Testimony of Representative Donald M. Payne, Jr.

Before the Committee on Energy and Commerce

Members' Day Hearing Thursday July 25, 2019, 10:00 a.m. 2123 Rayburn House Office Building

Good Morning and thank you Chairman Pallone, Ranking Member Walden, and Members of the

Committee for allowing me this opportunity to speak with you today.

As some of you may know, my father, Congressman Donald Payne, Sr., died of colorectal cancer.

Colorectal cancer is the second leading cause of cancer deaths in the United States among men

and women combined. Though it is a preventable disease, my father did not get screened. Sadly,

his case is not unique – one out of every four Americans between the ages of 50 to 75 are not

screened for this deadly disease.

I am here today to encourage the Committee on Energy and Commerce to consider HR 1570, the

Removing Barriers to Colorectal Cancer Screening Act. This bill, which I introduced along with

Reps. Rodney Davis, Donald McEachin, and David McKinley, has 285 bipartisan cosponsors and

is an important step in increasing colorectal cancer screening rates in the United States. Ensuring

that people can get their recommended screenings for colorectal cancer can help individuals detect

cancer earlier when it's more treatable, or even prevent cancer altogether.

Under current law, Medicare covers a screening colonoscopy for beneficiaries without any cost-

sharing. However, Medicare requires seniors to pay 20 percent coinsurance if polyps are found

and removed during the screening. Removing precancerous polyps during a colonoscopy can

prevent cancer, making colonoscopies a unique preventive service, but there is no way to know if

you have polyps until after the colonoscopy is completed. This coinsurance requirement can cause

seniors to wake up to a surprise bill of as much as \$350, which can act as a serious deterrent to this

lifesaving cancer screening. More importantly, those who have private insurance do not face this same cost barrier.

The Removing Barriers to Colorectal Cancer Screening Act would fix this glitch, waiving patient cost-sharing requirements for colonoscopies and removing a potential barrier for seniors to get screened for colorectal cancer. It is critically important that Medicare-eligible seniors be screened for colorectal cancer because approximately 60 percent of cases and 70 percent of deaths due to colorectal cancer occur in those aged 65 years and older.

I believe the administration has the legal authority to make this policy change, and they are currently considering what policy changes to include in this year's proposed Medicare physician fee schedule rule. Earlier this year, I worked with colleagues on both sides of the aisle to lead a letter sent by 83 members of the House asking the administration to make this policy change. We strongly encourage CMS to take action to waive this cost sharing.

However, if the administration does not make this policy change, I respectfully request the Committee take action on this legislation to ensure that seniors do not have a barrier to colorectal cancer screening.

Mr. Chairman, thank you, and I yield back.