

**MRS Letter of Support SB938.pdf**

Uploaded by: Gerard Evans

Position: FAV



February 29<sup>th</sup>, 2024

Senator Pamela Beidle, Chair  
Senate Finance Committee  
3 East, Miller Senate Office Building  
Annapolis, MD 21401

**Letter of Support for Senate Bill 938 – Maryland Department of Health – Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention**

Dear Chair Beidle:

On behalf of the Maryland Radiological Society we would like to urge our strong support of Senate Bill 938- Maryland Department of Health – Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention, sponsored by Senator Malcom Augustine.

We would also like to extend our gratitude to Senator Augustine for his leadership on this important issue.

The Maryland Radiological Society is the Maryland state chapter of the American College of Radiology, with a membership of over 500 radiologists, radiation oncologists and radiations physicists in the State of Maryland whose mission is to advance the science of radiology, improve radiological services, and maintain high levels of medical and ethical standards in the practice of radiology.

The passage of SB 938 is a key step in furthering Maryland’s goals of reducing health care disparities and to ensuring that all Marylanders have access to information that can save lives. The implementation of this bill would ensure the Department of Health embark on an education campaign to target those communities disproportionately impacted by prostate, breast and lung cancer. This program would not only educate and inform, but also promote early detection and screening initiatives and provide information to individuals about legislation passed that reduces cost barriers to these prevention services.

On behalf of the members of the Maryland Radiological Society we thank you for your consideration of Senate Bill 938 and urge your favorable support of this critical piece of legislation.

Sincerely,

Lisa A. Mullen, MD, FACR, FSBI  
President, Maryland Radiological Society

# **SB938 - Testimony.pdf**

Uploaded by: Malcolm Augustine

Position: FAV

MALCOLM AUGUSTINE  
*Legislative District 47*  
Prince George's County

PRESIDENT PRO TEMPORE

Executive Nominations Committee

Education, Energy and the  
Environment Committee



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THE SENATE OF MARYLAND  
ANNAPOLIS, MARYLAND 21401

March 1, 2024

**Senate Bill 938 - Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention**

Dear Colleagues,

I am pleased to present **Senate Bill 938 - Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention**, which addresses the persistent health disparities impacting communities disproportionately affected by prostate, lung, and breast cancer in Maryland.

As we are all aware, cancer continues to be a significant public health concern, with breast cancer ranking as the most diagnosed cancer in Maryland in 2017. Prostate cancer follows as the second most diagnosed, and lung cancer stands as the leading cause of cancer-related deaths in the state, with breast cancer being the third leading cause of cancer death. Senate Bill 938 is a vital initiative aimed at developing and implementing a comprehensive public education campaign to address the factors contributing to health disparities in communities impacted by these cancers. This bill recognizes the multifaceted nature of these disparities, considering elements such as poverty, socioeconomic status, cultural beliefs, social injustice, and racial bias.

Public education campaigns have proven instrumental in dispelling myths surrounding cancer and promoting knowledge that can lead to more positive outcomes. By providing information on the onset, types, and multifactorial issues related to prostate, lung, and breast cancer, we can empower communities to make informed decisions about their health.

The testimony of Dr. Arthur Burnett from Johns Hopkins University emphasizes the disproportionate impact of prostate cancer on Black men. A public education campaign, as proposed by this legislation, would enhance access to comprehensive evaluations and consultations, ultimately benefiting populations disproportionately affected by this condition.

The American Lung Association's insights on lung cancer in Maryland underscore the need for increased awareness and equitable distribution of information. Senate Bill 938 aligns with the Association's call to action, recognizing that Maryland ranks 36th in the nation for lung cancer screening. The bill seeks to improve these statistics, ensuring that all communities have access to vital information and resources.

MALCOLM AUGUSTINE  
*Legislative District 47*  
Prince George's County

PRESIDENT PRO TEMPORE

Executive Nominations Committee

Education, Energy and the  
Environment Committee



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THE SENATE OF MARYLAND  
ANNAPOLIS, MARYLAND 21401

Breast cancer, particularly affecting African American women as the second leading cause of cancer, requires focused attention. Public education campaigns can bridge knowledge gaps, especially regarding the elevated risks associated with life stressors, diabetes, obesity, heart disease, and breastfeeding disparities. Senate Bill 938 is a proactive step toward addressing these issues. A well-executed public campaign allows for collaboration among various agencies, including health providers, social service organizations, and community groups. This collaborative effort can bring together a wealth of resources, making information, programs, and support accessible to underserved populations.

