

Connecticut Commission on
Women, Children *and* Seniors



CWCS

**Testimony of the
Commission on Women, Children and Seniors
Submitted to the
Insurance and Real Estate Committee
March 2, 2017**

Re: S.B. 877, AA Authorizing Pregnancy as a Qualifying Event for Special Enrollment Periods and S.B. 883, AA Redefining Mammogram and Limiting Cost-Sharing for Mammograms and Magnetic Resonance Imaging of Breasts

Senators Larson and Kelly and Representative Scanlon, and distinguished members of the Insurance and Real Estate Committee, thank you for the opportunity to provide testimony on behalf of the Commission on Women, Children and Seniors (CWCS) in support of the above referenced bills.

S.B. 877, AA Authorizing Pregnancy as a Qualifying Event for Special Enrollment Periods

S.B. 877 would permit a pregnant individual to enroll in a health insurance policy or plan at any time after the individual's pregnancy has been certified by a physician or an advanced practice registered nurse. Currently, it is difficult for an individual who becomes pregnant and is uninsured to gain health insurance because pregnancy is not usually considered a triggering event outside of open enrollment periods.

Having a healthy pregnancy is critical to a healthy birth outcome. Prenatal care is an essential component of a healthy pregnancy and with regular prenatal care visits a pregnant individual can;

- Reduce the risk of pregnancy complications. Following a healthy, safe diet; getting regular exercise as advised by a healthcare provider; and avoiding exposure to potentially harmful substances such as lead and radiation can help reduce the risk of problems during pregnancy and ensure the infant's health and development. Controlling existing conditions, such as high blood pressure and diabetes, is important to avoid serious complications in pregnancy such as pre-eclampsia¹;
- Help ensure the medications they are taking are safe; and
- Reduce the infant's risk of complications.

Without health insurance coverage during pregnancy, it is more likely that a pregnant individual may forgo important prenatal care, which can lead to dangerous outcomes for both mother and baby.

Additionally, without insurance, birth itself is very expensive. It is estimated that the uninsured cost of having a baby is anywhere from \$30,000 for an uncomplicated vaginal birth to \$50,000 for a C-section. Between the out-of-pocket costs for prenatal care and the costs associated with birth, an uninsured new mother would be facing a high level of debt that threatens her ability to be economically secure.

Lastly, post-natal care is important to ensure the physical and mental health of new mothers as they recover from giving birth. During a post-natal doctor's visit new mothers will;

- Have any incisions or tears checked to encourage proper healing;
- Be screened for postpartum depression;
- Receive support for breast feeding; and
- Be able to discuss any health concerns or new parenting challenges.

Allowing pregnancy to be a triggering event so that a pregnant individual can enroll in a healthcare plan will help ensure that financial barriers do not cause someone to forgo pre- and post-natal care and that they do not face an insurmountable level of debt because of the cost of giving birth.

S.B. 883, AA Redefining Mammogram and Limiting Cost-Sharing for Mammograms and Magnetic Resonance Imaging of Breasts

S.B. 883 would, in part, limit the co-pay for a mammogram to a maximum of \$20. There are currently 1,463,000 women over the age of 18 in Connecticut, and 305,560 women age 65 and over – an age when women are at greater risk of developing breast cancer.ⁱⁱ

Currently, about 1 in 8 women in the United States will develop invasive breast cancer over her lifetime.ⁱⁱⁱ Breast cancer is the most common form of cancer in American women of any race or ethnicity. Among Hispanic women, breast cancer is the most common cause of death by cancer; among all other races and ethnicities, breast cancer is the second most common cause of death by cancer.^{iv} Regular screenings for breast cancer increase the likelihood of early detection, when treatment is easier.^v

Limiting the amount an insurance company can charge for a co-pay for a mammogram will help ensure that mammograms are accessible and affordable and will promote early detection of breast cancer.

Thank you for your time and attention to these important matters affecting women.

ⁱ The National Institute of Child Health and Human Development

ⁱⁱ U.S. Census Bureau, American Fact Finder, 2012 American Community Survey 1-Year Estimates

ⁱⁱⁱ BreastCancer.org, U.S. Breast Cancer Statistics <http://www.breastcancer.org/symptoms/understand_bc/statistics>

^{iv} U.S. Centers for Disease Control and Prevention, Breast Cancer Statistics <<http://www.cdc.gov/cancer/breast/statistics/>>

^v U.S. Centers for Disease Control and Prevention, What Can I Do to Reduce My Risk for Breast Cancer? <http://www.cdc.gov/cancer/breast/basic_info/prevention.htm>