

April 7, 2018

The Honorable Joseph K. Miner, MD, MSPH
Executive Director
Utah Health Department
PO Box 141000
Salt Lake City, UT 84114

RE: Utah R414-1-29

Dear Dr. Miner:

In 2018, it's estimated that among U.S. women and men there will be 268,670 new cases of invasive breast cancer and 41,400 breast cancer deaths. In Utah, breast cancer is the leading cause of cancer associated deaths in the state among women, according to the Utah Public Health Indicator Based Information System (IBIS). While these numbers continue to be staggering, American breast cancer mortality rates were even worse in the late 1980s. As treatments improved over time, breast cancer mortality declined 39 percent in the U.S. from 1989 to 2015. Improving treatments, advocating that patients receive regular screenings, preserving insurance coverage for breast cancer-related procedures, and many other factors will continue to help Americans who are fighting for their lives.

One thing that most assuredly will not help anyone who is facing this battle, though, is the change that was made to R414-1-29. This change represents a step back for the health of women who have survived breast cancer. Ensuring coverage for those who are most in need is a critical part of the American healthcare delivery system. To that end, reducing coverage for breast reconstruction – which usually entails more than two surgical procedures per breast – could lead to women receiving incomplete reconstruction, suffering from difficult-to-camouflage asymmetries, and having pain or discomfort that could be easily remedied by an additional surgical intervention.

Many courses of medical treatment necessitate more than one procedure, and Utah Medicaid enrollees who need multiple breast reconstruction procedures should not be singled out and subsequently penalized. We have grave concerns with the rule and urge the department to reconsider the changes to Utah R414-1-29 before they leave a devastating legacy. Patients deserve to be able to accurately assess their coverage options following lumpectomy and mastectomy.

Therefore, the department needs to clearly define the terms “initial occurrences” in subsection (4) and “repeat” in subsection (5) of the rule so that coverage includes recurrences and multiple surgeries that are necessary to achieve complete reconstruction.

The undersigned organizations work together to improve patient outcomes and quality of life. With your leadership, we hope to ensure that Utahns in need receive the quality and depth of care that they deserve.

Sincerely,

Utah Academy of Family Physicians
Utah Health Policy Project
Utah Medical Association
Utah Radiological Society

Utah Society of Pathologists
Utah Society of Plastic Surgeons
Black Women's Health Imperative
Evelyn's BFF
Facing Our Risk of Cancer Empowered (FORCE)
Living Beyond Breast Cancer
SHARE: Self help for Women with Breast or Ovarian Cancer
American Cancer Society Cancer Action Network, Inc.
American College of Radiology
American College of Surgeons - Commission on Cancer
American Society for Aesthetic Plastic Surgery
American Society of Plastic Surgeons