Senate Bill 938 is a commendable effort to address the complexities surrounding prostate, lung, and breast cancer disparities in Maryland. The proposed public education campaign has the potential to save lives, enhance access to crucial resources, and improve overall outcomes for individuals facing these challenging diagnoses.

Thank you for your attention to this critical matter. I urge the committee to give a **favorable** report for **Senate Bill 938 - Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention**.

Sincerely,

A handwritten signature in cursive script that reads "Malcolm Augustine".

Senator Malcolm Augustine

# **RadNet response SB938 breast lung prostate educati**

Uploaded by: Michael Mabry

Position: FAV



Leading Radiology Forward  
10461 Mill Run Circle, Suite 1020  
Owings Mills, MD 21117

TO: The Honorable Pamela Beidle, Chair  
The Honorable Katherine Klausmeier, Vice Chair  
Members, Senate Finance Committee

FROM: Steve Forthuber, President Eastern Operations

DATE: February 29, 2024

RE: **SUPPORT:** Senate Bill (SB) 938 -- *Maryland Department of Health – Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention*

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RadNet leads the nation in outpatient diagnostic imaging services with nearly 400 centers in eight states. RadNet has a major presence in Maryland and our Eastern Operations are headquartered in Baltimore. You may know us locally as Advanced Radiology, Community Radiology Associates, and American Radiology Associates with over 60 imaging centers throughout the state. RadNet is the largest provider of screening mammography and low-dose CT screenings for lung cancer in Maryland. We are an innovator in MRI-based screening for prostate cancer.

SB 938 would require the Maryland Department of Health to develop and implement a public education campaign on prostate, lung, and breast cancer prevention that targets communities disproportionately impacted by prostate, lung, and breast cancer.

An estimated 3,500 Marylanders die from lung, breast, and prostate cancer each year. Yet, screening exists for all of these cancers and imaging can detect them at their earliest stage when more treatment options are available and outcomes are better. Breast, lung, and prostate cancers affect the African-American community disproportionately. Cancer screening rates are lower among racial and ethnic minorities. As a result, cancers are detected in later stages leading to worse outcomes.

No Marylander should be left behind in the fight against breast, lung, and prostate cancer. A public education campaign targeting communities disproportionately affected by these cancers as proposed by SB 938 is an important first step toward cancer health equity. As community-based providers on the front-line of cancer, our mission is to ensure that everyone in Maryland has ready, equitable, and affordable access to state-of-the-art imaging that will detect and diagnose breast, lung, and prostate cancers at their earliest stage. This dedication has allowed RadNet to close the breast cancer screening compliance gap between African-American and White women.

RadNet appreciates the opportunity to provide this statement before Senate Finance Committee.

# **SB0938 Testimony.pdf**

Uploaded by: Sarah Paul

Position: FAV





## **Statement of Maryland Rural Health Association (MRHA)**

To the Senate Finance Committee

Chair: Senator Pamela Beidle

February 29, 2024

### **Senate Bill 0938: Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention**

#### **POSITION: SUPPORT**

*Chair Beidle, Vice Chair Klausmeier, and members of the committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of Senate Bill 0938: Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention*

