

January 18, 2022

The Honorable Nancy Pelosi Speaker U.S. House of Representatives Washington, DC 20515

The Honorable Frank Pallone Chairman, Energy and Commerce Committee U.S. House of Representatives Washington, DC 20515

The Honorable Rosa DeLauro
Chair, House Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

The Honorable Kevin McCarthy Minority Leader U.S. House of Representatives Washington, DC 20515

The Honorable Cathy McMorris Rodgers Ranking Member, Energy and Commerce Committee U.S. House of Representatives Washington, DC 20515

The Honorable Kay Granger
Ranking Member, House Committee on
Appropriations
U.S. House of Representatives
Washington, DC 20515

Dear Speaker Pelosi, Minority Leader McCarthy, Chairman Pallone, Chair DeLauro, Ranking Member McMorris Rodgers, and Ranking Member Granger:

The CAP is the world's largest organization of board-certified pathologists and the leading provider of laboratory accreditation and proficiency testing programs. The CAP serves patients, pathologists, and the public by fostering and advocating excellence in the practice of pathology and laboratory medicine worldwide. As you are aware, pathologists are physicians who specialize in the diagnosis of disease. The expertise they provide drives treatment decisions that optimize outcomes for patients. They play an integral role in the diagnosis of diseases such as cancer (breast, prostate, cervical, leukemia, and kidney), hepatitis, and cirrhosis. Further, pathologists are on the frontline of the current COVID-19 pandemic. They are responsible for developing and selecting new test methodologies, validating, and approving tests for patient use, and expanding the testing capabilities of the communities they serve to meet emergent needs.

As physicians and stewards of laboratory medicine, the CAP and its members are committed to achieving health equity and addressing disparities in care to ensure quality, accessible patient care for everyone. As such, on behalf of the College of American Pathologists, I write to ask that you include authorization language and funding to close the Medicaid coverage gap and address social determinants of health in the next government funding bill.



Medicaid Expansion

The CAP is committed to ensuring patients get the right test at the right time, so they get an accurate diagnosis and receive the right care regardless of their race, ethnicity, gender, socio-economic status, or geographic location in the country. As such, expanding Medicaid coverage is essential because people without health insurance are more likely to delay needed medical care, including diagnostic testing and screening services. Access to preventative care, cancer screening services, and other services, as well as treatment for chronic illnesses and mental health disorders are essential for communities of color, rural communities, and other underserved populations. For example, people of color who are diagnosed with lung cancer face worse health outcomes compared to white Americans because they are less likely to be diagnosed early, less likely to receive surgical treatment, and more likely to not receive treatment.

As you know, Medicaid enrollment increased dramatically because of the COVID-19 public health emergency, but there are still millions of uninsured individuals currently eligible for Medicaid. Approximately two million more individuals would be eligible for Medicaid except that they live in states that have declined to adopt the Affordable Care Act's Medicaid expansion (and thus fall in the "Medicaid gap"). The CAP believes that expanding Medicaid coverage and closing the Medicaid gap is an essential component to ensuring health care coverage for low-income patients to combat health care inequalities and disparities in the United States. While the CAP respects the rights of states not to expand Medicaid coverage, in the absence of state action the CAP supports federal efforts to close the Medicaid gap for patients living in those states. The CAP believes any federal program should provide for reasonable cost-sharing that offers essential benefits, beneficiary protections, and access to care standards that are at least consistent with or equivalent to current law. Further, the CAP believes the Congress should require that Medicaid payment rates be raised to at least Medicare levels as a means of increasing physician participation in the Medicaid program and providing robust access to high-quality specialty care for Medicaid patients.

The CAP also supports proposals to expand Medicaid coverage by providing both premium tax credits that would pay for coverage plans offered in ACA marketplaces and enhanced cost-sharing assistance for out-of-pocket expenses. Additionally, Congress should also consider mechanisms to expand coverage to those already eligible for Medicaid through proposals like auto-enrollment, increased outreach and education, or simplified enrollment processes.

Social Determinants of Health

Social determinants of health (SDOH) impact the quality of everyone's life and are the primary drivers of health outcomes. In addition to the everyday work pathologists do, the CAP Foundation created the See, Test and Treat program. It is designed to help overcome the social determinants of health underserved communities face when trying to access care. This pathologist-led initiative delivers free cervical and breast cancer screening to medically underserved women in the United States who face language, cultural, financial, and transportation barriers to health care. Every See, Test & Treat



program takes place in a hospital or clinic that has agreed to create an electronic medical record for each woman and further commits to ensure follow-up care for all women who participate.

Over 30 million people in the U.S. are without health insurance. People without health insurance are less likely to have access to, and may not be able to afford, the health care services they need. Access to services like preventive care, cancer screenings, and treatment for chronic illnesses are essential for communities of color, rural communities, and other underserved populations. In some instances, people don't get recommended health care services, like cancer screenings, because of long travel distances to screening sites, a lack of health insurance, a lack of transportation to a medical facility, or a lack of paid medical leave. People who do not have reliable access to health care are also more likely to be diagnosed with late-stage cancer that might have been treated more effectively if diagnosed earlier.

As you know well, disease knows no political affiliation, race, or gender. Disease does not discriminate. It destroys equally. The CAP is grateful that Congress has made generous bipartisan investments in testing, vaccines, and economic support to physicians and their patients. I urge you to continue that trend by closing the Medicaid gap and funding efforts to address social determinants of health. If you have any questions, concerns, or need additional information, please contact Darren Fenwick at dfenwic@cap.org.

Sincerely,

Emily E. Volk, MD, FCAP

President