



January 28, 2024

My name is Deb Violette and I am in support of LD-107 “An Act to Require Health Insurance Coverage for Biomarker Testing.”

Thank you Senator Bailey, Representative Mathieson and distinguished members of the Health Coverage Insurance and Financial Services Committee.

I am President and Founder of Free ME from Lung Cancer a nonprofit base here in Maine.

I am not a professional lobbyist, although I have done my share of lobbying on issues near and dear to me. This bill is one of them. I am a lung cancer patient/survivor. I was diagnosed with stage III disease in 1998. I was given a 10% chance of living two years. I visit my Boston oncologist who monitors my condition and are ready to treat the disease should it progress. 27 years ago biomarker testing was not something that was available to cancer patients.

Biomarker testing is a vital part of ensuring that a patient gets the right treatment plan with the drug that will match their lung cancer type. It is a way to look for genes, proteins and other substances. Some of these biomarkers affect how certain cancer treatments will work. It helps the patient and physician select a cancer treatment designed just for the patient. Some treatments including targeted therapies and immunotherapies may only work for people whose cancers have certain biomarkers. This is a game changer for patients because once their biomarker has been identified a treatment plan can be developed that would best fit the patient. It can also provide evidence about the safety and efficacy of the chosen treatment.

Sadly, not all communities are benefiting from the latest advancements in biomarker testing and precision medicine. Communities that have been excluded including communities of color, individuals with lower socioeconomic state, rural residents and patients receiving care in non-academic medical centers are less

likely to receive biomarker testing. Improving coverage and access to biomarker testing, advances in precision medicine could increase existing disparities in cancer outcomes by race, ethnicity, income, and geography.

Both the National Black Caucus of State Legislators (NBCSL) and the National Hispanic Caucus of State Legislators (NHCSL) adopted resolutions recognizing the importance of biomarker testing in advancing health equity and reducing disparities.

Biomarker testing can improve cancer outcomes in several ways:

1. **Early detection:** Biomarkers can help detect cancer at an early stage, when it is more treatable and curable. For example, biomarkers such as CA-125 can detect ovarian cancer, and biomarkers such as a PSA can detect prostate cancer.
2. **Personalized medicine:** Biomarkers can help identify the specific genetic mutations or molecular characteristics of a patient's cancer, allowing for personalized treatment plans. For example, biomarkers such as HER2 can identify breast cancer patients who are likely to benefit from targeted therapies such as trastuzumab.
3. **Targeted therapies:** Biomarkers can help identify patients who are most likely to benefit from targeted therapies, such as kinase inhibitors or monoclonal antibodies. For example, biomarkers such as EGFR can identify non-small cell lung cancer patients who are likely to benefit from EGFR inhibitors.
4. **Monitoring treatment response:** Biomarkers can help monitor a patient's response to treatment, allowing for adjustments to be made to the treatment plan as needed. For example, biomarkers such as CEA can monitor colorectal cancer patients' response to treatment.
5. **Identifying resistance:** Biomarkers can help identify patients who are developing resistance to treatment, allowing for alternative treatments to be considered. For example, biomarkers such as KRAS can identify colorectal cancer patients who are resistant to EGFR inhibitors.
6. **Improving patient selection:** Biomarkers can help select patients who are most likely to benefit from a particular treatment, reducing the risk of unnecessary side effects and improving treatment outcomes.
7. **Reducing over treatment:** Biomarkers can help identify patients who are at low risk of cancer recurrence, reducing the need for unnecessary treatments and improving patient outcomes.
8. **Improving survival rates:** Biomarkers can help identify patients who are at high risk of cancer recurrence, allowing for more aggressive treatment and improving survival rates.

9. **Reducing treatment cost.** By identifying the biomarker and matching it to the correct drug there will be no guessing if the drug is right for the patient. There will be no more failed treatments. The identification of the biomarker will dictate the correct treatment option for the patient.

Some examples of biomarkers that have improved cancer outcomes include:

1. **HER2:** A biomarker that identifies breast cancer patients who are likely to benefit from targeted therapies such as trastuzumab.
2. **EGFR:** A biomarker that identifies non-small cell lung cancer patients who are likely to benefit from EGFR inhibitors.
3. **KRAS:** A biomarker that identifies colorectal cancer patients who are resistant to EGFR inhibitors.
4. **BRCA1 and BRCA2:** Biomarkers that identify breast and ovarian cancer patients who are at high risk of developing cancer and may benefit from preventive measures such as surgery or chemo prevention.
5. **PD-L1:** A biomarker that identifies patients who are likely to benefit from immunotherapies such as pembrolizumab.

Overall, biomarker testing has the potential to revolutionize cancer care by providing more accurate diagnoses, personalized treatment plans, and improved treatment outcomes. This is why it is so important to pass LD-107 “An Act to Require Health Insurance Coverage for Biomarker Testing.”

Thank you.

Debra Violette

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President