*Claiming over 600,000 lives in 2021, cancer is the second leading cause of death in the United States. There are several factors that contribute to the prognostics of cancer, some including the type, time of diagnosis, and stage of progression. Depending on the location of initial development, different cancers carry different levels of mortality. In the United States, lung cancer is the most fatal type of cancer in both men and women. Breast and prostate cancer are the second most fatal cancers for women and men, respectively. Risk factors (physical or behavioral) can increase the chances of one developing a disease. Modifiable risk factors are ones that an individual has control over, such as diet, exercise, smoking, etc. Non-modifiable factors are ones that we cannot change; this includes age, race/ethnicity, or sex. Based on such risk factors, there is an evident disparity among marginalized and minority groups. Taking a closer look at modifiable risk factors, many cancers can be prevented if one abstains from smoking and heavy drinking, exercises regularly, and has a healthy diet. Per the data provided by the Centers for Disease Control and Prevention, the prevalence of smoking, heavy drinking, and obesity is higher among Black communities (2023). For non-modifiable risk factors, race/ethnicity is arguably the most influential on susceptibility of disease. Black people are more likely than white people to not only develop but also die from prostate and lung cancer. They have a lower chance of survivability 5 years after initiation of treatment and are less likely to be diagnosed early. Breast cancer may be more common in white women, but Black women are still more likely to die from it (CDC, 2023). For those living in rural areas, the incidence of cancer may be lower when compared to urban areas, but the mortality rate is higher, meaning the number of rural residents who do develop cancer are much more likely to die than those who live in urban areas (Henley, 2017). The best intervention used for reducing death by cancer is through early diagnosis and education. Public education is a primary level of prevention that empowers the community to make informed decisions about their health and helps to lower morbidity and mortality within our communities. With the enactment of Senate Bill 0938, Maryland residents who are at a higher risk for developing lung, breast, or prostate cancer will have the opportunity to receive proper education on how to reduce their risk for developing cancer. With the many benefits Senate Bill 0938 brings to rural Maryland communities, the Maryland Rural Health Association supports the passing of this bill.*

*On behalf of the Maryland Rural Health Association,  
Jonathan Dayton, MS, NREMT, CNE, Executive Director*

[jdayton@mdruralhealth.org](mailto:jdayton@mdruralhealth.org)

Centers for Disease Control and Prevention. (2023). *African American people and cancer*. <https://www.cdc.gov/cancer/health-equity/groups/african-american.htm>

Centers for Disease Control and Prevention. (2024). *Leading causes of death*. <https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm>

Henley, S. J., Anderson, R. N., Thomas, C. C., Masetti, M., Peaker, B., & Richardson, L. C. (2017). Invasive cancer incidence, 2004–2013, and deaths, 2006–2015, in nonmetropolitan and metropolitan counties – United States. *Centers for Disease Control and Prevention*. 66(14), 1–13. <https://www.cdc.gov/mmwr/volumes/66/ss/ss6614a1.htm#suggestedcitation>

**\_LBCMD Priority Bill - Support Letter - SB 938.doc**

Uploaded by: Ufuoma Agarin

Position: FAV



# LEGISLATIVE BLACK CAUCUS OF MARYLAND, INC.

The Maryland House of Delegates, 6 Bladen Street, Room 300, Annapolis, Maryland 21401  
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March 1, 2024

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Delegate Caylin Young, District 45

Chair Pamela Beidle  
3 East Miller Senate Office Bldg.  
Annapolis, Maryland 21401

Dear Chair Beidle and Members of the Finance Committee,

The Legislative Black Caucus of Maryland strongly supports **Senate Bill 938** - Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention, which addresses the persistent health disparities impacting communities disproportionately affected by prostate, lung, and breast cancer in Maryland. **This bill is on the 2024 legislative priority agenda of the Black Caucus.**

As we are all aware, cancer continues to be a significant public health concern, with breast cancer ranking as the most diagnosed cancer in Maryland in 2017. Prostate cancer follows as the second most diagnosed, and lung cancer stands as the leading cause of cancer-related deaths in the state, with breast cancer being the third leading cause of cancer death.

Senate Bill 938 is a vital initiative aimed at developing and implementing a comprehensive public education campaign to address the factors contributing to health disparities in communities impacted by these cancers. This bill recognizes the multifaceted nature of these disparities, considering elements such as poverty, socioeconomic status, cultural beliefs, social injustice, and racial bias.

Public education campaigns have proven instrumental in dispelling myths surrounding cancer and promoting knowledge that can lead to more positive outcomes. By providing information on the onset, types, and multifactorial issues related to prostate, lung, and breast cancer, we can empower communities to make informed decisions about their health.

The testimony of Dr. Arthur Burnett from Johns Hopkins University emphasizes the disproportionate impact of prostate cancer on Black men. A public education campaign, as proposed by this legislation, would enhance access to comprehensive evaluations and consultations, ultimately benefiting populations disproportionately affected by this condition.

