

## Talking Points: Senate Medicaid Testimony 5/7/15

- The Governor's proposed budget would cut support to cancer patients currently enrolled in Ohio's BCCP Medicaid.
  - This cut will affect over 120 Ohio breast cancer patients annually, cutting them off from breast cancer treatments that may save their life.
  - This is an urgent matter, as Ohio is currently ranks 36<sup>th</sup> in breast cancer incidence, but 5<sup>th</sup> in the United States in breast cancer mortality.
- If the proposed budget passes...
  - Low-income women diagnosed with cancer will have to wait for open-enrollment periods to try and obtain insurance they most likely cannot afford, face the high out of pocket costs of paying for treatment, or possibly choose to forgo treatment altogether.
  - Additionally, some Health Insurance Exchange plans are not accepted by providers, forcing many to travel long distances to a location where services are in-network.
- These proposed cuts could also lead to higher healthcare spending and increased use of hospital's charity care for those individuals who must wait for open enrollment periods
  - Time from treatment to diagnosis for women with breast cancer is usually pretty quick, around 7 days
  - We estimate that if women screened and diagnosed through BCCP have to then purchase an insurance plan in the private marketplace, this could significantly delay the time from diagnosis to treatment anywhere from a few days to almost six months while they wait for open enrollment periods and/or insurance approval
  - I have personally spoken with leader's in OH's BCCP and the time from diagnosis to treatment is one of their major concerns
  - Thankfully, most providers will not allow women to wait that long for treatment once cancer is diagnosed and will more than likely refer them to the hospital's charity care
  - IF that woman qualifies for the charity care, the hospital will then experience increased healthcare costs and a potential increase in uncompensated care
  - [Most hospitals are scaling back their charity care](#) programs for individuals who qualify for ACA coverage but have yet to enroll – which does not necessarily take into account open enrollment periods
  - Additionally, the sliding scale fees offered by many hospital systems for their charity care patients are still out of reach for women eligible for BCCP services
- The BCCP helps breakdown multiple barriers to screening and treatment, including reduced appointment wait times, one-on-one assistance with filling out forms, and no enrollment periods
  - Study after study shows that patient navigation services, like those provided by BCCP, significantly reduce the time individuals wait from diagnosis to treatment
  - BCCP Medicaid comes with no out-of-pocket costs, while expanded Medicaid comes with out-of-pocket costs and, potentially, premiums
  - If anything, BCCP Medicaid could be used as a bridge for some of these low-income women waiting for open enrollment periods, so their care could be covered
- Though progress has been made, much of the insurance coverage in the marketplace remains unaffordable for the working poor. A recent Wall Street Journal article stated that even with mid-range deductibles, *low-income individuals do not have enough liquid assets to pay their yearly deductible.*
  - Currently, Ohio's BCCP is not open to women whose insurance coverage is inadequate.

- Our hope is that BCCP eligibility will be modernized to fill the gaps of the current healthcare system.
- Federal guidelines allow BCCP funds to be used for any underinsured women meeting the income eligibility guidelines.
- The flexibility of BCCP to serve as a safety net for those facing high out-of-pocket costs after a diagnosis is critical.
- **We must not abandon our most vulnerable women and leave them to fend for themselves when funding is already available through BCCP.**