

January 8, 2025 Room 105, Gressette Building, 1101 Pendleton St, Columbia, SC 29201

Dear Members of the South Carolina Prostate Cancer Study Committee (PCSC),

Thank you for the opportunity to address this committee on behalf of ZERO Prostate Cancer.

States are addressing PCSC's initiatives in several ways, including by eliminating out-of-pocket costs for prostate cancer screening for high-risk men and through investing in awareness and screening programs for underinsured, uninsured, and high-risk men. These strategies target high-risk groups, who have been disproportionately impacted by the drop in screening, to get them connected to treatment when it is least costly and most effective.

Nine states have eliminated cost-sharing for prostate cancer screening for high-risk men,¹ and the National Black Caucus of State Legislators (NBCSL) recently adopted the Illinois version of this bill concept, <u>HB 5318</u>, as model legislation. Black men are less likely to be screened, 1.63 times more likely to be diagnosed with late-stage prostate cancer, and nearly 2.5 times more likely to die from the disease than White men.² A 2020 study on the impact of the VA eliminating out-of-pocket costs for screening found that by doing so, the VA equalized access to care, which helped eliminate the racial disparity in prostate cancer mortality.³ For these reasons, OH, PA, TX, VA are considering similar legislation in 2025.

States are also investing in awareness and screening programs that target high-risk populations and notify participants of their coverage, especially if their state has just eliminated cost-sharing for screening. Last year, Maryland passed <u>SB 938</u>, a bill that requires the Maryland Department of Health to work with prostate cancer-focused organizations to develop and implement a public education campaign to promote awareness about who should be screened, reduced cost barriers to screening, and clinical trial participation. Illinois is considering creating dedicated funding for prostate and colorectal screening programs based on the Illinois Breast and Cervical Cancer Program (IBCCP). ZERO is also working with the CDC to place a greater emphasis on prostate cancer awareness and early detection in state cancer plans, as it's an under-addressed area nationwide.

Since the highest-risk men are the least likely to be aware of their risk,⁴ and vulnerable groups may be unaware of reduced cost barriers, promoting greater awareness about the removal of cost sharing for screening may increase uptake of prostate cancer screenings,⁵ especially for high-risk men.

To improve patient outcomes and eliminate disparities, we recommend passing a bill to eliminate cost-sharing for prostate cancer screening for high-risk men this session, and appropriating dedicated funding for awareness and screening programs targeting high-risk, underinsured, and uninsured populations.

Thank you, and please follow up with Georgia@zerocancer.org with questions.

Respectfully,

Matt Miller South Atlantic Chapter Director, ZERO Prostate Cancer



- 1 TN, KY, DE, DC, OR, IL, RI, MD, NY
- 2 Division of Cancer Prevention and Control,. (2022). 2022 SC Prostate Cancer Fact Sheet. Columbia. https://www.dph.sc.gov/sites/scdph/files/media/document/2022-SC-Prostate-Cancer-Fact-Sheet.pdf
- 3 Riviere P, Luterstein E, Kumar A, et al. Survival of African American and non-Hispanic white men with prostate cancer in an equal-access health care system. Cancer. 2020;126(8):1683-1690. https://doi.org/10.1002/cncr.32666
- 4 Leonard, J. A., Wells, J. B., & Brandler, E. S. (2016). Awareness of Prostate Cancer and Screening Modalities Among Long Island Men. In American Journal of Men's Health (Vol. 11, Issue 2, pp. 365–368). SAGE Publications. https://doi.org/10.1177/1557988316681219
- 5 Norris, H. C., Richardson, H. M., Benoit, M.-A. C., Shrosbree, B., Smith, J. E., & Fendrick, A. M. (2021). Utilization Impact of Cost-Sharing Elimination for Preventive Care Services: A Rapid Review. In Medical Care Research and Review (Vol. 79, Issue 2, pp. 175–197). SAGE Publications. https://doi.org/10.1177/10775587211027372