



American Cancer Society Cancer Action Network 207-888-9826, Julia.MacDonald@cancer.org https://www.fightcancer.org/states/maine

Testimony of Julia MacDonald, Maine Government Relations Director American Cancer Society Cancer Action Network

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

April 29th, 2025

Senator Bailey, Representative Mathieson, and members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services. On behalf of the American Cancer Society-Cancer Action Network (ACS-CAN) and Maine Public Health Association (MPHA) we write in Support of LD 1502, "An Act to Update the Requirements for Health Insurance Coverage of Prostate Cancer Screening."

ACS-CAN is the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society that advocates for evidence-based public policies to reduce the cancer burden for everyone. MPHA is the state's oldest, largest, and most diverse association for public health professionals; our mission is to advance the health of all people and places in Maine.

The goal of cancer screening is to detect disease early—when it is most treatable, less debilitating, often less costly, and associated with significantly improved outcomes. For cancers of the prostate early detection saves lives.

However, even small out-of-pocket costs can be a barrier to receiving recommended health care, including cancer screenings. Research clearly shows that removing financial barriers increases the uptake of essential preventive services, especially among low-income and marginalized populations. When barriers remain, cancers are more likely to be detected at a later, less treatable stage—leading to worse outcomes and higher mortality rates.

This is especially concerning for prostate cancer, where certain populations are already at higher risk, prostate cancer deaths are one of the starkest examples of cancer-related health disparities. Early detection through screening, like the prostate-specific antigen (PSA) test, is key. Yet men who should be screened are sometimes deterred by out-of-pocket costs such as copays or deductibles—costs that can either be a direct financial burden or introduce a moment of hesitation that leads to delayed or skipped screenings.

Here in Maine, an estimated 1,620 men will be diagnosed with prostate cancer in 2025, and about 200 men will lose their lives to this disease. LD 1502 would help change this by requiring insurance coverage of evidence-based prostate cancer screening without cost-sharing, ensuring more men have access to lifesaving early detection.

Removing cost barriers works. It saves lives, reduces health disparities, and improves health outcomes across our communities.





American Cancer Society Cancer Action Network 207-888-9826, Julia.MacDonald@cancer.org https://www.fightcancer.org/states/maine

On behalf of the American Cancer Society Cancer Action Network, MPHA and the many Mainers impacted by prostate cancer, I respectfully urge you to vote "Ought to Pass" on LD 1502.

Thank you for your time and consideration. I would be happy to answer any questions.