



May 2, 2023

The Honorable Paul. R. Feeney
Senate Chair, Joint Committee on Financial Services
State House, Room 112
Boston, MA 02133

The Honorable James M. Murphy
House Chair, Joint Committee on Financial Services
State House, Room 254
Boston, MA 02133

Re: S. 647 and H. 1081, Preserving preventive services without cost-sharing

Dear Chairmen Feeney and Murphy and Honorable Members of the Joint Committee on Financial Services,

Thank you for the opportunity to provide comments on Senate Bill 647 and House Bill 1081, which will protect access to no-cost preventive services for Bay Staters. United States of Care is a non-partisan, non-profit organization working to ensure everyone has access to quality, affordable health care, regardless of health status, social need, or income and Community Catalyst is non-profit national health advocacy organization dedicated to building the power of people to create a health system rooted in race equity and health justice, and a society where health is a right for all. We strongly support the efforts to protect no-cost access to preventive services and respectfully request the committee's support of S. 647 and H. 1081.

The high cost of health care impacts every part of people's experience with the health care system, from rising premiums to high deductibles and cost-sharing. In Massachusetts that is no different – [41%](#) of Massachusetts residents report that they or their families had issues accessing health care services due to cost in 2021. Between 2017-2019, health insurance cost sharing and premiums [rose](#) faster than wages and inflation for Massachusetts residents, with more than [80%](#) of people avoiding needed care specifically because the co-payment/co-insurance was too high.

National Landscape and Current Challenges

On March 30, 2023 U.S. District Judge Reed O'Connor issued a nationwide ruling in the *Braidwood Management v. Becerra* case that deemed a portion of the [preventive services mandate under the Affordable Care Act \(ACA\)](#) unconstitutional. The ruling blocks the federal government from requiring health insurance plans to provide no-cost preventive services recommended by the [United States Preventive Task Force \(USPSTF\)](#), the entity responsible for making evidence-based recommendations on the types of preventive screenings and services people need, with an A or B rating on or after March 23, 2010. This ruling impacts those on private health plans, including plans offered through the individual, small and large group markets. More than [3.9 million](#) Massachusetts residents who have private health insurance coverage *may* [lose access to preventive services](#)

without cost-sharing, such as cancer screenings, mental health interventions and PrEP if the legislature does not take action.

We strongly recommend Massachusetts codify language that includes all protections for no-cost preventive services protected in the ACA – services recommended by the USPSTF, services for women, infants, and children by the [Health Resources and Services Administration \(HRSA\)](#) and vaccinations recommended by the [CDC’s Advisory Committee on Immunization Practices \(ACIP\)](#). According to the [Commonwealth Fund](#), 15 states currently protect no-cost access to preventive services for their residents. Additionally, several states have taken recent action to further enshrine protections for patients. [Colorado](#), [New Mexico](#), and [New York](#) passed bills earlier this year that codify protections for some or all of the services recommended by the USPSTF, ACIP, and HRSA; an additional 8 states, including Massachusetts, are currently considering legislation.

Preventive Services Popularity

People have relied on these no-cost services for over a decade and this ruling only injects uncertainty into such an important part of our health care system—and it puts people's lives at stake. Preventive services are an important tool for detecting illness early, improving health outcomes and keeping health care costs low for people. By identifying health issues early, medical professionals are able to address acute conditions quickly, or manage chronic conditions more effectively, avoiding unnecessary emergency room visits and eliminating expensive in-patient hospital stays.

No-cost preventive services are one of the core pillars of the ACA and one of the [most popular](#) aspects of health care coverage, with nearly [3.4 million people](#) in Massachusetts receiving cost-free preventive services in 2020 alone. Concerns about possible costs can keep people from getting preventive services – nearly [half of all people](#) report not being willing to pay for some of the most common preventive services, such as HIV screenings or tobacco cessation if there were a cost. For example, [research](#) shows that introducing some form of cost-sharing for PrEP could increase HIV infections nationwide by 2,000 a year. These changes to coverage will likely have a disproportionate impact on communities of color, low income people, and the LGBTQ community, [further limiting](#) these populations’ access to essential preventive services and reversing progress in [reducing health disparities](#).

We thank the committee for your commitment to ensuring Massachusetts residents are able to access the services they need to keep themselves and their families healthy, without worrying how to pay for it. We urge the committee to vote in favor of advancing these bills. Please consider our organizations a resource; if you have any questions regarding our comments please don’t hesitate to reach out.

Sincerely,

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