American Cancer Society Cancer Action Network 0330 SW Curry Street | Portland, Oregon 97239 www.acscan.org



February 3, 2014

To: Chair Greenlick, House Committee on Health Care

From: Jason Parks, Government Relations Director, American Cancer Society Cancer Action Network

RE: Support of House Bill 4085

The American Cancer Society Cancer Action Network ("ACS CAN") is the advocacy affiliate of the American Cancer Society (the "Society"). The Society is a nationwide, community-based, voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer, through research, education, advocacy, and service. The American Cancer Society is the largest voluntary health organization in the United States.

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to voice our support of House Bill 4085 to the committee.

House Bill 4085 attempts to clarify that polyp removal is an integral part of colorectal cancer screening and should not be subject to cost-sharing for qualified individuals as described in the Affordable Care Act. The Affordable Care Act requires all private, non-grandfathered insurance plans to cover certain preventive services rated "A" or "B" by the United States Preventative Services Task Force (USPSTF) without any patient cost-sharing (co-payments/co-insurance/deductibles).

The USPSTF has assigned an "A" rating to colorectal cancer screening, including colonoscopy, for asymptomatic individuals beginning at age 50 and continuing until age 75. Therefore, if a patient meets these qualifications all costs associated with the entire preventive procedure, including polyp removal, should be covered by the patients' insurance with no out-of-pocket costs to the consumer.

However, there is some confusion regarding whether polyp removal is part of the preventive screening process and therefore covered by the "no cost-sharing" stipulation.

In an attempt to clarify the situation the Departments of Labor, Health & Human Services, and the Treasury issued Guidance stating:

"...polyp removal is an integral part of a colonoscopy. Accordingly, the plan or issuer may not impose cost-sharing with respect to a polyp removal during a colonoscopy performed as a screening procedure."

Despite this Federal Guidance, the issue persists and we still have some patients paying for polyp removal unnecessarily.

Colorectal cancer screening saves lives by preventing and detecting cancer early. Patients should not be subjected to unexpected co-pays/co-insurance for screening colonoscopy. Please support House Bill 4085 which enables patients to receive the USPSTF recommended screening services without fear of added cost.

Thank you for your time and consideration.

Sincerely,

Jason Parks Oregon Director of Government Relations American Cancer Society Cancer Action Network