



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

**Testimony Re: S2032 (Rep Zurier) RELATING TO INSURANCE-ACCIDENT AND SICKNESS
INSURANCE POLICIES**

April 14, 2026

**Written Testimony on Behalf of the American College of Obstetricians and Gynecologists (ACOG) in
Support of Rhode Island House Bill S2032**

Dear Chairman Murray and distinguished members of the House Committee on Health and Human Services:

My name is Melissa Russo, and I am speaking on behalf of the American College of Obstetricians and Gynecologists in strong support of Senate Bill S2032 I am testifying in strong support of Senate Bill S2032(Rep. Zurier). This bill is important to improve access to healthcare and ensuring equity in our healthcare delivery to all Rhode Islanders. Bill S2032 prohibits cost-sharing requirements on diagnostic or supplemental breast exams and imaging. Support of this bill is vital in a time where healthcare coverage is becoming more prohibitive and this bill provides important preventative services that are needed for follow-up and takes the burden off of the patient for getting necessary medical care. The burden of financial costs can lead to access issues and delays in care for people which can potentially affect outcomes.

As an illustrative example, I have had many patients who need follow-up imaging after a first mammogram for their breast cancer screening and for many if follow-up imaging is needed there is a back and forth between insurance and the financial burden can fall to the patient. With the economy and costs of living, some people are not able to afford these out of pocket costs and then they do not get their recommended care and this can lead to delays in diagnosis of breast cancer. Breast cancer if caught early can be a very treatable disease but delays in care can lead to advancement of cancer stage and can change prognosis and overall outcomes for patients. I myself am a resident of Rhode Island and as a middle-aged women I have faced a lot of out-of-pocket costs for any follow up imaging I have needed during my breast cancer screening. These again are necessary follow-up imaging recommended by my doctor and the insurance company has not paid for these exams.

More than 70% of women in the U.S. face cost barriers to accessing follow up breast cancer diagnostic tests and the typical patient has to pay approximately \$170 in out-of-pocket costs. Due to these costs, many people delay receiving follow-up diagnostic tests (and then their future mammograms), resulting in potential later stage cancer diagnosis and increased health care costs in total.

In conclusion, Bill S2032 supports equitable access to follow-up care and imaging necessary to diagnose breast cancer. The evidence is clear on the benefit of early detection of breast cancer through screening, follow-up testing and imaging and this improves survival and reduces mortality by detecting cancer earlier. We urge the committee and legislature to vote in support of bill S2032 to reduce out-of-pocket costs for essential health care and improve patient outcomes. Thank you for your time and consideration.

Melissa L. Russo MD

Vice-Chair of Advocacy Committee in Rhode Island, District I ACOG

Maternal-Fetal Medicine and Clinical Genetics, Women & Infants Hospital