

STATE OF HAWAII DEPARTMENT OF HEALTH

P.O. Box 3378 HONOLULU, HAWAII 96801-3378 In reply, please refer to:

SENATE COMMITTEE ON WAYS AND MEANS

HB2039,HD1,SD1, RELATING TO CANCER

Testimony of Linda Rosen, M.D., M.P.H. Director of Health

March 28, 2014 9:30 AM, Room 211

- Department's Position: The Department of Health (DOH) supports HB2039,HD1,SD1 and
- defers to the priorities of the Governor's Supplemental Budget request.
- Fiscal Implications: SD1 inserted an effective date of July 1, 2014. HD1 blanked out the
- 4 appropriation for funding. The Department respectfully requests that the appropriation out of the
- 5 general revenues, the sum of \$100,000 or so much thereof as may be necessary for fiscal year
- 6 2014-2015 for the Breast and Cervical Cancer Control Program (BCCCP) be reinstated as
- 7 proposed in the original measure.
- 8 **Purpose and Justification:** We respectfully request the appropriation be specific for screening,
- 9 education, and outreach for BCCCP services; therefore, an amendment is suggested to Section 1,
- page 2, lines 7 to 10 to read as follows:

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- "The purpose of this Act is to appropriate funds for the screening, education, and
- outreach services of the comprehensive breast and cervical cancer control program."
- The DOH recognizes the value of screening and early detection. The Department
- 14 currently provides critical breast and cervical cancer early detection services through the
- 15 BCCCP. The program is federally funded for \$1.1 million through a cooperative agreement with
- the Centers for Disease Control and Prevention (CDC) and serves approximately 1,200 women

- annually. Since 1997, the program has screened 9,400 women and detected 247 incidents of
- breast cancer and 144 pre-cancerous conditions and cancers of the cervix. CDC estimates that
- funded states serve 11.7% of eligible women age 40-64 years for breast cancer and 8.2% of
- 4 eligible women for cervical cancer through the national program, who would likely not have
- 5 received these lifesaving screening, diagnosis, and treatment services. The DOH, BCCCP
- 6 provides low-income, uninsured, and underserved women access to timely, high quality
- 7 screening and diagnostic services to detect breast and cervical cancer at the earliest stages and
- 8 refer women with cancer or pre-cancerous conditions to treatment through the Department of
- 9 Human Services (DHS), Breast and Cervical Cancer Treatment Program. The BCCCP's priority
- population includes Native Hawaiian, Filipino and other Asian/Pacific Islander women. Women
- served by the program are typically rarely or have never been screened, are medically
- underserved, and have higher morbidity and mortality rates than other women. Early detection
- of cancer greatly reduces treatment costs and increases survival rates.
- 14 If this measure is enacted, the Department's BCCCP will utilize the funding to screen
- approximately 130 additional women who are uninsured and do not qualify for existing state and
- federal funded Medicare or Medicaid programs. A study published in 2012 on the impact of the
- Affordable Care Act of 2010, indicates that there will continue to be a need for the BCCCP.
- Historically in Hawaii, gap treatment funding was appropriated to the DHS. This bill keeps the
- 19 continuum of breast and cervical cancer screening, education, and outreach under the DOH.
- 20 DHS will continue to administer treatment with federal and state funding for women who do not
- 21 qualify for Medicare and Medicaid.
- Thank you for the opportunity to testify.



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Senate Committee on Ways and Means Senator David Ige, Chair Senator Michelle Kidani, Vice Chair Members of the Committee

Decision Making: March 28, 2014; 9:30 a.m.

HB 2039, HD1, SD1 – RELATING TO CANCER

Cory Chun, Government Relations Director – Hawaii Pacific American Cancer Society Cancer Action Network

Thank you for the opportunity to provide written comments in **support** of HB 2039 HD1, SD1, which appropriates an unspecified amount for the Breast and Cervical Cancer Control Program.

The American Cancer Society Cancer Action Network (ACS CAN) is the nation's leading cancer advocacy organization. ACS CAN works with federal, state, and local government bodies to support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem.

Hawaii's Breast and Cervical Cancer program provides free pap tests to women aged 50 to 64 and mammograms to women aged 50 to 64 who are uninsured, underinsured, and have income below 250 percent of the federal poverty level. From 2007-2012, Hawaii's program detected 75 invasive breast cancers and 33 cervical cancers and precancerous lesions.

In 2010, 58% of all women in Hawaii were screened for breast cancer and 84% were screened for cervical cancer. Those rates dropped significantly among uninsured women who were screened at 28% and 62% respectively.

The Affordable Care Act will provide women with greater access to preventive cancer screenings and treatment. However, gaps will still remain for women who will continue to be uninsured or underinsured due to affordability, literacy, and language related barriers. It is estimated that over 10,985 Hawaii women will continue to lack access to cervical cancer screenings, and 4,639 women will lack access to breast cancer screenings in 2014. Maintaining adequate funding will preserve a critical safety net for thousands of Hawaii women who will continue to lack access to essential screening, diagnostic and treatment services.