FOUNDATION

 *Ten years. Thousands of lives saved.*

Numerous patient advocacy groups, major healthcare purchasers and provider organizations agree that to ensure that patients have access to the expertise needed to accurately diagnose and appropriately treat their cancer, benefit plans should include access to an NCI-designated comprehensive cancer center as network providers.

As one example, the National Business Group on Health is a coalition of Fortune 500 companies and large public sector employers devoted exclusively to representing large employers' perspective on health policy issues. Its members collectively insure more than 55 million U.S. workers, retirees and their families. The Business Group fosters the development of a safe, high quality health care delivery system and treatments based on scientific evidence of effectiveness. The Business Group, in concert with the National Comprehensive Cancer Network (NCCN, a not-for-profit alliance of 23 of the world's leading cancer centers) has published An Employer's Guide to Cancer Treatment & Prevention as a resource for employers on evidence-based benefits and plan design. Among the guide's recommendations:

- **"Benefit plan should include access, within the available provider network, to a wide range of adult and pediatric cancer care providers**, including medical oncologists, hematologists, pediatric hematologist-oncologists, radiation oncologists, surgeons who specialize in cancer, palliative care specialists, rehabilitation specialists, pathologists and other specialists. Also included are providers in the community setting and in large, academic cancer centers, **such as National Cancer Institute (NCI)-designated Comprehensive Cancer Centers and Cancer Centers**, which can be found at <http://cancercenters.cancer.gov/>."
- "An estimated 15% of individuals have cancers that are uncommon, complex, difficult to diagnose and/or require complex medical or surgical interventions. These include subsets of common cancers as well as complex cancers. While most cancers can be treated effectively in the community setting, individuals with these more complex cancers may benefit from or require access to expertise that is only available at large, academic cancer centers. These individuals should have access to physicians with the needed expertise as well as cancer centers **within their health plan network**. In addition, individuals should not be penalized by having to pay a greater share of costs for those services."

Thank you for your consideration of our comments. Please contact me at 206-288-1060 if you have questions.

Sincerely,



Jonathan M. Tingstad, CPA
Vice President and Chief Financial Officer