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**Testimony of the American Cancer Society Cancer Action Network
on Governor Cuomo's Proposed Budget
Julie Hart, NYS Government Relations Director
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Senator Finance Chair Young, Assembly Ways and Means Chair Farrell, and distinguished Members of the Senate and Assembly, my name is Julie Hart and I am the New York State Government Relations Director for the American Cancer Society Cancer Action Network (ACS CAN). ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. ACS CAN works to encourage elected officials and candidates to make cancer a top national and state priority.

Cancer is the second leading killer in New York. This year approximately, 110,280 New Yorkers will learn they have cancer. Sadly, 34,910 New Yorkers will lose their battle to cancer this year. As evidenced by the following charts, the toll cancer takes on New York is devastating.

Estimated number of new cases in New York for selected cancers

Female breast: 16,360	Non-Hodgkin Lymphoma: 4,860
Lung and Bronchus: 13,200	Leukemia: 4,490
Prostate: 12,010	Uterine Corpus: 4,360
Colon and rectum: 8,730	Melanoma: 4,250
Urinary Bladder: 5,220	Uterine cervix: 790

Estimated number of deaths in New York for selected cancers

Lung and Brochus: 8,770	Prostate: 1,550
Colon and rectum: 2,830	Leukemia: 1,470
Pancreas: 2,660	Non-Hodgkin Lymphoma: 1,200
Female breast: 2,410	Ovary: 920
Liver: 1,650	Brain: 880

Source: American Cancer Society. Cancer Facts and Figures 2016

The American Cancer Society Cancer Action Network is excited about the renewed commitment and focus to fight cancer from state and national offices. 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.

Increase Awareness and Screening for Breast and Prostate Cancer

Recommendation: Support \$91million proposal

The Executive Budget proposal includes a \$91 million plan to help emphasize the importance of cancer screenings and to make these screenings more readily available to all New Yorkers with a specific emphasis on breast and prostate cancer.

Breast cancer is the most common cancer and the second leading cause of cancer deaths among women in New York.¹

Specifically the Governor's proposal includes:

- Ten mobile mammography vans in areas with low screening capacity.
- Extended hours for breast cancer screening in hospital-based screening facilities to mammography at least one day each week.
- Public awareness campaign to target low-income, underserved populations and address the most common reasons women say they do not receive regular mammograms.
- Ten community outreach teams to help educate women and encourage them to get a mammogram and encourage men to discuss their risks for prostate cancer with their health care providers.
- One-On-One Assistance. The State will award providers funding to hire new personnel to provide one-on-one assistance to help cancer patients navigate the complex healthcare system.
- Venture Capital Funding for Cancer-Related Research and Technology. The State will invest \$5 million from the New York State Innovation Venture Capital Fund to support promising cancer-related technologies.

ACS CAN strongly supports this proposal to increase awareness of screening and eliminate barriers as it will help more men and women receive a lifesaving screening.

New York State Cancer Services Program (CSP)

Recommendation: Support funding of \$25,281,000

The New York State 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 latest census data, approximately 8.75% of New Yorkers do not yet have health insurance.²

Cancer screenings 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.

The most common form of cervical cancer starts with pre-cancerous changes. With PAP tests, it is possible to find and treat pre-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 state fiscal year 2014-2015, the **CSP provided cancer screenings to 30,346 New York residents**³.

The American Cancer Society Cancer Action Network strongly supports full funding of \$25.3 million annually for the New York State Cancer Services Program to improve outcomes for the 16,360 new cases of breast cancer, 790 new cases of cervical cancer, and 8,730 new cases of colorectal cancer in New York this year⁴.

Tobacco Control Program Funding (TCP)

Recommendation: Increase funding to \$52 M

The New York State TCP works to help New York adults quit smoking and to keep kids from beginning this deadly addiction. However, more funding is needed to help ensure the program can reach most vulnerable New Yorkers.

