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Testimony of the American Cancer Society Cancer Action Network
On Governor Cuomo's Proposed Budget
Bill Sherman, Vice President Government Relations
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Chairman DeFrancisco, Chairman Farrell, and Members of the Senate and Assembly, my name is Bill Sherman and I am the Vice President of Government Relations for the American Cancer Society Cancer Action Network. Today I am here with Michael Burgess, our state director of government relations and we are testifying on behalf of the approximately 908,000 cancer survivors in New York State and the projected 108,000 New Yorkers who will be unfortunately be diagnosed with cancer in 2015. I am also speaking on behalf of their families, loved ones and the more than 100,000 devoted volunteers of the American Cancer Society Cancer Action Network in New York. I am confident every one of you on the dais and everyone here in this hearing room has a cancer story. My story includes my mother and father. I lost my father at the age of 58, and my mother is a two time breast cancer survivor. Fighting cancer is a personal matter to me and the thousands of volunteers we represent.

I would like to address several issues in the Governor's budget proposal that are important to our mission to eliminate cancer as a major health problem.

My intention today is to help you understand that decisions made by you and your colleagues as well as Governor Cuomo can literally mean life or death to those living with cancer and those who will be diagnosed in the future. It is projected that some 34,600 people will die from the disease in New York State this year[1]. We cannot sit idly by and accept this.

There are programs and policies that are proven life savers, and we ask that you support them.

To start, it is crucial that you support full funding for New York State's Cancer Services Program.

[1] American Cancer Society. Cancer Facts and Figures 2015

New York Cancer Services Program (CSP)

The New York Cancer Services Program supports live saving early detection screenings, breast cancer wellness grants and legal support programs for cancer patients and their families across the state.

The CSP provides breast, cervical, and colorectal cancer screenings to low income women and men who do not have health insurance, or who have health insurance that does not cover the cost of these cancer screenings. According to the Kaiser Family Foundation there are approximately 1.75 million New Yorkers with no health insurance, and untold thousands more who have insurance that either does not cover these critical screenings or includes excessively high co-payments. All of this leads to thousands of New York residents failing to get life-saving cancer screenings if the CSP were cut.

Mammograms and clinical breast exams are available to women ages 40 and older or women under age 40 at high risk for breast cancer. Cervical cancer screenings are available to women ages 40 and older. Colorectal cancer screenings are available to men and women ages 50 and older at average risk for colorectal cancer, or under age 50 for those with high risk. These vital tests and exams can detect cancer in people who do not have any symptoms. Detecting cancer at its earlier, more treatable stage can save lives as well as health care dollars.

Breast cancers that are found because they are causing symptoms tend to be larger and more likely to have already spread beyond the breast. In contrast, breast cancers found during regular screening exams are more likely to be smaller and still confined to the breast. The size of a breast cancer and how far it has spread are some of the most important factors in predicting the prognosis of a woman with this disease. Early detection tests for breast cancer save thousands of lives each year, and many more lives could be saved if even more women accessed breast cancer screening tests. Screening tests improve the chances that breast cancer can be diagnosed at an early stage and treated successfully.

The most common form of cervical cancer starts with pre-cancerous changes. With PAP tests, it is possible to find and treatpre-cancers before they can turn into invasive cancer. If a pre-cancer is found, it can be treated, stopping cervical cancer before it really starts. Most invasive cervical cancers are found in women who have not had regular screening.

Regular colorectal cancer screening is one of the most powerful weapons for preventing colorectal cancer. Screening is the process of looking for cancer or pre-cancer in people who have no symptoms of the disease. From the time the first abnormal cells start to grow into polyps, it usually takes about 10 to 15 years for them to develop into colorectal cancer. Regular screening can, in many cases, prevent colorectal cancer altogether. This is because most polyps can be found and removed before they turn into cancer.

In 2013 107,330 cancer screenings were performed through the CSP. Sadly, the Governor's proposed budget would cut the Cancer Services Program budget by approximately $3 million or 15 percent and put the program into a consolidated fund which includes many other programs. Decisions on where to spend these important state funds should rest with the state legislature, not some unknown, unelected state bureaucrat who is only accountable to one person. If the 15 percent cut is adopted, using the 2013 screening figures, 16,099 of the most underserved patients will be turned away from potentially life-saving cancer screenings. Who here wants to tell that mom, dad, brother or sister they can't be screened for cancer?

The American Cancer Society Cancer Action Network asks you to fully restore funding for the New York State Cancer Services Program to $25.3 million annually and reject the proposal to put chronic disease programs into consolidated pools. With an estimated 14,900 new cases of breast cancer, 870 new cases of cervical cancer, and 8,010 new cases of colorectal cancer in New York this year, now is not the time to be cutting this life-saving program[2].

Another program that has proven successful in helping people quit smoking and educating non-smokers so they do not start is the New York State Tobacco Control Program.

Tobacco Control Program Funding (TCP)

Tobacco use remains the single largest preventable cause of disease and premature death in the United States. Over 2.5 million adults and over 108,000 high school students in New York smoke.[3] Every year 13,500 New York kids under 18 become new daily smokers.[4]

Lung cancer is the number one cancer killer in New York for both men and women. In 2015 an estimated 13,180 New Yorkers will be diagnosed with lung cancer and 8,740 will die from the disease[5]. In fact, an estimated 28,200 New York residents die each year from their own smoking.

