CC. Director Corcoran, Ohio Department of Medicaid

THE HEALTH COLLABORATIVE

Chair Lampton, Vice Chair Craig, Ranking Member Tims, and Members of the House Insurance Committee**,** my name is Tiffany Mattingly and I am here on behalf of The Health Collaborative supporting hospitals and communities of Southwest Ohio to express strong support for House Bill 271 Breast Examination and Screening Transformation Act, or BEST Act. This bill would require full insurance coverage for breast cancer screening and diagnostic services—without any patient cost-sharing.

Breast cancer is the most commonly diagnosed cancer among Ohio women and the second leading cause of cancer death. Early detection is key to saving lives and reducing long-term healthcare costs. But right now, too many Ohioans—especially working-class families, rural residents, and underserved communities—face financial barriers that delay or prevent access to this critical care.

As a former women and newborn health clinician, I witnessed patients making heartbreaking choices between medical care and basic needs. They delayed prenatal care, avoided triage care, and at times abandoned their care to avoid high dollar healthcare bills. I ask you to pause for a minute and picture a single mother of 2, Maria, working fulltime earning $18.50/hour, who delayed breast cancer screening for years due to high costs and fear of diagnosis without financial support. When she finally accessed a free mammogram, she was told she needed a supplemental MRI—an imaging test her insurer denied. With a month's salary needed to pay out-of-pocket, she had no choice but to wait.

After a five-week delay during which her provider, Dr. Green, fought the denial, Maria was diagnosed with Stage 4 metastatic breast cancer. It had already spread to her bones and liver.

Maria's story is heartbreaking—but it's not unique. It illustrates the urgent need to treat preventive care as essential, not optional, and to remove the cost barriers that keep patients from accessing timely, potentially life-saving care.

Providers like Dr. Green are also affected. She serves low-income and underinsured patients every day while fighting an uphill battle against insurance bureaucracy. Her emotional and professional toll is part of a larger crisis—provider burnout, administrative waste, and rising costs from delayed care.

Under current law, screening mammograms are intended to be covered with no patient cost-yet the patient and provider experience does not align with the intentions of the law. HB 271 offers a straightforward solution. The proposed bill clarifies and strengthens breast cancer detection efforts by ensuring 100% coverage for both screening and diagnostic imaging, including supplemental tests like MRIs for women with dense breast tissue and medically necessary diagnostic breast examinations. By addressing previous coverage

gaps, this provision ensures timely follow-up care and reduces delays in diagnosis—particularly benefiting individuals at higher risk or those facing access barriers. This bill aligns with what providers have been calling for: comprehensive, equitable access to preventive services that catch cancer early—when it's treatable and far less costly.

This is more than a healthcare issue. It's about economic stability. Early diagnosis keeps people in the workforce, reduces Medicaid and disability costs, and eases the emotional and financial strain on families and caregivers.

In conclusion, HB 271 is fiscally responsible, widely supported by healthcare institutions, and most importantly, it puts patients first. On behalf of The Health Collaborative, I respectfully urge you to pass this bill and make Ohio a leader in equitable, life-saving cancer care.

Thank you for your time and commitment to Ohio's health.

Respectfully,
Tiffany Mattingly
Chief Engagement Officer & VP, Clinical Strategies
The Health Collaborative