

February 28, 2020

Minnesota House Health and Human Services Policy Committee

Rep. Rena Moran, Chair

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Rep. Dave Pinto

Rep. Kristin Robbins

Rep. Joe Schomacker

Rep. Jennifer Schultz

Dear Chair Moran and Committee Members:

As Minnesota organizations committed to cancer prevention, access to cancer care, and supporting cancer patients and survivors, we are writing in support of H.F. 3322 legislation to make sure any woman diagnosed with breast or cervical cancer through a program funded by the Centers for Disease Control and Prevention (CDC) National Breast and Cervical Cancer Early Detection Program (NBCCDEP) has access to the treatment they need.

The CDC's NBCCDEP program helps low-income, uninsured, and under-insured women gain access to lifesaving screening programs for early detection of breast and cervical cancers. Uninsured and underinsured women have lower screening rates, resulting in a great risk of being diagnosed at a later, more advanced stage of the disease. Barriers block access to breast and cervical cancer screening and treatment, like insurance status, medical costs, and cultural barriers. NBCCDEP programs tackle those obstacles and work to increase screening rates for breast and cervical cancer screenings.

There are two CDC NBCCDEP-funded programs in Minnesota. The Minnesota Department of Health **Sage Screening Program**, which is funded jointly by the state and NBCCDEP, and the American Indian Cancer Foundation's **Screen Our Circle Program**. Screen Our Circle is solely funded by the NBCCDEP program and provides breast and cervical cancer screenings to urban American Indian women. American Indian women are twice as likely to develop cervical cancer compared to white women and are screened for breast cancer at a lower rate in Minnesota. Like the Sage Screening Program, *Screen Our Circle* removes barriers to cancer screenings and provides support to clinics. The *Screen Our Circle* program has the same eligibility requirements as the Sage Screening Program but does outreach for American Indian women in a targeted area.

Under federal law, any woman diagnosed with cancer through a NBCCDEP-funded program is eligible for Medicaid. Access to treatment and health care coverage is critical to surviving the disease. However, Minnesota's *Medical Assistance for Breast and Cervical Cancer Treatment Act* (MABC) is written with the

most restrictive wording and names the Minnesota Department of Health's Sage Screening Program as the only pathway to treatment coverage, leaving out any women screened through other CDC NBCCDEP funded programs

Because of the narrow wording of state statute, **women screened and diagnosed through the AICAF Screen Our Circle program would not automatically be eligible for Medicaid coverage.**

As introduced, this legislation would update state statute to conform with federal law and allow any person diagnosed with cancer through a CDC NBCCDEP funded program to be automatically eligible for Medicaid coverage.

As Minnesota lawmakers strive to improve the quality of health care for patients and lower health care costs, expanding access to breast and cervical cancer screening and treatment is a proven way to reach these goals. We call on state lawmakers to support HF 3322 and make sure all women have access to the treatment they need as they face a breast or cervical cancer diagnosis.

Signed,



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