PROSTATE CANCER STUDY COMMITTEE



INTERIM REPORT

JANUARY 15, 2025

Committee Members:

Senator Tom Young, Jr., Chairman Representative Mark Smith Representative J. A. Moore Dr. Thai Ho – MUSC

Dr. Timothy Averch – USC School of Medicine

Dr. Sam Adediran - SC Hospital Association

Dr. Edward W. Duffy, Jr. - SC Hospital Association

Dr. Ronald Glinski - SC Hospital Association

Dr. Asutosh Gor - SC Medical Association

Dr. Scott Graupner - SC Medical Association

Dr. David Lamb - SC Medical Association

Mr. Bud Mann - Hollings Cancer Center Advisory Board

Michele Stanek - SC Office of Rural Health

Dr. Kevin Bennett SC Center for Rural and Primary Healthcare

Dr. Ron Gimbel - Clemson Rural Health

Dr. James Hebert - Arnold School of Public Health

Kim Hale - American Cancer Society

Ms. Charlene Gentry - Patient Advocate

Mr. Chris Scott - Patient Advocate

PROSTATE CANCER STUDY COMMITTEE INTERIM REPORT

The Prostate Cancer Study Committee was established through Proviso 117.187 of the 2023-2024 Appropriation Act and convened on November 29, 2023. The committee was unable to conclude the work charged by the proviso, so a reauthorization was established through Proviso 117.176 of the 2024-2025 Appropriations Act. In the initial formation of the committee, Senator Nikki Setzler was designated as Chairman. Pursuant to his retirement from the Senate, Senator Tom Young took on the responsibilities of chairing the Committee duties. A report to the Governor and General Assembly is due by January 15, 2025. The required scope of the report, as outlined in the proviso, is, as follows:

- (1) the best methods to ensure timely screening, accurate diagnosis, and treatment of prostate cancer;
- (2) the need for and viability of a continuum of care for those diagnosed with and in remission from prostate cancer;
 - (3) reviewing and evaluating best practices for education and awareness about prostate cancer;
- (4) identifying areas in South Carolina with a high incidence of prostate cancer or poor outcomes:
- (5) researching the latest and proven methods for screening, diagnosing, and treating prostate cancer; and
- (6) reviewing current efforts to promote prostate cancer awareness and screening in South Carolina and how best to improve those efforts.

At the initial meeting on November 29, 2023, written documents and accompanying oral presentations were received from MUSC/Hollings Cancer Center. DHEC and Zero Prostate Cancer. The Hollings Center document was submitted as a response to Chairman Setzler's directive for the areas to be addressed in the first meeting: 1) a statistical snapshot of SC; 2) awareness among men of prostate cancer screening recommendations; and 3) treatment options. Specifically, the report highlighted the risk among black men – 80% higher, with a mortality of 2.3X that of white men. Additionally, the report pointed out that "a high PSA level does not necessarily indicate... cancer and not all prostate cancers... require treatment."

PROSTATE CANCER STUDY COMMITTEE INTERIM REPORT

The DHEC report consisted of statistical gathering but was well received by the Committee as being indicative of the problem in rural communities. Zero Prostate Cancer presented model legislation for screenings for all insureds with no cost sharing. This legislation, at the time of the Nov. 2023 meeting, had been adopted in four states, with the actions of Maryland being highlighted. Following the presentations, members responded and highlighted their personal concerns and thoughts as to moving forward. Chairman Setzler charged the non-legislative members to "guide and direct" the Committee with some "real suggestions."

After the November 2023 meeting, Committee members Drs. Hebert and Gimbel submitted documents for the consideration of the Committee, prepared to serve the ends of the requirements stated in the proviso. These two documents were summarized in a single document by Staff and presented to the Committee in preparation for reconvening January 8, 2025.

Chairman Young opened the January 8, 2025 meeting by establishing a framework for continued discussions based upon facets of the overall issue previously highlighted at the November 2023 meeting. Specifically, he referred to: 1) general awareness by men of the need for prostate cancer screening, particularly as to certain segments of the population; 2) general awareness in the medical community for PSA screening in certain segments of the state's male population; 3) locations in the state to perform PSA testing; 4) locations in the state for treatment for those tested for whom there was a need for further medical attention; and 5) shortage of urological care in the state's rural areas.

As the Committee's discussion progressed, there were references to the federally-funded Best Chance Network (BCN) and WiseWoman initiatives which utilize mobile units and fixed clinics to screen women for their unique health concerns as well as using the Federally Qualified Health Centers (FHQCs) for expanded education efforts and prostate cancer screening. The question arose, could a similar platform be used for the screening of men, particularly in underserved rural areas?

PROSTATE CANCER STUDY COMMITTEE INTERIM REPORT

A good logistical mechanism being established, a concern remained that many men lack the

motivation for being screened and do not grasp the gravity of this aspect of their health. Family and

community leadership was cited as critical to success in this area.

Furthermore, it was discussed that concerns about prostate health could possibly be best served by

focusing on the broader approach to men's health, including other issues, such as cardiovascular.

Regarding urological resources, a point of reference was made of incentives utilized to bring

physicians to rural areas for work in the fields of family practice, OBGYN and, most recently, psychiatry.

Public participation was offered by Chairman Young and Matt Miller (Zero Prostate Cancer)

reiterated his advocacy for legislation to eliminate cost sharing under health insurance coverages as to

certain segments of the male population to encourage screening. Scott Jaillette (DPH, formerly DHEC)

and Beth Johnson (American Cancer Society) both addressed BCN. Mr. Jaillette stated that DPH would

proceed with an awareness campaign for prostate screening, aided by their partners (hospital systems,

community leaders, etc.) in this initiative.

After public comments, several assets were mentioned for the path forward, both technological,

such as MRIs and genomic tests and methodological, such as pilot programs and focus groups. Future

meetings will include various entities whose input will be valuable by providing information to the

Committee.

All documents related to the work of this committee, including membership, legislative

authorization and requirements and documents submitted for the use of the committee in working toward

the conclusion required of them in proviso can be obtained here.

Respectfully submitted,

Tom Young

SC Senate District 24

Chairman

4