



March 8, 2021

## ACS CAN Testimony in Support of North Dakota House Bill 1012 Senate Appropriations Committee

My name is Sara Mannerter and I am the Government Relations Director for American Cancer Society Cancer Action Network – North Dakota.

The American Cancer Society Cancer Action Network (ACS CAN), the nonprofit, non-partisan advocacy affiliate of the American Cancer Society advocates for public policies that reduce death and suffering from cancer including policies supporting Medicaid Expansion.

For the 4,200<sup>i</sup> North Dakotans who will be diagnosed with cancer in 2021, access to affordable, comprehensive care is essential to detecting, treating and surviving the disease. In North Dakota, cancer is the second leading cause of death and an estimated 1,310<sup>ii</sup> state residents will die from the disease this year. Preserving low-income adults and families access to affordable, comprehensive health care coverage is critical in the fight against cancer.

ACS CAN strongly supports continued funding for Medicaid Expansion. HB 1012, appropriates funding to the Department of Human Services, to maintain health insurance coverage for thousands of low-income North Dakotans through our state's Medicaid program.

In 2017, Governor Jack Dalrymple made the decision to extend the July 2017 sunset of the state's Medicaid Expansion Program. And Governor Doug Burgum took action that extends the program through July 2019. HB 1012 will reauthorize the program and preserve access to coverage for more than 20,000 individuals, including cancer patients, survivors and those at risk of cancer through July 31, 2023. Medicaid expansion has promoted earlier cancer detection, resulting in fewer cancer deaths and improved outcomes for patients.

- Medicaid expansion was associated with improved rates of colorectal<sup>iii</sup>, prostate, and cervical cancer screenings.<sup>iv</sup>
- Individuals enrolled in Medicaid prior to their cancer diagnosis have better survival rates than those who enroll after their diagnosis.<sup>v</sup>
- Medicaid expansion led to an increase in both total and earlier-stage cancer diagnoses in expansion states, while the gap in diagnoses between expansion and non-expansion states widened.<sup>vi</sup>
- Medicaid expansion was associated with decreased cigarette and other tobacco product purchases, as well as increased access, utilization, and coverage of evidence-based smoking cessation medications.<sup>vii</sup>



Additionally, our state's economy, our hospitals and health systems and provider networks are stronger. In states that have fully expanded Medicaid eligibility:

- Uninsured rates have decreased, which has reduced uncompensated care costs
- Hospitals are 84 percent less likely to close<sup>viii</sup>
- Marketplace premiums that are about 7 percent lower than non-expansion states<sup>ix</sup>
- Expansion has created and protected jobs, which has increased personal incomes and state revenues

The health coverage provided through our state's Medicaid program helps to improve outcomes and reduce the burden of cancer by offering access to prevention services; timely cancer screening and early detection services; as well as affordable treatment services and care.<sup>x,xi,xii</sup>

Maintaining access to comprehensive and affordable health care coverage through state Medicaid programs is a matter of life and survivorship for countless low-income cancer patients, survivors and North Dakotans at risk of cancer. Preventing cancer is much less expensive than treating it and ensuring that low-income individuals and families continue have access to comprehensive, affordable health insurance coverage is one of the most critical ways that we can reduce cancer incidence and mortality and continue making progress to win the fight against cancer.

The American Cancer Society Cancer Action Network urges legislators to support continued funding for Medicaid Expansion in HB 2012.

Thank you for allowing me to submit testimony.

Sara Mannetter, ACS CAN

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<sup>i</sup> American Cancer Society. Cancer Facts & Figures 2021. Atlanta: American Cancer Society; 2021.

<sup>ii</sup> Ibid.

<sup>iii</sup> Fedewa SA, Yabroff R, Smith RA, et al. Changes in breast and colorectal cancer screening after Medicaid expansion under the Affordable Care Act. *Am J Prev Med.* 2019;57(1):3-12; Hendryx M & Luo J. Increased Cancer Screening for Low-income Adults Under the Affordable Care Act Medicaid Expansion. *Med Care.* 2018; 56(11):944-49.

<sup>iv</sup> Mazurenko O, Balio C, Agarwal R, Carroll A, & Menachemi N. The Effects Of Medicaid Expansion Under The ACA: A Systematic Review. *Health affairs (Project Hope)*, 37(6), 944–950. doi:10.1377/hlthaff.2017.1491.

<sup>iv</sup> Adams E, Chien LN, Florence CS, et al. The Breast and Cervical Cancer Prevention and Treatment Act in Georgia: effects on time to Medicaid enrollment. *Cancer.* (2009); 115(6):1300-9.

<sup>v</sup> Adams E, Chien LN, Florence CS, et al. The Breast and Cervical Cancer Prevention and Treatment Act in Georgia: effects on time to Medicaid enrollment. *Cancer.* (2009); 115(6):1300-9.

<sup>vi</sup> Soni A, Cawley J, Sabik L, & Simon K. Effect of Medicaid Expansions of 2014 on Overall and Early-Stage Cancer Diagnoses. *The American Journal of Public Health*, 108(2), 216–218. doi:10.2105/AJPH.2017.304166.

<sup>vii</sup> Maclean JC, Pesko MF, Hill SC. Public insurance expansions and smoking cessation medications. *Economic Inquiry.* 2019; 57(4):1798-1820; Bailey SR, Marino M, Ezekiel-Herrera D, et al. Tobacco cessation in Affordable Care Act Medicaid expansion states versus non-expansion states. *Nicotine & Tobacco Research.* ntr087, <https://doi.org/10.1093/ntr/ntz087>.

<sup>viii</sup> "Understanding The Relationship Between Medicaid Expansions And Hospital Closures." *Health Affairs*, Jan. 2018, [www.healthaffairs.org/doi/10.1377/hlthaff.2017.0976](http://www.healthaffairs.org/doi/10.1377/hlthaff.2017.0976).

<sup>ix</sup> "The Effect of Medicaid Expansion on Marketplace Premiums." *U.S. National Library of Medicine, National Institutes of Health*, September 2016, [resource.nlm.nih.gov/101704401](http://resource.nlm.nih.gov/101704401).

<sup>x</sup> Aparna Soni, Kosali Simon, John Cawley, Lindsay Sabik, "Effect of Medicaid Expansions of 2014 on Overall and Early-Stage Cancer Diagnoses", *American Journal of Public Health* 108, no. 2 (February 1, 2018): pp. 216-218.

<sup>xi</sup> Dehkordy, SF, Hall, K, West, B, et al. "Medicaid Expansion Improves Breast Cancer Screening for Low Income Women." November 30, 2015. [https://www2.rnsa.org/timssnet/Media/pressreleases/14\\_pr\\_target.cfm?id=1849](https://www2.rnsa.org/timssnet/Media/pressreleases/14_pr_target.cfm?id=1849)



<sup>xii</sup> Ungar, Laura. "More KY Medicaid Patients Get Preventative Care." *Courier Journal*. August 7, 2015. Web [www.courier-journal.com/story/life/wellness/2015/08/05/preventive-care-rises-among-kentucky-medicaid-patients/31190973](http://www.courier-journal.com/story/life/wellness/2015/08/05/preventive-care-rises-among-kentucky-medicaid-patients/31190973)