The American Lung Association's insights on lung cancer in Maryland underscore the need for increased awareness and equitable distribution of information. Senate Bill 938 aligns with the Association's call to action, recognizing that Maryland ranks 36th in the nation for lung cancer screening.

The bill seeks to improve these statistics, ensuring that all communities have access to vital information and resources.

Breast cancer, particularly affecting African American women as the second leading cause of cancer, requires focused attention. Public education campaigns can bridge knowledge gaps, especially regarding the elevated risks associated with life stressors, diabetes, obesity, heart disease, and breastfeeding disparities. Senate Bill 938 is a proactive step toward addressing these issues. A well-executed public campaign allows for collaboration among various agencies, including health providers, social service organizations, and community groups. This collaborative effort can bring together a wealth of resources, making information, programs, and support accessible to underserved populations.

Senate Bill 938 is a commendable effort to address the complexities surrounding prostate, lung, and breast cancer disparities in Maryland. The proposed public education campaign has the potential to save lives, enhance access to crucial resources, and improve overall outcomes for individuals facing these challenging diagnoses. For these reasons, the Legislative Black Caucus of Maryland supports **Senate Bill 938** and asks that you vote favorably on this bill.

Legislative Black Caucus of Maryland

**SB0938\_FAV\_MedChi, MDCSCO\_MDH - Pub. Ed. Camp. Pro**

Uploaded by: Danna Kauffman

Position: FWA



*The Maryland State Medical Society*

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www.medchi.org

MARYLAND/DISTRICT OF COLUMBIA  
SOCIETY OF CLINICAL ONCOLOGY

TO: The Honorable Pamela Beidle, Chair  
Members, Senate Finance Committee  
The Honorable Malcolm Augustine

FROM: Danna L. Kauffman  
Pamela Metz Kasemeyer  
J. Steven Wise  
Andrew G. Vetter  
Christine K. Krone

DATE: March 1, 2024

RE: **SUPPORT WITH AMENDMENT** – Senate Bill 938 – *Maryland Department of Health – Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention*

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The Maryland State Medical Society (MedChi), and the Maryland/District of Columbia Society of Clinical Oncology (MDCSCO), **supports with amendment** Senate Bill 938. The bill requires the Maryland Department of Health (MDH) to develop and implement a public education campaign on prostate, lung, and breast cancer prevention that targets communities disproportionately impacted by these types of cancers. The public education campaign must be developed by December 1, 2025. The campaign will be funded from the Cigarette Restitution Fund with an appropriation of no more than \$2 million for fiscal years 2025 through 2029.

MedChi and MDCSCO support all efforts by MDH to fulfill its important function of educating the public about cancer prevention. With regards to Senate Bill 938, MedChi and MDCSCO are supportive with an amendment to add colon cancer to the list of cancers covered in MDH's public education campaign. Colon cancer is highly preventable and curable when detected early through regular screening tests, such as colonoscopies. However, disparities in access to healthcare and screening services contribute to higher rates of late-stage diagnoses among minority populations. By including colon cancer in the public education campaign, we can raise awareness about the importance of screening and empower individuals to take proactive steps towards prevention and early detection. By expanding the focus of the public education campaign to include colon cancer, we can ensure that individuals have access to accurate information, resources, and support for preventing and managing this disease alongside other cancers with a high incidence and mortality rate.

With the adoption of the amendment, MedChi and MDCSCO support Senate bill 938.

**ACSCAN\_FAVwAMENDMENTS\_SB938.pdf**

Uploaded by: Lance Kilpatrick

Position: FWA



# Memorandum In Support w/Amendments of SB 938

## Senator Augustine

Senate Finance Committee

March 1, 2024

American Cancer Society Cancer Action Network is the nonprofit nonpartisan advocacy affiliate of the American Cancer Society. ACS CAN empowers cancer patients, survivors, their families and other experts on the disease, amplifying their voices and public policy matters that are relevant to the cancer community at all levels of government. We support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. On behalf of our constituents, many of whom have been personally affected by cancer, we support SB 938 with amendments. We strongly support the intent behind the proposed legislation, but have reservations on how this proposal would be funded.

