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**Insurance and Real Estate Committee
February 17, 2015
American Cancer Society Cancer Action Network Testimony**

RE: S.B. No. 872 - AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR SUPPLIES FOR THE TREATMENT OF LYMPHEDEMA.

The American Cancer Society Cancer Action Network (ACS CAN) is pleased to provide comments on SB 872, An Act Requiring Health Insurance Coverage For Supplies For The Treatment Of Lymphedema. ACS CAN is the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society that supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem.

Chronic Lymphedema develops slowly over time. It may show up many months or even years after cancer treatment. The swelling can range from mild to severe. The lymph fluid that collects in the skin and underlying tissues can be very uncomfortable. It can keep nutrients from reaching the cells, interfere with wound healing, and lead to infections.

Lymphedema is seen more often in the arms or legs, but it can happen in other areas, too. If lymphedema occurs after breast cancer treatment, it can affect the breast, chest, and underarm, as well as the arm closest to the surgery. After cancer in the abdomen (belly) or pelvis has been treated, lymphedema may appear as swelling of the abdomen (belly), genitals, or one or both legs. Treatment of tumors in the head and neck area has been linked with lymphedema in the face, mouth, eyes, and neck.

Moderate or severe lymphedema is most often treated by a lymphedema therapist with special training and expertise who will help a patient with skin care, massage, special bandaging, exercises, and fitting for a compression garment. This is sometimes known as *complex decongestive therapy*, or CDT. *Manual lymphatic drainage*, or MLD, is the type of massage used as part of CDT to manage lymphedema. The therapist will also teach you things like how to care for the lymphedema at home and how and when to wear the compression garment.

Most insurance companies pay for lymphedema treatment, but some do not cover the cost of compression garments and dressings. SB 872 AAC Requiring Health Insurance Coverage for Supplies For The Treatment of Lymphedema addresses that issue by requiring coverage of such supplies.

We are mindful that any new state mandate would have a fiscal impact on the state, however, if left untreated, lymphedema can lead to chronic infections, decreased mobility and limited function as well as other illnesses or even emergency needs which are more costly than the supplies.

ACS CAN supports legislation that improves the affordability and availability of health care for cancer patients and we urge a Joint Favorable report on this bill.

Bryte Johnson
Government Relations Director
American Cancer Society Cancer Action Network

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