In addition to the massive toll tobacco has on the health of our state, it causes a large financial burden. The annual health care costs in New York directly caused by smoking totals $10.39 billion, with $6.62 billion covered by the state Medicaid program[6]. Additionally, New York loses an estimated $7.33 billion in smoking-caused productivity losses each year[7]. If we don't invest more to reduce New York's smoking rates, we will continue to pay substantially more in the treatment of the preventable effects of tobacco use.

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[2] American Cancer Society. Cancer Facts and Figures 2015.
[3] Campaign for Tobacco Free Kids. The Toll of Tobacco in New York. Updated January 8, 2015.
[4] Campaign for Tobacco Free Kids. The Toll of Tobacco in New York. Updated January 8, 2015.
[5] American Cancer Society. Cancer Facts and Figures 2015.
[6] Campaign for Tobacco Free Kids. The Toll of Tobacco in New York. Updated January 8, 2015.
[7] Campaign for Tobacco Free Kids. The Toll of Tobacco in New York. Updated January 8, 2015.

The best approach to reducing tobacco use—both smoking and the use of other tobacco products such as snuff and chewing tobacco—includes comprehensive programming that combines educational, clinical, regulatory, economic, and social strategies.

New York has slashed its tobacco control budget in half since 2007. During that time, New York has dropped from 5th to 20th among states' per capita spending on tobacco control. As funding for the TCP has reduced so too have the number of calls placed to the New York State Smokers Quit Line. The numbers are directly correlated. This is evidence the TCP works. Almost 70 percent of current smokers say they want to quit, and 52 percent made a quit attempt in the past year[8]. We know it is hard to break the habit of tobacco. The Tobacco Control Program provides invaluable help to those New Yorkers desperately trying to quit.

The Governor's proposed budget to maintain but not increase the program's budget at $39.3 million does not go far enough to protect the health of our state. The Centers for Disease Control and Prevention (CDC) recommends that New York spend $203 million annually on tobacco prevention and cessation programs.

Having said this, we understand the fiscal constraints in the current economic environment. Therefore, the American Cancer Society Cancer Action Network requests that funding for the tobacco control program be increased by $13 million, for a total of $52 million as the first step in a multi-year effort to increase towards the CDC recommended funding level. This step will help save lives and save health care costs.

Other programs that save lives and health care costs in New York State are supported by the Healthy Food and Healthy Communities Fund.

Healthy Food and Healthy Communities Fund (HFHC)

Obesity, physical inactivity, and poor nutrition are major risk factors for cancer, second only to tobacco use. One third of the estimated 585,720 cancer deaths in the US last year can be attributed to poor diet, physical inactivity, and excess weight. Excess weight is associated with increased risk for several common cancers, including colon, esophageal, kidney, pancreatic, endometrial, and postmenopausal breast cancer. Maintaining a healthy body weight throughout life is key to reducing cancer risk. In New York State, over 61% of adults are considered overweight or obese. [9]

Poor nutrition and the consumption of high-calorie foods and beverages are major contributors to excess weight and increase the risk of cancer. The American Cancer Society recommends

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[8] American Cancer Society Cancer Action Network. How Do You Measure Up? August, 2014.
[9] Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System. New York 2013 Overweight and Obesity(BMI).

consuming a healthy diet, with an emphasis on plant foods, in order to reduce cancer risk. Recommendations include choosing foods and beverages in amounts that achieve and maintain a healthy weight, limiting consumption of processed and red meats, consuming fruits and vegetables and whole grains instead of refined grain products, and limiting alcohol intake. For more information on the link between obesity, poor nutrition, and cancer please see our fact sheet enclosed with this testimony.

In order to reduce cancer risk and build a healthier New York, it is imperative to help those residents that struggle to access affordable, healthy food. For those that live in food deserts, or areas where it is difficult to buy fresh food, a trip to the grocery store is anything but easy.

New York has made a strategic investment to help New Yorkers and their families eat healthier with the New York Healthy Food and Healthy Communities Fund (HFHC). A $30 million public-private partnership, the HFHC Fund began in 2009 with $10 million in state funds and $20 million from Goldman Sachs. The program provides much needed grants and loans to supermarkets, grocery stores, farmers markets, and other healthy food retailers in underserved communities across the state.

By providing this economic incentive, supermarkets and mobile markets have been placed in areas that otherwise would not have access to healthy foods. As of June 2014, the HFHC Fund provided over $24 million in loans and issued over $2 million in grants to projects in urban and rural communities. Without additional state funding this next fiscal year the HFHC fund will exhaust its resources. These funds have supported projects throughout the state including: Buffalo, Rochester, Syracuse, Broome County, the Hudson Valley, and New York City.

Based on the success of the HFHC Fund and the continued need to improve access to healthy foods for New Yorkers, the American Cancer Society Cancer Action Network requests the addition of $15 million in dedicated funding to sustain the Healthy Food and Healthy Communities Fund. This step would increase access to healthy food for residents in urban and rural communities as well as create jobs and expand market opportunities for New York farmers and producers.

In closing we are asking you to restore the Governor's $3 million cut for the full funding of the Cancer Services Program; provide an additional $13 million for the Tobacco Control Program; and add an additional $15 million for the Healthy Food and Healthy Communities Fund.

We thank you for your support of these programs in the past. We are now at a crucial point for health care in New York State and on behalf of the over 100,000 ACS CAN volunteers across the state, we must ask you to fully support these programs at our requested levels to save lives and to lighten the cancer burden on New York State's families and our health care system.

Thank you for the opportunity to testify today. I would be happy to answer any questions.