In 2024, it is estimated that 36,410 Marylanders will hear the chilling phrase “you have cancer.” It’s also estimated that almost 10,310 will die from cancer.<sup>1</sup> 27.3% of cancer deaths in Maryland are attributable to smoking according to the American Cancer Society.<sup>2</sup>

Here in Maryland 18.2% of adults use any tobacco product, including 12.5% who use cigarettes.<sup>3</sup> Tobacco product use among youth is much too high, 5.0% of Maryland high school students smoke cigarettes, 6.0% smoke cigars, 4.6% use smokeless tobacco, and 23% use electronic smoking devices.<sup>4</sup>

A multi-year public education campaign targeting communities disproportionately impacted by prostate, lung and breast cancer is a worthy venture that should be funded. But diverting monies from an already underfunded Cigarette Restitution Fund which supports numerous public health initiatives should not be the funding vehicle. The Centers for Disease Control & Prevention already cite Maryland as spending less than half the best practice recommended annual investment.

According to the Maryland Department of Health, *“In 2000, the Maryland General Assembly created the Cigarette Restitution Fund (CRF) Program with funds derived from the 1998 Master Tobacco Settlement Agreement with the tobacco industry. The goal of the CRF Program is to implement strategies to reduce the burden of tobacco related disease in Maryland, with a specific emphasis on tobacco use prevention and cessation and cancer prevention, early detection, and treatment. As a result of the CRF Program, Maryland has created focused tobacco-use prevention and cessation programs, cancer prevention, education, and screening programs, cancer research programs, and a strong statewide network of cancer and tobacco local community health coalitions.*

*The CRF Program is administered by the Family Health Administration within the Department of Health and Mental Hygiene. The two main components of the CRF Program are the Tobacco Use Prevention and Cessation Program and the Cancer Prevention, Education, Screening, and Treatment Program.”*

<sup>1</sup> American Cancer Society. Maryland Cancer Facts and Figures 2024. Atlanta: American Cancer Society; 2024.

<sup>2</sup> Lortet-Tieulent J, Goding Sauer, A, Siegel, RL, Miller, KD, Islami, F, Fedewa, SA, Jacobs, EJ, Jemal A. State-Level Cancer Mortality Attributable to Cigarette Smoking in the United States. JAMA Internal Medicine. Published online October 24, 2016.

<sup>3</sup> Maryland Department of Health. BRFSS 2018. Unpublished. Local Health Department Tobacco Control Meeting, November 21, 2019.

<sup>4</sup> Maryland Department of Health. YRBS/YTS 2019. Unpublished. Local Health Department Tobacco Control Meeting, November 21, 2019.





The 2020 Surgeon General report *Smoking Cessation: A Report of the Surgeon General* states that, “population-based strategies are aimed at influencing tobacco cessation at a macro level by motivating smokers to quit and by providing an environment that supports or simplifies efforts to quit or lowers barriers to quitting that smokers might encounter.”<sup>5</sup> It also notes that, “population-based strategies include increasing the price of and/or the tax on cigarettes and other tobacco products, restricting where tobacco can be used by implementing smoke-free and tobacco-free policies, **and adequately funding tobacco control programs at the state level will decrease prevalence of tobacco use.**”<sup>6</sup> (Emphasis added)

We encourage the sponsors to seek out alternative funding mechanisms to realize the execution of this campaign. Perhaps an increase in the cigarette and tobacco products tax could, in part, assist in the enhancement of the outreach efforts that this legislation seeks to attain. ACS CAN stands ready to work with the sponsors to make this campaign a reality.

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<sup>5</sup> U.S. Department of Health and Human Services (HHS). *Smoking Cessation: A Report of the Surgeon General- Executive Summary*. Rockville, MD. U. S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General; 2020. Available at <https://www.hhs.gov/sites/default/files/2020-cessation-sgr-executive-summary.pdf>.

<sup>6</sup> U.S. Department of Health and Human Services (HHS). *Smoking Cessation: A Report of the Surgeon General- Executive Summary*. Rockville, MD. U. S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General; 2020. Available at <https://www.hhs.gov/sites/default/files/2020-cessation-sgr-executive-summary.pdf>.

