

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

March 6, 2024

The Honorable Joseline A. Peña-Melnyk Chair, House Health and Government Operations Committee Room 241, House Office Building Annapolis, MD 21401-1991

RE: House Bill 1293 – Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention – Letter of Support with Amendments

Dear Chair Peña-Melnyk and Committee members:

The Maryland Department of Health (Department) respectfully submits this letter of support with amendments for House Bill (HB) 1293 – Maryland Department of Health - Public Education Campaign on Prostate, Lung, and Breast Cancer Prevention. HB 1293 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. HB 1293 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. 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. 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. 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.

¹ NCHS Underlying Cause of Death in CDC WONDER, 2020

² Ibid.

³ 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, HB 1293 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 HB 1293. 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.

Sincerely,

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

Secretary

AMENDMENTS TO SENATE BILL 1293

(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 HB 1293. 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 "<u>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.</u>

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 "<u>July 1, 2025</u>"; in lines 16 and 17, strike "September" in line 16 through "2029," in line 17, and substitute "<u>June 30, 2030,</u>".

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.