

Submitter: Devon Lawson  
On Behalf Of:  
Committee: House Committee On Health Care  
Measure, Appointment or Topic: SB1527

Chair Nosse and Members of the Committee,

My name is Devon Lawson. I am a 19-year-old resident of Springfield, a student of History and Economics at Lane Community College, and I am writing to urge a YES vote on SB 1527.

While this bill is technical in nature, prohibiting cost-sharing for cervical cancer follow-up exams, it addresses a fundamental economic injustice in our healthcare system. Currently, we have a "bait-and-switch" model. The initial screening (Pap smear) is free, but if that test reveals a potential problem, the patient is suddenly hit with deductibles and copays just to find out if they have cancer. SB 1527 corrects this by recognizing that a screening is not complete until a diagnosis is made. I urge you to support this bill.

Currently, working-class women are effectively penalized for having an abnormal test result. The "diagnostic" classification for biopsies and colposcopies acts as a financial barrier that deters necessary care. For a low-wage worker, a \$500 deductible for a follow-up biopsy is often the difference between catching cancer early and waiting until it is life-threatening. Vice-Chair Nelson, as a nurse, you know that fear of cost is one of the biggest reasons patients Delay of Care. This bill removes that fear, ensuring that health, not ability to pay, dictates treatment.

This is not a new mandate; it is a clarification of what "screening" actually means. A screening that says "maybe" is useless without the follow-up that says "yes" or "no." Representatives Javadi and Pham, as providers, you know that a positive screening requires immediate investigation. Charging a patient extra to finish the screening process is akin to a mechanic quoting a price for an inspection but charging extra to tell you which part is broken. It is a deceptive business practice that this bill rightly ends. Representative Harbick, from a business perspective, this is about workforce stability. Cervical cancer disproportionately impacts working-age women. Catching it at the biopsy stage (precancerous) allows a worker to return to the job quickly. Treating Stage 3 cancer removes them from the workforce for months or years. I also want to remind you how hard cancer affects the local McKenzie community.

The fiscal impact statement notes this measure has a "Minimal Fiscal Impact". However, the long-term savings are significant. It is infinitely cheaper for the insurance pool to pay for a colposcopy today than chemotherapy and radiation five years from now. By removing the cost barrier to early detection, we prevent the

catastrophic costs associated with advanced disease.

SB 1527 closes a loophole that allows insurers to profit from the ambiguity of a medical test. It asserts that a patient shouldn't have to check their bank account before checking for cancer.

Thank you.