**SB 938\_MDH\_FWA**

Uploaded by: Sarah Case-Herron

Position: FWA



## DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 1, 2024

The Honorable Pamela Beidle  
Chair, Finance Committee  
3 East Miller Senate Office Building  
Annapolis, MD 21401-1991

### **RE: Senate Bill 938 – Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention – Letter of Support with Amendments**

Dear Chair Beidle and Committee members:

The Maryland Department of Health (Department) respectfully submits this letter of support with amendments for Senate Bill (SB) 938 – Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention. SB 938 requires the Department to develop and implement a 3-year public education campaign on prostate, lung, and breast cancer prevention that targets communities disproportionately impacted by those cancers. The campaign will provide educational information on the risks, warning signs, and prevention guidelines of prostate, lung, and breast cancer. It will also promote participation in clinical trials and studies and cancer screenings for prostate, lung, and breast cancer. SB 938 includes an appropriation of no more than \$2,000,000 for Fiscal Years 2025 through 2029. For Fiscal Years 2026 through 2029, the Governor shall include an appropriation to the Department for the campaign from the Cigarette Restitution Fund (CRF).

The Department supports this initiative to increase public awareness of prostate, lung, and breast cancers. Lung cancer is the leading cause of cancer death in both men and women in Maryland.<sup>1</sup> Breast cancer is the second leading cause of cancer death among Maryland women, and prostate cancer is the second leading cause of cancer death among Maryland men.<sup>2</sup> In Maryland, Black women have higher breast cancer mortality rates compared to White women, while Black men have higher prostate cancer mortality rates compared to White men.<sup>3</sup> Increasing awareness of these cancers and promoting the resources available to communities disproportionately impacted by these cancers will help reduce these disparities.

The Department has discussed this bill with the sponsor and is respectfully proposing a series of amendments to this bill that we believe will assist with administration.

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<sup>1</sup> NCHS Underlying Cause of Death in CDC WONDER, 2020

<sup>2</sup> Ibid.

<sup>3</sup> Ibid.

First, as clinical trials and studies are outside the scope of the Department and best promoted by the cancer centers and oncology practices in the State. The Department respectfully suggests that the requirement to promote participation in clinical trials and studies for prostate, lung, and breast cancer be removed.

The Department also recommends the removal of language that requires the Department to provide 30 days for feedback and comments from the public on the public education campaign. As written, SB 938 does not provide any time for changes to be incorporated into the implementation phase of the campaign based on feedback from the public. The Department believes it would be more productive to work with communities during the development of the campaign and not after the development phase has been completed.

Regarding funding, the Department believes we will be able to leverage current efforts to accomplish some of what is required by SB 938. To that end, the Department recommends reducing the maximum appropriation to \$750,000. The Department also suggests folding the specific reporting on this campaign into the existing annual report that the Department submits on Cigarette Restitution Fund Outcomes and Expenditures. The Department proposes to include the specific reporting on this campaign for the required years within that report.

Finally, the Department suggests amending the effective date of the bill to allow for ample time to accomplish the initiatives. This change will impact other timelines within the bill.

Along with our suggested amendments the Department would welcome further clarity on bill language requiring the provision of information on legislation that reduces cost barriers to prevention services for prostate, lung, and breast cancer.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at [sarah.case-herron@maryland.gov](mailto:sarah.case-herron@maryland.gov).

Sincerely,

A handwritten signature in blue ink, appearing to read "LH Scott", is written over a faint, light blue rectangular stamp.

Laura Herrera Scott, M.D., M.P.H.  
Secretary

AMENDMENTS TO SENATE BILL 938  
(First Reading File Bill)

AMENDMENT NO. 1

On page 2, strike beginning after “**PROMOTE**” in line 23 down through “**SCREENINGS**” in line 26 and substitute “SCREENINGS”.

*Rationale:* Clinical trials and studies are outside the scope of the Department and best promoted by the cancer centers and oncology practices in the State.

AMENDMENT NO. 2

On page 3, strike in their entirety lines 12 and 13.

On page 3, in line 14, strike “**(3)**” and substitute “**(2)**”

On page 3, in line 16, strike “**(4)**” and substitute “**(3)**”

*Rationale:* The Department believes it would be more productive to work with cancer stakeholders and the public during the development of the campaign, not after completion of the development phase.

AMENDMENT NO. 3

On page 3, line 28, strike “**\$2,000,000**” and substitute “**\$750,000**”.

