

Testimony in Opposition to

LD 1502 An Act to Update the Requirements for Health Insurance Coverage of Prostate Cancer Screening

Kimberly Cook, Esq. April 29, 2025

Senator Bailey and Representative Mathieson and distinguished members of the Health Coverage, Insurance and Financial Services Committee, my name is Kim Cook and I am an attorney with Government Strategies, testifying in opposition to LD 1502 on behalf of Community Health Options. Community Health Options is Maine's nonprofit CO-OP health insurance company and exists for the benefit of its Members and its mission which is to provide affordable, high-quality benefits that promote health and wellbeing.

The Patient Protection and Affordable Care Act requires carriers offering group or individual health insurance coverage to provider coverage without cost sharing for evidence-based items or services that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force (USPSTF). The USPSTF has evaluated the effectiveness of prostate cancer screenings. The USPSTF assigned a rating of "C" to prostate cancer screenings for men aged 55 to 69 years and "D" to prostate cancer screenings for men 70 years and older. The recommendation summary provided by the USPSTF notes that:

"Screening offers a small potential benefit of reducing the chance of death from prostate cancer in some men. However, many men will experience potential harms of screening, including false-positive results that require additional testing and possible prostate biopsy; overdiagnosis and overtreatment; and treatment complications, such as incontinence and erectile dysfunction."

¹ <u>https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/prostate-cancer-screening</u>



The USPSTF, composed of recognized experts in prevention, evidence-based medicine, and primary care, reviews and assesses the best available evidence to reach a conclusion about the benefits and harms of preventive services. Their current assessment raises questions about the value of this screening and unequivocally states that prostate cancer screening should not be covered at preventive benefit levels. The USPSTF regularly reevaluates the ratings it assigns to services. Their site indicates an update of the recommendation concerning prostate cancer screening is underway.

We appreciate the Committee's consideration of our comments.