PAMELA G. BEIDLE Legislative District 32 Anne Arundel County

Chair, Finance Committee Executive Nominations Committee

Joint Committee on Gaming Oversight

Joint Committee on Management of Public Funds

Spending Affordability Committee



Miller Senate Office Building 11 Bladen Street, Suite 3 East Annapolis, Maryland 21401 410-841-3593 · 301-858-3593 800-492-7122 Ext. 3593 Pamela.Beidle@senate.state.md.us

THE SENATE OF MARYLAND Annapolis, Maryland 21401

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Senate Bill 476 Health Insurance – Genetic Testing and Cancer Imaging Required Coverage and Prohibited Cost-Sharing

Good afternoon Vice Chair Hayes and Members of the Finance Committee;

Thank you for the opportunity to present SB476, Health Insurance – Genetic Testing and Cancer Imaging Required Coverage and Prohibited Cost-Sharing. This bill increases access to recommended genetic testing for inherited gene mutations and evidence-based screenings by eliminating burdensome patient cost-sharing requirements.

Genetic testing can provide important information to breast cancer patients, their families and their medical providers. The results from genetic testing is often a catalyst for patients to access targeted prevention and treatment strategies. In the U.S., approximately 5-10 percent of breast cancers are related to a known inherited gene mutation.

Most patients have heard of BRACA 1 and BRACA 2 but they are not the only breast cancer related genes. Now, it's more common to be tested for multiple other moderate to high-risk gene mutations in a practice called panel testing or multi-gene testing.

This is a *Health Equity Issue*, according to a 2020 American Association for Cancer Research Report, 65 percent of young white women with breast cancer were offered genetic testing, whereas only 36 percent of young Black women with breast cancer were offered this same testing. Additional studies show that minority patients were more likely to utilize genetic testing following a cancer diagnoses and less likely following a family history of cancer, resulting in a missed opportunity for mutation detection and cancer prevention for these patients. This is important because we know that black woman have a 40% higher mortality rate for breast cancer than their white counterparts.

By eliminating the cost barrier to genetic testing and evidence-based screenings, individuals will have access to critical information regarding their lifetime cancer risk and ensure they have access to medically recommended early detection and cancer surveillance, therefore I respectfully request a favorable report on SB 476.