² <http://www.census.gov/hhes/www/hlthins/data/incpovhlth/2014/acs-tables.html>

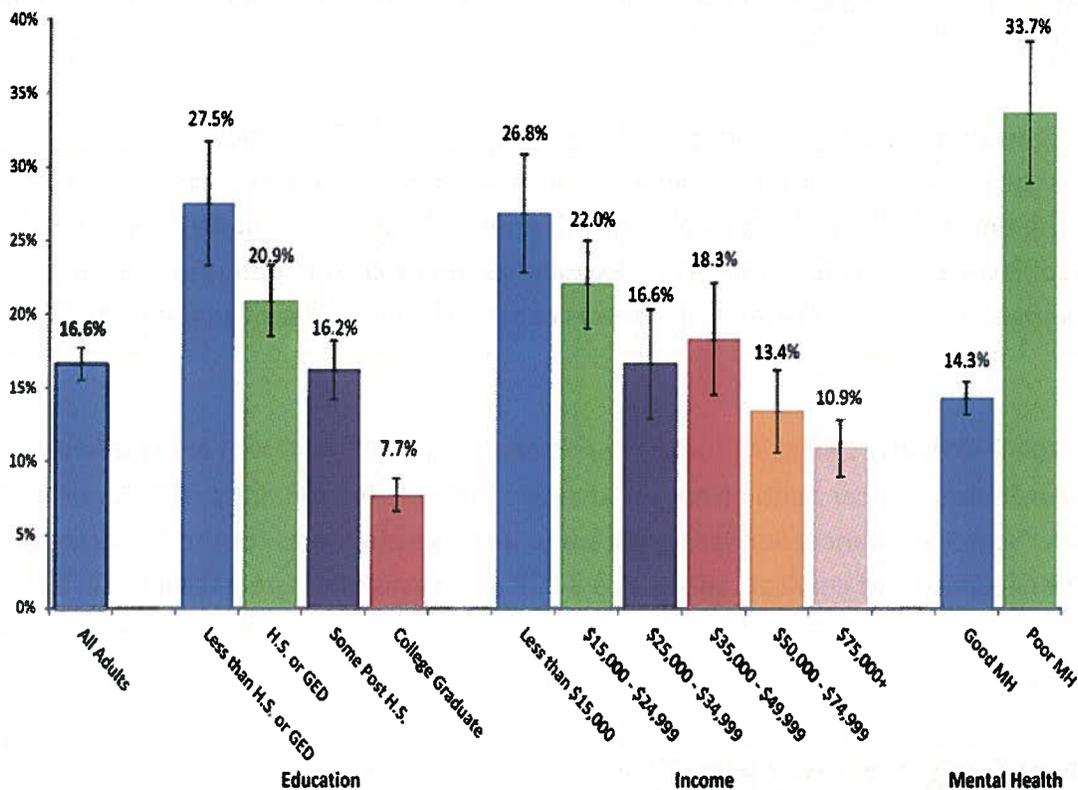
³ Source: Cancer Services Program statistics for the April 1, 2014- March 31, 2015 program year.

⁴ American Cancer Society. Cancer Facts and Figures 2016.

The TCP program aims to advance Tobacco-Free Communities, promote smoking cessation services within health systems, promote the New York State Smokers' Quitline and to counter the messages of the tobacco industry through statewide media prevention and cessation campaigns.

Sadly, tobacco companies are still making a killing off New Yorkers as **smoking kills 28,200 adults** each year. Lung cancer is the number one cancer killer in New York for both men and women. In 2016 an estimated **13,200 New Yorkers will be diagnosed with lung cancer** and an estimated 8,770 will die from the disease⁵. We have seen a decrease in the number of youth smokers; however 73,000 high school students still smoke⁶. Annually, 10,600 New York kids under 18 are expected to become new daily smokers.⁷ Currently, **16.6% of New York adults smoke**⁸. More disturbing are the disparities in smoking prevalence among New York Adults as noted below⁹.

Disparities in Smoking Prevalence among New York Adults



* The smoking prevalence among those who did not provide any information about their income was 14.1%.

⁵ American Cancer Society. Cancer Facts and Figures 2016.

⁶ New York State Youth Tobacco Survey, 2000-2014

⁷ New underage daily smoker estimate based on data from U.S. Dept of Health and Human Services (HHS), "Results from the 2014 National Survey on Drug Use and Health," with the state share of national initiation number based on CDC data on future youth smokers in each state compared to national total.

⁸ Adult smoking from CDC 2013 BRFSS online data

⁹ New York State Behavioral Risk Factor Surveillance System, 2013

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 total \$10.39 billion, with \$6.62 billion covered by the state Medicaid program¹⁰.

The tobacco industry influence in New York is also staggering.

- Annual tobacco industry marketing expenditures nationwide \$9.6 billion
- Estimated portion spent for New York marketing each year \$235.1 million

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. The Executive budget proposal maintains funding at \$39.3 million however this falls far short of the Centers for Disease Control and Prevention (CDC) recommendation that New York spend \$203 million annually on tobacco prevention and cessation programs.

ACS CAN understands the fiscal constraints in the current economic environment. Therefore, we request 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 to the CDC recommended funding level. This step will help save lives and save health care costs.

Improving Access to Healthy Foods

Recommendation - \$15 million Healthy Food & Healthy Communities Fund (HFHC) and \$3 million for a Healthy Corner Store/Bodega Initiative

Obesity, physical inactivity, and poor nutrition are major risk factors for cancer, second only to tobacco use. The World Cancer Research Fund estimates about 20% of all cancers diagnosed in the U.S. are related to poor nutrition, physical inactivity, excess weight and alcohol use and thus could be prevented. Excess weight is associated with increased risk for several common cancers, including colon, esophageal, kidney, pancreatic, endometrial, and postmenopausal breast cancer.

Improving access to healthy foods is an important step to help the **8.9 million adults considered overweight or obese**. The rate of obesity is higher among adults who are non-Hispanic black and Hispanic (34.2% and 30%, respectively), earn an annual household income less than \$25,000 (31.9%), have less than a college education (29.0%), or are currently living with a disability (38.4%).¹¹

¹⁰Smoking-caused healthcare costs. CDC, Best Practices for Comprehensive Tobacco Control Programs—2014, http://www.cdc.gov/tobacco/stateandcommunity/best_practices/.

