

HB3886



100TH GENERAL ASSEMBLY

State of Illinois

2017 and 2018

HB3886

Introduced , by Rep. Gregory Harris

SYNOPSIS AS INTRODUCED:

Appropriates \$11,000,000 from the General Revenue Fund to the Department of Public Health for its Breast and Cervical Cancer Program. Effective July 1, 2017.

LRB100 10449 KTG 20659 b

A BILL FOR

1 AN ACT concerning appropriations.

2 **Be it enacted by the People of the State of Illinois, represented**
3 **in the General Assembly:**

4 Section 5. Purpose.

5 Breast cancer is the second leading cause of cancer death
6 among women today.

7 An estimated 10,210 women will be diagnosed with breast
8 cancer and 520 women will be diagnosed with cervical cancer in
9 Illinois in 2017.

10 When breast cancer is detected early, women have an almost
11 100% chance of survival but when the cancer has spread to
12 distant organs, that survival rate goes down to only 26%.

13 When cervical cancer is detected early, women have a 93%
14 chance of survival but when cervical cancer has spread to
15 distant organs, that survival rate goes down to only 17%.

16 The National Breast and Cervical Cancer Early Detection
17 Program was established to provide uninsured women with access
18 to free breast and cervical cancer screenings so as to improve
19 survival rates for medically underserved women and Illinois

1 established such a program as a grantee of the federal program.

2 The Illinois Breast and Cervical Cancer Program (IBCCP)
3 served over 40,000 women in FY10 and received \$15,700,000 in
4 State funding in addition to \$4,000,000 provided in State
5 general revenue funding for the Stand Against Cancer program,
6 which also provided access to these services specifically for
7 minority women.

8 Even at the height of funding in FY10, the Illinois Breast
9 and Cervical Cancer program only served 13% of uninsured women
10 over the age of 40.

11 Although the Affordable Care Act (ACA) has provided health
12 insurance to many previously uninsured Illinois residents, only
13 36% of IBCCP enrollees signed up for an insurance option in the
14 first 2 years of the ACA. Many women signing up through the
15 exchange find monthly premiums too expensive and eventually
16 become uninsured again. Furthermore, the continuation of the
17 ACA is now uncertain.

18 The number of women served by the Illinois Breast and
19 Cervical Cancer program has fallen dramatically to only 13,455
20 in FY16 and countless women have been denied access to life
21 saving services with waitlists growing at many lead agencies.

1 The waitlists and lack of advertising for the program has
2 reduced the number of women even seeking services from IBCCP
3 lead agencies.

4 The U.S. Centers for Disease Control and Prevention
5 released a Request for Applications (FOA DP17-1701) that
6 requires grantees such as the Department of Public Health to
7 engage in 7 new strategies to improve access to screenings,
8 reduce health disparities, and reduce morbidity and mortality
9 related to these cancers.

10 The FOA requires the Department of Public Health to promote
11 greater collaboration, to engage with external partners, to
12 establish community partnerships that support increased breast
13 and cervical cancer screening, to establish health system
14 partnerships with broad reach to increase screenings, to
15 improve knowledge about the need for breast and cervical cancer
16 screenings among priority populations, to increase the use of
17 and implementation of evidence-based interventions to improve
18 screening rates, to improve provider knowledge of screening
19 guidelines along with increased provider recommendations for
20 such screenings, to improve adherence to rescreening, timely
21 diagnostic follow up and cancer treatment referral, and to
22 increase knowledge of healthy lifestyle behaviors that reduce

1 the risk of breast and cervical cancer.

2 All of these new activities that are designed to increase
3 levels of screening, along with prior years' experience of
4 inadequate funding, suggest that increased funding from federal
5 and State sources are needed to more adequately ensure that
6 uninsured and underinsured women's lives are not unnecessarily
7 cut short due to lack of access to effective breast and cervical
8 cancer early detection services.

9 Section 10. The amount of \$11,000,000, or so much of that
10 amount as may be necessary, is appropriated from the General
11 Revenue Fund to the Department of Public Health for its Breast
12 and Cervical Cancer Program.

13 Section 99. Effective date. This Act takes effect July 1,
14 2017.