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Insurance and Real Estate Committee

February 5, 2009

American Cancer Society Testimony

**SB 638 – An Act Requiring Health Insurance Coverage for
Colonoscopies for Colon Cancer Survivors**

Colorectal cancer (commonly referred to as “colon” cancer) develops in the digestive tract, also referred to as the gastrointestinal, or GI, tract. The digestive tract processes the food you eat and rids the body of solid waste matter. This cancer usually develops from precancerous changes or growths in the lining of these organs. These growths of tissue protruding into the colon or rectum are called *polyps*.

Overall, colon cancers are the third most common cancers in men and women, and the second leading cause of cancer death in the United States. The American Cancer Society estimates that about 108,070 new cases of colon cancer (53,760 in men and 54,310 in women) and 40,740 new cases of rectal cancer (23,490 in men and 17,250 in women) will be diagnosed in 2008. Overall, the lifetime risk for developing colorectal cancer is about 1 in 19 (5.4%).

One of the most powerful weapons in preventing new or recurring cases of colorectal cancer is regular colorectal cancer screening or testing. In recent years, the overall mortality rate has declined due in large part to screenings and early detection of precancerous polyps in the lower digestive system. From the time the first abnormal cells start to grow, it usually takes about 10 to 15 years for them to develop into colorectal cancer. Testing often finds these polyps, and allows them to be removed before they have the chance to turn into cancer. Screening can also result in finding colorectal cancer early, when it is highly curable.

Recent research indicates that people who did not have regular follow-up colonoscopies after colorectal cancer surgery are about 45 percent less likely to reach the five-year survival mark.

Not only does colorectal cancer screening save lives, but it also is cost effective. Studies have shown that the cost-effectiveness of colorectal screening is consistent with many other kinds of preventive services and is lower than some common interventions. It is much less expensive to remove a polyp during screening than to try to treat advanced colorectal cancer. With sharp cost increases possible as new treatments become standards of care, the cost-effectiveness of screening is likely to become even more attractive.

Please support SB 638 An Act Requiring Health Insurance Coverage for Colonoscopies for Colon Cancer Survivors. The American Cancer Society believes that all people should benefit from cancer screenings, without regard to health insurance coverage. Limitations on covered benefits should not block your ability to benefit from early detection of cancer. To that end, the Society supports policies that give all people access to and coverage of early detection screening for cancer. Such policies should be age and risk appropriate and based on current scientific evidence as outlined in the American Cancer Society's early detection guidelines.