

MPCAC

MARYLAND PATIENT CARE AND ACCESS COALITION

March 14, 2023

VIA ELECTRONIC SUBMISSION

Melony Griffith, *Chair*
Finance Committee
Miller Senate Office Building
11 Bladen Street, 3 East Wing
Annapolis, MD 21401

Re: S.B. 805- Maryland Medical Assistance Program and Health Insurance - Required Coverage for Biomarker Testing

Dear Chairwoman Griffith:

We are writing to you on behalf of the Maryland Patient Care and Access Coalition (“MPCAC”) to express our support for S.B. 805. MPCAC believes that it is vital to Maryland patients to have improved access to biomarker testing by requiring Maryland health plans to cover biomarker testing for the purpose of diagnosis, treatment, appropriate management, and ongoing management of a disease or condition, as supported by medical and scientific evidence.

MPCAC strongly believes that S.B. 805 would allow Marylanders to have access to a type of precision medicine that has proven vital in the diagnosis, treatment, and maintenance of patients with colorectal cancer, inflammatory bowel disease, non-small cell lung cancer, breast cancer, and prostate cancer, among other diseases and conditions. **MPCAC proudly supports S.B. 805 and stands ready to serve as an ongoing resource to the Health and Government Operations Committee in its efforts to improve access to this important testing option.**

The Maryland Patient Care and Access Coalition

For nearly 20 years, the MPCAC has been the voice of independent physician specialty practices in the State that deliver integrated, high-quality, cost-efficient care to patients in the medical office and freestanding ambulatory surgical facility (“FASF”) settings. With hundreds of physicians in the fields of gastroenterology, orthopaedic surgery, urology, pathology, radiation oncology, and anesthesiology, MPCAC’s member medical practices cared for Marylanders in nearly two million patient visits during the past year. In addition, the physicians in MPCAC’s member practices perform approximately 200,000 procedures in FASFs and endoscopy centers annually.

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S.B. 805- Biomarker Testing

S.B. 805 will provide Maryland patients with expanded access to biomarker testing, which will enable patients to receive more targeted therapies and/or monitoring of their diseases and debilitating chronic conditions. Biomarker testing helps physicians and other health care providers determine the best treatment for a patient by analyzing biological samples taken from a patient and analyzing it for specific biomarkers. When biomarkers are identified, a physician can determine the best treatment plan for a specific patient, including the potential use of precision medicines.

Advances in treatment from the use of biomarker testing and targeted therapy has proven to be effective, but there have been racial, ethnic, and socioeconomic disparities in access and utilization of these services. Studies have shown that certain ethnic minorities are less likely to receive biomarker testing. One study showed that older, Black, uninsured, or Medicaid-insured individuals are less likely to receive testing for certain guideline-indicated biomarkers for colorectal cancer.¹ Increasing access to coverage could reduce disparities in cancer survival.

A 2021 study showed that 66% of oncology providers reported that insurance coverage for biomarker testing is a significant-to-moderate barrier for biomarker testing.² By enacting S.B. 805 and making biomarker testing a covered service, Maryland patients would have one less barrier in obtaining biomarker testing. Under this bill, health plans are still protected from overutilization of biomarker testing because nothing in this bill prevents a health plan from charging a relevant copay or coinsurance.

A physician leader of one of MPCAC's member medical practices described the amazing utility of biomarker testing in the treatment of inflammatory bowel disease (IBD). He noted that this type of testing is now a well-established tool used in stratifying patients to determine those who are at a higher risk of complicated IBD and therefore candidates for biologic medications. The patients identified as low risk can avoid higher-cost medications. The cost of the testing is relatively small in comparison to the cost of managing complications or the annual drug costs.

Genetic biomarker tests also enable physicians to stratify patients for risk of colon or gastric cancers. High-risk patients would undergo more frequent surveillance, while lower-risk patients would need to undergo less surveillance. Essentially, biomarker testing can allow providers to focus resources where needed and save resources where they are not needed.

Overall, by securing coverage for biomarker testing, S.B. 805 will provide greater access to critical testing for cancer and various chronic conditions, especially in underserved communities and communities of color, thereby improves the quality of life for patients while doing so in an economical manner. MPCAC looks forward to continuing to serve as a trusted

¹ Lamba, N., & Iorgulescu, B. (2020). Disparities in microsatellite instability/mismatch repair biomarker testing for patients with advanced colorectal cancer. *Cancer Epidemiol Biomarkers Prev* December 1 2020 (29) (12 Supplement) PO-091; DOI: 10.1158/1538-7755.DISP20-PO-091.

² ACS CAN. "Survey Findings Summary: Understanding Provider Utilization of Cancer Biomarker Testing Across Cancers." December 2021.

https://www.fightcancer.org/sites/default/files/national_documents/provider_utilization_of_biomarker_testing_polling_memo_dec_2021.pdf

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partner to members of the Maryland General Assembly as we work together to confront the challenges and opportunities facing our health care system and to promote and protect the high quality, cost-efficient and convenient care furnished in the independent medical practice setting.

Sincerely,



Nicholas P. Grosso, M.D.
Chairman of the Board & President, MPCAC



Benjamin Lowentritt, M.D.
Board Member, MPCAC

cc: All Health and Government Operations Committee Members
Joe Bryce, Manis Canning & Associates