¹¹ BRFSS, "Overweight and Obesity among New York State Adults, 2013

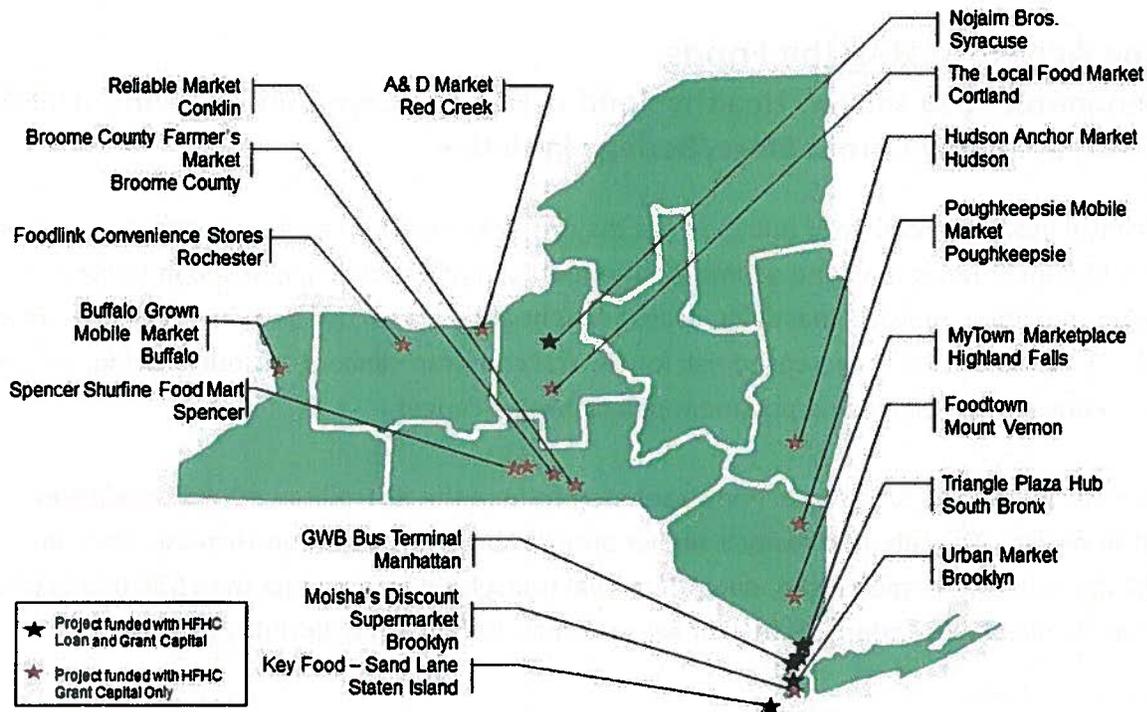
Eating healthy is a challenge for New Yorkers. One in three adults (34.5%) consume fruit less than one time per day, while 22% consume vegetables less than one time daily. Daily consumption of fruits and vegetables is lower in adults who are male, 18-24 years old, Hispanic, earn a household income of less than \$15,000, or have less than a high school degree.¹²

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. 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.** By 2015, the HFHC Fund had provided loans or grants for 20 projects in rural and urban communities. Projects have been funded throughout the state including New York City, Buffalo, Rochester, Syracuse, Broome County and the Hudson Valley.

According to the HFHC Fund administrator, beyond the \$30 million HFHC funding, **the 20 projects leveraged \$155 million** in private and public capital from the local communities where the projects were developed. As a result, **1,154 direct jobs** (permanent and construction) have been created or preserved.

NY Healthy Food & Healthy Communities Fund Projects



¹² BRFSS, "Fruit and Vegetable Consumption among New York State Adults, 2013

The additional 3 projects are:

- 1) Mohawk Harvest Cooperative – Gloversville, NY
- 2) Casey's Grab n' Go Market – Auburn, NY
- 3) Binghamton Mobile Farm Stand Market – Binghamton, NY area.

Funding for the HFHC has now been depleted. 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.

Additionally, in order to meet the varied needs of New York communities, we respectfully ask that \$3 million in state funding be dedicated to improving healthy food options in small retail settings including convenience stores, bodegas and corner stores.

In closing we are asking you to support:

- The Executive proposal to increase awareness and Screening for Breast and Prostate Cancer
- Maintaining funding for the Cancer Services Program at \$25.3 million
- Increasing funding for the State's Tobacco Control Program to \$52 million
- Providing \$18 million to improve access to healthy foods

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. On behalf of the over 100,000 ACS CAN volunteers across the state, we ask you to fully support these programs at our requested levels to save lives and to reduce the toll of cancer 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.

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For more information about ACS CAN and our legislative agenda, contact Julie Hart at 518.505.7833 or Julie.hart@cancer.org

