

Senate Health & Human Services Committee
Written Testimony
Texas Medical Association
May 14, 2024

Chair Kolkhorst and members of the Senate Health & Human Services Committee:

The Texas Medical Association (TMA), representing more than 57,000 physician and medical student members across the state, appreciates the opportunity to submit comments on the cancer prevention interim charge to identify and recommend ways to address the growing impact of cancer on Texans. We urge the Senate to increase state investments in cancer prevention and screenings and increase funding for the Cancer Prevention and Research Institute of Texas (CPRIT).

TMA supports increased funding of CPRIT to bolster cancer screening and prevention efforts to help detect cancer early and reduce cancer deaths for Texans. TMA encourages increased access, funding, and patient education on recommended screening tests, e.g., low dose CT (computed tomography) scans for lung cancer, mammograms, Pap smears, colonoscopies, and PSA (prostate-specific antigen) tests. Cancer screening efforts should be focused on these recommended tests rather than screening modalities, such as MRI (magnetic resonance imaging) or PET (positron emission tomography), which are not currently the standard of care for early detection of cancer. Additionally, bolstering cancer prevention efforts such as tobacco cessation and HPV vaccination can also help decrease cancer morbidity and mortality (illness and death).

The growing impact of cancer on Texans can also be addressed by focusing on cancer screening and prevention efforts in rural areas, where there is limited health care access. Lack of access to health care is a significant barrier to screening for rural, underserved, uninsured, and underinsured individuals. Investments in efforts to reach these populations, such as through partnerships with federally qualified health centers or mobile mammography units, should be studied. Increased colorectal cancer prevention and awareness efforts are also needed to reach adults under the age of 50. This group has recently experienced higher rates of colorectal cancer, prompting the lowering of the recommended age for screening to begin at age 45.

Prevention efforts, screenings, and improved treatment are effective at lowering cancer mortality.¹ According to a 2023 report by the Perryman Group, the direct medical cost of cancer morbidity and mortality in Texas was an estimated \$56.3 billion, up from \$51 billion in 2022 and \$47.7 billion in 2021.² TMA applauds the Texas Legislature for continuing to make the fight against cancer a statewide priority, and we urge further momentum in this work. Texas physicians care for our patients and their families, knowing that decreasing cancer morbidity and mortality equates to fewer Texas families being torn apart by cancer. For further questions, please contact Matt Dowling, TMA director of public affairs, at matt.dowling@texmed.org.

¹ Siegel RL, Miller KD, Wagle NS, Jemal A. Cancer statistics, 2023. *CA Cancer J Clin*. 2023;73(1):17-48. doi: 10.3322/caac.21763. <https://acsjournals.onlinelibrary.wiley.com/doi/10.3322/caac.21763>

² The Perryman Group. An Economic Assessment of the Cost of Cancer in Texas and the Benefits of the Cancer Prevention and Research Institute of Texas (CPRIT) and its Programs: 2023 Update. 2023. <https://www.cprit.texas.gov/media/3199/perryman-cprit-impact-11-30-2023.pdf>