*Rationale:* The Department is able to leverage current efforts to accomplish some of what is required by SB 938. To that end, the Department recommends reducing the maximum allowed appropriation to \$750,000.

AMENDMENT NO.4

On page 3, strike in their entirety lines 18 through 21, inclusive.

On page 3, in line 22 strike “**(G)**” and substitute “**(F)**”.

On page 5, in line 15 after “ENACTED,” insert “That on or before December 1, 2027, 2028, and 2029, the Department shall include in the report required under State Finance and Procurement Article §7-317(j)(2) the status of meeting its goals established under Health - General Article §13-11A-01 to the General Assembly, in accordance with §2-1257 of the State Government Article.”

SECTION 3. AND BE IT FURTHER ENACTED.”

*Rationale:* For operational efficiency the Department proposes to add this new reporting requirement to an existing annual report.

AMENDMENT NO. 5

On page 3, in line 11, strike “**2025**” and substitute “**2026**”.

On page 3, in line 15, strike “**2026**” and substitute “**2027**”.

On page 3, in line 22, strike “**AND 2029**” and substitute “**2029, AND 2030**”.

On page 3, in line 27 strike “**2025**” and substitute “**2026**”.

On page 3, in line 28, strike “**2029**” and substitute “**2030**”.

On page 5, in line 16 strike “October 1, 2024” and substitute “**July 1, 2025**”; in lines 16 and 17, strike “September” in line 16 through “2029,” in line 17, and substitute “**June 30, 2030,**”.

*Rationale:* The Department suggests amending the effective date of the bill and, as a result, other timelines, to allow for ample time to accomplish the initiatives.

**9b - SB 0938 - FIN - Cancer Council\_LOC.doc.pdf**

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Position: UNF



March 1, 2023

The Honorable Pamela Beidle  
Chair, Finance Committee  
3 East, Senate Office Building  
Annapolis, MD 21401

**RE: SB 938 Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention**

Dear Chair Beidle:

The Maryland State Council on Cancer Control (the Council) is submitting this letter of concern for Senate Bill 938 (SB 938), titled: "Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention." SB 938 would require the Maryland Department of Health (Department) to develop and implement a public education campaign on prostate, lung, and breast cancer prevention that targets communities disproportionately impacted by prostate, lung, and breast cancer.

The Council supports the aim of SB 938 but is very concerned that funding for SB 938 comes from the Cigarette Restitution Fund (CRF), given that a diversion of CRF funds would have a negative impact on existing public health activities.

We agree with and support the goal of a public education campaign focused on preventing prostate, lung, and breast cancer within communities bearing the brunt of these illnesses as it holds immense potential to improve public health. These communities often face significant barriers to preventative care. Socioeconomic factors, cultural norms, and language access can create hurdles in accessing information and screenings. Tailored education campaigns bridge these gaps by delivering culturally relevant and accessible information in familiar languages and formats. Empowering individuals with knowledge about early detection, risk factors, and healthy lifestyle choices is key to encouraging proactive healthcare seeking and potentially saving lives.

The Council has serious concerns that funding for SB 938 would have the effect of diverting funds from current CRF programs. Reducing the allocation of the CRF in Maryland could have negative consequences for public health and well-being across the state. The CRF serves as a vital funding source for numerous critical programs, making it an investment in the state's future health. The CRF plays a central role in combating tobacco use and its associated health problems by preventing smoking initiation, encouraging cessation, and ultimately reducing the burden of tobacco-related disease, a





leading cause of preventable death. Additionally, the CRF fuels cancer prevention, education, screening, and treatment initiatives, improving early detection and survival. This is particularly crucial for low-income and underserved communities who often face higher cancer risks, limited resources, and limited access to healthcare.

The CRF represents an investment in Maryland's residents, their health, and their future. By safeguarding this crucial funding source, the state can continue its fight against preventable diseases, empower individuals struggling with tobacco addiction, and ensure equitable access to healthcare for all.

As it is currently written, the Council urges the Committee to vote against SB 938 and prioritize the critical public health programs already supported by the CRF, ensuring Maryland continues its commitment to a healthier future for all.

Sincerely,

A handwritten signature in black ink that reads "Kevin J. Cullen, MD". The signature is written in a cursive style.

Kevin Cullen, MD  
Chair,  
Maryland State Council on Cancer Control