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March 19, 2015

Dear Members of the Colorado House Health, Insurance and Environment Committee,

Thank you for the opportunity to submit a statement regarding House Bill 15-1258 to establish a Family and Medical Leave Insurance program in Colorado. Susan G. Komen Colorado thanks Representatives Winter and Salazar and Senator Ulibarri for bringing House Bill 1258 forward to continue discussion about wage-replacement programs for eligible Colorado workers.

Komen Colorado remains neutral on House Bill 1258, but welcomes the opportunity to provide context about the impact of lost wages when working women (and men) take time off to access breast cancer screenings, diagnostic procedures, and treatment care – or to care for family members being treated for the disease.

Denver- and Aspen-based Komen Colorado is one of more than 115 local affiliates of Dallas-based Susan G. Komen, whose mission is to save lives and end breast cancer forever. Komen Colorado fulfills this mission by:

- empowering women and men to make responsible decisions about their breast health by providing education about breast cancer risk and screening recommendations;
- ensuring equal access to quality breast cancer care for all Coloradans through annual grants totaling upwards of \$2M into local health clinics, hospitals and community-based organizations; and
- energizing science to find the cures for this disease by contributing a portion of funds raised each year to Komen's national breast cancer research program.

As one of two Komen affiliates in Colorado, Komen Colorado's 22-county service area is geographically and demographically diverse, covering rural northeast Colorado, the Denver-metro and northern Front Range communities, and mountain and resort counties along the I-70 corridor. It is our work with health care providers and community-based organizations that serve rural communities, medically underserved women and men in urban areas, and patients that need to cross mountain passes to access care that informs Komen Colorado's engagement on this issue.

Through a community needs assessment Komen Colorado conducted in the past year to evaluate the breast cancer burden across the organization's 22 counties, ***the organization identified difficulty securing time off from work as a consistent barrier for some patient populations to receive the screening, diagnostic procedures, and treatment they needed to detect or treat breast cancer.*** As part of its community needs assessment, Komen Colorado surveyed and interviewed breast health care providers that deliver services throughout the organization's 22-county service area. The chart below captures breast health care providers' assessment of "challenges securing time off" as a barrier to care according to an online survey completed by 116 breast health providers representing 92 organizations.

	<b>Percent of respondents indicating challenges securing time off acted as a barrier to accessing breast cancer care</b>		
<b>Population Served by Providers</b>	Screening	Diagnostic Procedures	Treatment
Medically Underserved in Front Range Counties	64%	57%	48%
Rural Northeast Colorado	45%	48%	38%
Resort and Mountain Communities	63%	52%	48%
Hispanic/Latina Women	72%	65%	63%

Subsequent interviews with radiologists, breast health navigators, and other health care providers found that difficulty securing time off from work to access care was related to distances some patients have to travel to obtain care: ***In rural northeast Colorado and for residents in resort or mountain communities or who live in rural or medically underserved parts of Front Range counties, the ability to travel upwards of 100 miles to facilities where breast cancer diagnostic procedures or cancer treatment is available was affected by the woman's ability to secure time off for travel and care.***

According to one provider, "[Getting treatment] takes people away from a job. It can take half a day out for radiation. So another factor is losing income when trying to get treatment. It is a burden even if you have insurance."

Another provider whose practice includes facilities in Littleton and Aurora highlighted experiences of patients that traveled from Park County – a location with no primary care physician, let alone breast cancer imaging or oncology treatment facilities. "We see people who come before or after work – times when they're not working. They have one day off to get medical care and it's the only day they can do anything or they might lose their job. We see lower-income patients from mountain communities who go to facilities in Jefferson County, or patients who go to an Aurora facility, who are concerned about time off from work."

These anecdotes are consistent with online survey respondents' identifying distance to care as a barrier for some patients as summarized below.

	<b>Percent of respondents indicating distance to travel for care acted as a barrier to accessing breast cancer care</b>		
<b>Population Served by Providers</b>	Screening	Diagnostic Procedures	Treatment
Medically Underserved in Front Range Counties	39%	48%	47%
Rural Northeast Colorado	52%	55%	52%
Resort and Mountain Communities	52%	56%	56%
Hispanic/Latina Women	47%	47%	47%

The identification of "challenges securing time off" and "distance to travel for care" as inter-related barriers to care raises concerns for Komen Colorado for 3 reasons:

1. Women (and men) undergoing breast cancer treatment may lose wages because they are unable to work during their course of treatment or during recovery. This increases anxiety about whether patients and their families will be able to afford mortgage/rent, car insurance/loan, child care, school supplies and college tuition, food, utility, and other

cost-of-living expenses in addition to the health insurance premiums, co-pays, deductibles and co-insurance expenses that come with a breast cancer diagnosis. To evaluate need for such services in the community, Komen Colorado draws on applications the organization receives requesting grant funding to meet a portion of this type of need. For 2015 alone, Komen Colorado received applications requesting nearly \$258,000 from community-based organizations to provide assistance for breast cancer patients who too frequently feel they must choose between paying for treatment or paying for living expenses.

2. Research indicates that when women forgo or delay routine breast cancer screenings and medically recommended diagnostic services, there is an increased likelihood that breast cancer, when detected, will be diagnosed at an advanced stage of diagnosis. Breast cancers detected at advanced stages correspond to lower overall survivorship rates and increased costs for care. For example, breast cancer can be up to five times more expensive to treat when it has spread beyond the breast to other parts of the body, and rates of survivorship plummet from 99% when diagnosed locally to 84% when the cancer is diagnosed at a regional stage to 24% when diagnosed at a distant stage.
3. Breast cancer mortality rates correspond with access to quality breast cancer treatment – which is directly related to patients’ ability to go to the locations where treatment is available. Depending on the stage, location, and type of breast cancer, a patient’s treatment regimen can range from breast-conserving surgery *only* to a double mastectomy paired with dozens of appointments for chemotherapy, radiation, and, in some cases, reconstructive surgery. Challenges getting to locations where this range of treatment services is available can decrease overall compliance with clinically prescribed treatment regimens that evidence has shown increases likelihood of survivorship.

The research is clear: Breast cancer is a survivable disease, and survivorship rates increase when breast cancer is diagnosed – and treated – early. Komen Colorado believes it is important for government, business, and other community leaders to come together to develop comprehensive solutions to recognize – and mitigate – difficulty securing time off as a barrier for some Coloradans to access essential breast cancer screening, diagnostic procedures and treatment services. We recognize the family and medical leave insurance program proposed with this bill will not address all barriers to care. We believe the conversations that ensue through consideration of this bill can serve as critical first steps to address one barrier that contributes to delayed diagnosis and challenges patients face in adhering to their treatment regimens. We appreciate the opportunity to provide insight on this issue.

Sincerely,



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