MALCOLM AUGUSTINE Legislative District 47 Prince George's County

Finance Committee

Energy and Public Utilities Subcommittee

Senate Chair, Joint Committee on the Management of Public Funds

February 26, 2020

The Honorable Delores G. Kelley Chair, Senate Finance Committee 3 East Miller Senate Office Building Annapolis, MD 21401

<u>SUPPORT</u> <u>SB 661 Health Insurance – Prostate Cancer Screening – Prohibiting Cost Sharing</u>

Dear Chairman Kelley:

Thank you for presiding over today's hearing regarding SB 661, a bill I am proud to sponsor. SB 661 would prohibit burdensome and unnecessary cost-sharing for prostate cancer screening. When caught early, prostate cancer has a likelihood of survival, which is why it's crucial to make disease screening accessible and affordable.

I'm proud that Maryland has a current law that requires insurers to cover prostatespecific-antigen (PSA) screening tests. This simple blood test can detect the presence of prostate cancer in the body. However, insurers may still apply cost-sharing to PSAs in the form of copayments, deductibles, and coinsurance to patients. I am asking that members of this esteemed legislative body consider prohibiting any form of cost-sharing on PSA screenings, to save the lives of men across this fine state.

This year in Maryland, prostate cancer will be the most commonly diagnosed cancer among men, and is second in overall cancer diagnoses only compared to breast cancer in women in the state. Prostate cancer is similar genetically to breast cancer and has nearly the same incidence rates for women as prostate cancer for men. Currently, through an act of Congress, there is no cost-sharing for mammograms. Also, through the ACA, there is no cost-sharing for cervical cancer screenings. Given the similarities of these diseases in prevalence and scientific makeup, it would only be fair to prohibit cost-sharing for PSA tests. This would eliminate the cost burden for men to receive the test, just as women do not have a cost burden for mammograms and cervical cancer screenings.

In 2019, Maryland had the eighth-highest prostate cancer incidence rate in the country. This may be in part due to the high African American male population in this state African American men are at an increased risk for developing prostate cancer over white men and other men of color. One in six African American men will develop



Miller Senate Office Building 11 Bladen Street, Suite 3 East Annapolis, Maryland 21401 410-841-3745 · 301-858-3745 800-492-7122 Ext. 3745 Fax 410-841-3387 · 301-858-3387 Malcolm.Augustine@senate.state.md.us

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prostate cancer in his lifetime. African American men are 1.8 times more likely to be diagnosed with—and 2.2 times more likely to die from—prostate cancer than white men. African American men are also slightly more likely than white men to be diagnosed with advanced disease. Prohibiting cost-sharing for PSA screening can potentially alter these statistics, and help African American men catch the disease early, and beat it.

It's especially important to make screening for this awful disease accessible and affordable since prostate cancer deaths are on the rise. New reporting from the American Cancer Society shows that in 2020, the number of men who will die from prostate cancer will hit a record high over the last two decades, with an increase of 5 percent since just last year. When caught early, prostate cancer has a 99 percent chance of survival; this is three times higher than when prostate cancer is found in an advanced stage, which has only a 30 percent rate of survival. By making the PSA test accessible and affordable, more Maryland men can have their lives saved from cancer.

Removing barriers to the PSA screening test and diagnosing prostate cancer at an earlier stage is much more cost-effective than treating late-stage prostate cancer. We are all here today because we care about the lives and wellbeing of Maryland citizens. I encourage you to consider the lifesaving and life changing impact SB 661 could have on the men of Maryland.

Thank you for the opportunity to provide testimony on SB 661. I urge your support of SB 661.

Sincerely,

Senator Malcolm Augustine Democrat, District 47, Prince George's County