

Submitter:

Mary Burns

On Behalf Of:

Committee:

Senate Committee On Health Care

Measure, Appointment or Topic:

SB1137

Dear Members of the Committee,

I am writing in strong support of SB 1137 because no one should have to fight their insurance company for access to the safest breast reconstruction option after a mastectomy. But that's exactly what many Oregonians are forced to do.

In 2019, I underwent a preventative mastectomy due to a genetic disorder. I was already overwhelmed—drowning in options, opinions, and life-altering decisions—when I realized I also had to fight to access the safest reconstruction for my body.

A DIEP flap reconstruction—which preserves muscle and offers better long-term outcomes—was recommended as the best reconstruction choice for my health. But my only in-network provider in Oregon required a 6-day hospital stay, including time in the ICU, increasing my risk of infection. They also required all care to take place over three hours from my home, making follow-ups even harder.

By traveling out of state, I was able to have the same procedure at a specialized breast surgery center with a shorter hospital stay (2-3 days), lower risks, and a significantly more practiced surgeon. But insurance didn't make it easy. I spent countless hours on the phone, desperately advocating for a single case exemption, and even after approval, I lived in constant fear that my coverage would be revoked. I didn't breathe easy until the day my bill arrived, confirming I wouldn't be left with overwhelming medical debt.

This bill isn't about convenience—it's about medical equity. The Women's Health and Cancer Rights Act mandates coverage for reconstruction, yet insurance networks still block access to the safest options. If I had been forced to stay in-network, I would have had to sacrifice muscle, increasing my risk of complications and long-term weakness.

No one should have to endure the physical and emotional toll of a mastectomy while also battling insurers for access to safe, effective care. SB 1137 would ensure that all patients—not just those with PPO plans or the ability to fight their insurance—can access the best reconstruction options for them. This is especially critical for those with active cancer, who do not have the luxury of waiting to act.

I urge you to support SB 1137 and remove the unnecessary barriers preventing patients from getting the care they deserve.

Thank you for your time and consideration.
Mary Burns