

Bill Summary

Assembly Bill (AB) 1682 would require coverage of scalp cooling for patients undergoing chemotherapy. Scalp cooling is defined as the use of FDA-cleared devices/treatments before, during, or after chemotherapy treatment to reduce chemotherapy-induced alopecia.

Cost-sharing could not be more than that of other oncology support services.

Medical Effectiveness

Strong evidence that FDA-cleared scalp cooling devices effectively reduce chemotherapy induced alopecia.

Strong evidence that scalp cooling does not raise risk of scalp metastasis

Some evidence that scalp cooling devices do not improve quality of life measures.

Insurance Subject to the Mandate

All 22.8 million Californians enrolled in state-regulated health insurance would have insurance subject to AB 1682.

- CDI and DMHC-Regulated (Commercial and CalPERS)
- Medi-Cal (DMHC-Regulated)
- Federally-Regulated (Medicare, self-insured, etc.)

California Health Benefits Review Program (CHBRP), California Department of Insurance (CDI), California Department of Managed Health Care (DMHC), Food and Drug Administration (FDA)

Context and Benefit Coverage

Scalp cooling is the process of cooling the scalp before, during, and after chemotherapy infusion to prevent or reduce hair loss resulting from use of certain drugs used to treat cancer.

At baseline, 47% of enrollees in state-regulated plans and policies have coverage for scalp cooling.



3 FDA-cleared scalp cooling devices would be covered:

- DigniCap
- Paxman
- Amma

Utilization and Cost Impact

Postmandate: 680 more enrollees would use scalp cooling

- 580 gain coverage postmandate
- 90 with baseline coverage learn about the benefit



-\$4,000 to -\$4,800*
in enrollee expenses for users already using scalp cooling



+\$180 to +\$1,010*
in out-of-pocket expenses for new scalp cooling users



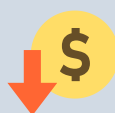
+\$4,010,000 in total annual premiums

**among commercial/CalPERS, with variation by market segment*

Long-Term Impacts



As coverage becomes established and scalp cooling becomes routine, utilization may increase.



Increase demand could exert downward pressure on device and supply costs.

