

Testimony in opposition to SB 199
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Chairman Longbine and members of the Committee:

The American Cancer Society Action Network (ACS CAN) appreciates the opportunity to comment on Senate Bill 199. ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. As the nation's leading advocate for public policies that are helping to defeat cancer, ACS CAN ensures that cancer patients, survivors, and their families have a voice in public policy matters at all levels of government. Access to quality health coverage directly affects people's ability to prevent, detect, and survive cancer. **The sad reality is that too much cancer death and suffering is attributable to gaps in our health care system.**

We oppose expanding access to short-term, limited-duration plans (STLDPs) because these plans may deny coverage to individuals with pre-existing conditions, choose to not cover services related to those pre-existing conditions, or charge enrollees higher premiums because of their pre-existing conditions. If a patient eligible for enrollment in a short-term plan finds themselves facing a cancer diagnosis, their plan is likely to leave them with tens of thousands of dollars in costs for their cancer treatment because of the limited nature of STLDP benefits. STLDPs fail to provide the kind of comprehensive coverage an individual would need if they were diagnosed with a serious and unplanned disease such as cancer.

Proponents of short-term plans often claim these products are not intended for all consumers but rather offer a more affordable option than the robust ACA marketplace plans. While premiums for short-term plans are generally lower relative to ACA plans, our analysis shows that short-term plans actually expose enrollees with serious illnesses to much higher out-of-pocket costs.

ACS CAN's *The Costs of Cancer: 2020 Edition*¹ report details the devastatingly high costs a patient with cancer would face if he were enrolled in an STLD plan. The paper depicts the out-of-pocket costs a young patient diagnosed with Non-Hodgkin's Lymphoma would face with different types of insurance coverage. As described in the fact sheet attached to this testimony, the patient would be responsible for paying the largest share of (51%) the costs of his cancer treatment out-of-pocket with coverage under a STLD plan. In fact, in this scenario the patient would be responsible for paying \$51,660 of the \$97,849 total annual cost of treatment.

Providing Kansans access to affordable, comprehensive health care coverage is critical in the fight against cancer. Because short term policies are exempt from many consumer protections, premiums for these products are often lower than Marketplace plans, and therefore can be more attractive options to younger and healthier individuals who qualify for coverage. As more younger and healthier individuals enroll in these products, it can result in higher premiums for comprehensive coverage in the individual market. This means that people with serious and chronic illnesses – like cancer – will have to pay more for their coverage.

ACS CAN encourages lawmakers to protect access to comprehensive health care coverage by opposing SB 199.

¹ ACS CAN. The Costs of Cancer: 2020 Edition. October 2020. www.fightcancer.org/costsofcancer