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RE: HB 376

Health Insurance—Diagnostic and Supplemental Examinations for Breast Cancer—Cost-Sharing

Position: SUPPORT

Hello, my name is Lisa Schlager, and while I serve in a professional capacity with FORCE (Facing Our Risk of Cancer Empowered), I am here today to share my personal story. In 1999, at the age of 32, I learned that I carry an inherited BRCA1 genetic mutation that significantly increases my risk of breast, ovarian and other cancers.

While scary, I feel blessed to have access to this information. You see, for 3 generations before me, every woman on my father's side of the family was diagnosed with breast or ovarian cancer. My grandmother and great-grandmother succumbed to the disease at young ages, while my aunt was fortunate to be diagnosed early and to learn of her genetic mutation. I was the first in my generation to have an explanation for these cancers—and to have the power to be proactive with my health in order to catch cancer earlier, or to prevent it altogether.

Upon learning of my mutation, I was referred to a number of specialists to help me manage my risk. Hereditary cancers often occur at younger ages so national medical guidelines recommend that women like me undergo more intensive, more frequent cancer screenings starting at younger ages. BRCA mutation carriers are advised to have annual breast MRIs starting at age 25, alternating with mammograms every 6 months starting at age 30.

Unfortunately, many health insurers do not view this as essential care. Over the years, my annual cost for breast screenings ranged from \$100 to nearly \$3000 out-of-pocket depending on my insurance. I am fortunate to have great health insurance, and that my husband and I were able to shoulder these costs—but every day I hear from people who can't afford the recommended scans. Sadly, these are often the ones who end up being diagnosed with more advanced disease.

If I had learned about my mutation when I was younger and less financially stable, I would have been in the same position. Screenings for women at average risk of breast cancer are covered at 100%. We need to do the same for those at increased risk. Ultimately, this will save lives and money by detecting cancers earlier, when they are easier and less expensive to treat.