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House Bill 33 Proponent Testimony
House Insurance Committee
May 6, 2025

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Chair, Vice Chairman Lampton, Vice Chair Craig, Ranking Minority Member Tims, and Members of the House Insurance Committee, thank you for the opportunity to provide proponent testimony on behalf of the Ohio Hematology Oncology Society (OHOS) in support of House Bill 33.

My name is Michelle Weiss, and I serve as the Executive Director of the Ohio Hematology Oncology Society (OHOS). On behalf of our over 220 hematology and oncology physician members across the state, I am writing to express our strong support for House Bill 33, which would require insurance coverage, without cost-sharing, for preventive prostate cancer screening for men at high risk.

Why Prostate Cancer Screening Matters

Prostate cancer is the most commonly diagnosed non-skin cancer in Ohio men and the second-leading cause of cancer death. According to the Ohio Department of Health, over 8,000 men are diagnosed each year in our state. Early detection through screening dramatically improves survival rates nearly 100% of men diagnosed at an early stage live five years or more. Unfortunately, that rate drops sharply when the disease is found after it has spread.

Prostate-specific antigen (PSA) testing remains the primary method of early detection, yet many at-risk men forego this test due to out-of-pocket costs or lack of insurance coverage. This is especially true for men in underserved communities and those with a family history of the disease.

Addressing Disparities

This legislation is particularly important for Black men, who are 1.7 times more likely to be diagnosed with and more than twice as likely to die from prostate cancer compared to white men. These disparities are compounded by social determinants of health, including access to care, insurance status, and medical mistrust.

Eliminating cost barriers for PSA screening is a meaningful step toward closing this racial gap. By adopting House Bill 33, Ohio would join states like New York and Maryland in recognizing that equitable access to screening is a matter of life and death.

The Economic Impact

Research from Milliman and other national healthcare consultancies shows that covering preventive prostate screening without cost-sharing can result in significant long-term savings by avoiding late-stage treatment costs. One study found that detecting and treating prostate cancer early among men

aged 55–69 could prevent hundreds of cases of metastatic disease and save nearly \$100 million over a 13-year period.

Preventive care is not only good medicine, but it is also good policy.

National Momentum

Language in House Bill 33 echoes provisions in the proposed federal “PSA Screening for HIM Act,” which has received bipartisan support in Congress. Like that bill, House Bill 33 ensures men with risk factors including African American men and those with a family history have access to no-cost screening services. We applaud the General Assembly for considering a similar approach here in Ohio.

OHOS Commitment

Our members are on the frontlines of cancer care in Ohio. They see firsthand the devastating consequences when patients present with advanced prostate cancer, often due to delayed or skipped screenings. We believe House Bill 33 can help prevent unnecessary suffering and save lives.

On behalf of the Ohio Hematology Oncology Society, I respectfully urge the Committee to support House Bill 33. Thank you for your time and consideration.

OHOS Board Members

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