

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

March 27, 2024

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

RE: House Bill 1259 – Health Insurance – Breast and Lung Cancer Screening – Coverage Requirements – Letter of Support as Amended

Dear Chair Beidle and Committee members:

The Maryland Department of Health (the Department) respectfully submits this letter of support for House Bill (HB) 1259 – Health Insurance – Breast and Lung Cancer Screening – Coverage Requirements. HB 1259 amends Article - Insurance Sections 15-814.1 and 15-860 which require certain insurers, health service plans, and health maintenance organizations to provide coverage for certain breast cancer and lung cancer-related procedures.

Lung cancer is the leading cause of cancer death in Maryland. In 2020, 3,450 Marylanders were diagnosed with lung cancer and 2,234 died from lung cancer. The United States Preventive Services Task Force (USPSTF) grades lung cancer screening for eligible individuals as a "B" recommendation. Preventive services with an "A" or "B" grade recommendation are services that the USPSTF most highly recommends for preventive care and that have a high or moderate net benefit for patients. According to USPSTF, annual screening for lung cancer with low-dose computed tomography is of high or moderate net benefit in asymptomatic persons who are at high risk for lung cancer based on age, total cumulative exposure to tobacco smoke, and current smoking status or years since quitting smoking.³

However, various barriers can reduce the number of eligible adults who actually receive cancer screening. Lack of insurance coverage or prior authorization requirements have been cited as a

¹ Maryland Department of Health. Maryland Cancer Registry, 2020.

² CDC WONDER. NCHS Underlying Cause of Death, 2020.

³ U.S. Preventive Services Task Force, March 9, 2021.

barrier to lung cancer screening.^{4, 5, 6, 7} One study found that prior authorization requirements (57%), lack of insurance coverage (53%), and coverage denials (31%) were the most commonly reported barriers to ordering lung cancer screening among primary care physicians.⁸ The Department supports HB 1259 because it will help remove barriers, and therefore improve access to lung cancer screening and follow-up diagnostic procedures.

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

-

⁴ Eberth JM, McDonnell KK, Sercy E, Khan S, Strayer SM, Dievendorf AC, Munden RF, Vernon SW. A national survey of primary care physicians: Perceptions and practices of low-dose CT lung cancer screening. Prev Med Rep. 2018 May 22;11:93-99. doi: 10.1016/j.pmedr.2018.05.013. PMID: 29984145; PMCID: PMC6030390.

⁵ McDonnell KK, Estrada RD, Dievendorf AC, Blew L, Sercy E, Khan S, Hardin JW, Warden D, Eberth JM. Lung cancer screening: Practice guidelines and insurance coverage are not enough. J Am Assoc Nurse Pract. 2019 Jan;31(1):33-45. doi: 10.1097/JXX.000000000000000096. PMID: 30431549: PMCID: PMC6487865.

⁶ Kota KJ, Ji S, Bover-Manderski MT, Delnevo CD, Steinberg MB. Lung Cancer Screening Knowledge and Perceived Barriers Among Physicians in the United States. JTO Clin Res Rep. 2022 Apr 22;3(7):100331. doi: 10.1016/j.jtocrr.2022.100331. PMID: 35769389; PMCID: PMC9234709.

⁷ Ami E Sedani, Olivia C Davis, Shari C Clifton, Janis E Campbell, Ann F Chou, Facilitators and Barriers to Implementation of Lung Cancer Screening: A Framework-Driven Systematic Review, JNCI: Journal of the National Cancer Institute, Volume 114, Issue 11, November 2022, Pages 1449–1467, https://doi.org/10.1093/jnci/djac154

⁸ Eberth JM, McDonnell KK, Sercy E, Khan S, Strayer SM, Dievendorf AC, Munden RF, Vernon SW. A national survey of primary care physicians: Perceptions and practices of low-dose CT lung cancer screening. Prev Med Rep. 2018 May 22;11:93-99. doi: 10.1016/j.pmedr.2018.05.013. PMID: 29984145; PMCID: PMC6030390.