

**CONGRESSMAN FRANK PALLONE, JR.**  
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**PALLONE STATEMENT AT HEALTH HEARING  
ON FOUR BREAST CANCER BILLS**

*Washington, D.C. --- U.S. Rep. Frank Pallone, Jr. (D-NJ), Chairman of the House Energy and Commerce Subcommittee on Health, gave the following opening statement today at a subcommittee hearing on four pieces of legislation that focus on prevention, early diagnosis and treatment of breast cancer. While we have made great strides in reducing the number of breast cancer deaths in this country, 40,000 women will die this year alone from the disease.*

“Good morning. Today the Subcommittee is meeting to review four bills relating to breast cancer: HR 995, the Mammogram and MRI Availability Act of 2009 (Nadler); HR 1691, the Breast Cancer Patient Protection Act of 2009 (DeLauro); HR 1740, the Breast Cancer Education and Awareness Requires Learning Young Act of 2009 (Wasserman Schultz); and HR 2279, the Eliminating Disparities in Breast Cancer Treatment Act of 2009 (Castor). I would like to thank all of the sponsors of these bills for their hard work on raising awareness about these very important issues.

“Aside from non-melanoma skin cancer, breast cancer is the most commonly diagnosed cancer in women. The NIH estimates that over 190,000 new cases of breast cancer will be diagnosed in women in 2009. And though we have seen breast cancer death rates decline since 1990, still approximately 40,000 women will succumb to the disease this year.

“This is why the work of advocacy groups and the key sponsors of the bills today, is so crucially important. We have made great strides in detecting and treating breast cancer but there is still much more to be done, and much more to learn.

“While all of these bills address concerns related to breast cancer, they all focus on different aspects of the disease from screening and early detection to treatment and quality improvement. And they all raise very important issues with respect to how breast cancer patients, or any other patients for that matter, are being treated in the medical environment we live in today. Not every American has access to good preventive services; not every American has the good fortune to have an insurance plan that covers the medical care they need.

“That’s why we are hard at work trying to pass health reform legislation that will improve access to quality and affordable health care for every American. If enacted, health reform legislation will dramatically improve our efforts in the battle against breast cancer.

“Particularly important are the insurance reforms. In drafting America’s Affordable Health Choices Act, we took the same tact as Ms. DeLauro did in taking decision making authority out of the hands of health insurers and putting it back in the hands of patients and their doctors, where it belongs.

“In addition, the subsidies offered in the Exchange and expansion of the Medicaid program to cover childless adults will mean that many low and middle income women who might not have access to health insurance today will be covered in the future thanks to health reform. That means they will be able to access a doctor and receive treatment when they need it.

“A key component to winning the battle against breast cancer is effective and appropriate screening, which both Ms. Wasserman Schultz’ and Mr. Nadler’s bills seek to address. Early detection of breast cancer has long been acknowledged as an effective way to improve outcomes. In fact, studies have shown that the 5-year survival rate in women who have received timely treatment due to early detection is at 98%. This is why the US Preventive Services Taskforce has recommended that all women over the age of 40 have a mammography screening every one or two years.

“I agree with my colleagues. Early detection and prevention is key to survival. That’s why in health reform we bolster the very important work that the US Preventative Services Task Force does by providing increased funding so that they can analyze more studies and make more prevention recommendations. The evidence-based recommendations that receive the highest ratings from the task force, such as mammography screenings, will be covered by all insurance carriers participating in the Health Insurance Exchange and by Medicaid. And while Medicare already covers these services, under health reform, beneficiaries would no longer face cost-sharing requirements to receive them.

“In addition, we must also improve the quality of care that is provided in this country as Ms. Castor is seeking to do with her bill. Tens of thousands of Americans die due to preventable medical errors every year. Billions of dollars are wasted on low quality care. We as a nation must do better.

“Improving quality is a concept we picked up in Health Reform as well. We require the Secretary to establish national priorities for quality improvement and we also create a Center for Quality improvement. The center will develop and encourage the use of best practices for quality assurance and will provide implementation grants to those who are already doing innovative work to improve the quality of care. Using breast cancer as an example, we can and must do better to ensure that all Americans receive the highest quality care and that we collect data that will help us continuously improve as more information becomes known about the medical system and specific diseases.

“I would like to thank all of our witnesses for being here today, I look forward to your testimony. I now recognize our Ranking Member, Mr. Deal for five minutes for the purpose of making an openings statement.”