



END MEDICAL DEBT MARYLAND

SB 184

Health Insurance - Diagnostic and Supplemental Examinations for
Breast Cancer - Cost-Sharing
Hearing of the House Health & Government Operations Committee
March 23, 2023

Position: **FAVORABLE**

Dear Honorable Chair Peña-Melnyk and Members of the Health & Government Operations Committee:

We are End Medical Debt Maryland, a statewide coalition of nearly 70 organizations and dozens of volunteers. Our members are labor unions, faith leaders, patients, health justice advocates, consumer rights proponents, lawyers, healthcare workers, and community members impacted by medical debt. Collectively, we represent over 350,000 Marylanders. Our coalition's goal is clear: we fight for legislation that will ultimately end medical debt. **We strongly support SB 184** and urge the Committee to issue a FAVORABLE report.

SB 184 would prohibit insurers, nonprofit health services plans and other carriers from requiring a copayment, coinsurance or deductible requirement for diagnostic breast examinations and supplemental breast examinations. Breast cancer is the most commonly diagnosed cancer and in Maryland alone, 5760 residents will be diagnosed with breast cancer this year.¹ Socioeconomic status impacts breast cancer outcomes as low-income women have lower rates of breast cancer screening and greater probability for late-stage diagnosis.² There are also racial disparities in breast cancer mortality as research supports that Black women are less likely to be diagnosed with breast cancer but more likely to die from it than their White counterparts.³ This is due to many factors, including disparities in access to

¹ American Cancer Society, Estimated New Cases, 2023, <https://cancerstatisticscenter.cancer.org/#/state/Maryland> (last visited on February 7, 2023).

² Clement G. Yedjou et al., [Health and Racial Disparity in Breast Cancer](#), 1152 *Adv Exp Med Biol.* 31 (2019).

³ Bobby Daly MD et al., [A perfect storm: How tumor biology, genomics, and health care delivery patterns collide to create a racial survival disparity in breast cancer and proposed interventions for change](#), 65 *CA Cancer J. Clin.* 221 (2015).

screening, care and treatment as well as tumor biology and genetics.⁴ Copays, coinsurance and deductible requirements further exacerbate these disparities and can discourage Marylanders from seeking breast cancer screenings and medically necessary supplemental screenings.

No one should have to choose between affording timely breast cancer screenings and paying their rent or mortgage, buying food or paying for other necessary bills. But this is the situation that many Marylanders find themselves in, especially as costs of basic necessities continue to rise. SB 184 would allow more Marylanders to access timely breast cancer screenings and supplemental screenings without having to worry about the cost. If passed, SB 184 would bring Maryland one step closer towards eliminating medical debt and socioeconomic and racial inequities in healthcare access.

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Submitted on behalf of End Medical Debt Maryland

⁴ *Id.*