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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

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SB 184

**Health Insurance – Diagnostic & Supplemental Examinations for Breast Cancer
Cost-Sharing**

Good afternoon, Chairwoman Pena-Melnyk, Vice Chairwoman Cullison, and Members of Health & Government Operations;

Thank you for the opportunity to provide testimony in support of Senate Bill 184, a bill to eliminate out of pocket costs for Diagnostic and Supplemental Examinations for Breast Cancer. For the record, my name is Senator Pam Beidle, and I am speaking with you as the sponsor of Senate Bill 184.

I personally wanted to sponsor this bill because I have been through a situation exactly like this. My follow up visit, after a suspicious mammogram, required a \$400 co-pay **before** I could schedule my MRI. Many women cannot afford that up front charge and may go without follow-up. This legislation is important to me because, according to the Susan G Komen Foundation, a woman dies every 12 minutes from breast cancer.

Diagnostic breast imaging is used as a follow-up test after finding an abnormality on a screening mammogram. Diagnostic imaging examinations include diagnostic mammography, breast ultrasound, and breast MRI's. A Susan G. Komen-commissioned study found that the average out-of-pocket costs for diagnostic imaging examinations ranged from \$234 to \$1,021. Patient advocates have voiced their concerns about the costs of these tests, as some patients are unable to afford them, resulting in delay of care.

In 2023, 5,760 women will be diagnosed with breast cancer and 850 will die from the disease in Maryland. These diagnostic imaging examinations are critical to allow for early detection and to catch the disease before it spreads. As legislators, we can eliminate this barrier to healthcare in Maryland.

To provide you with some data, 12-16% of women screened with a mammogram require a follow up diagnostic imaging examination. Outside of that 12-16%, diagnostic imaging examinations are

also used for breast cancer patients in recovery who receive tests every 6-months to a year during remission, to hopefully confirm that they remain cancer-free.

This legislation also covers the out-of-pocket costs for supplemental examinations, which includes diagnostic testing for those who have a personal or family medical history that classifies them as having an increased risk of breast cancer.

Another aspect of this bill that's critical to discuss is its posture in creating fair and equal coverage for all individuals. Evidence shows that commercially insured African American breast cancer patients were diagnosed at a later stage and had a higher mortality rate, when compared with their white counterparts with the same insurance status.

As we continue to fight for the cure for breast cancer, our goal with this bill is to create equitable access to breast imaging. All Marylanders deserve that, and I think it's the least we can do to try and combat this disease.

SB 184 passed the Senate by 47 to 0 and does include one amendment that was not in the cross-file HB376 when passed by the House 134 to 0. The Maryland Insurance Administration requested an amendment addressing the exemption for high-deductible health plans and updating the language to be similar to prior laws.

I understand that a second amendment is needed to require a study by the MD Healthcare Commission to evaluate the cost implications of eliminating out-of-pocket costs for Diagnostic Image-Guided Biopsies for Breast Cancer and I would consider it a friendly amendment. We can amend the House Bill in the Senate to conform them.

Thank you for your time and I request a favorable report for Senate Bill 184.