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Oregon SB 1137
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Written testimony in support of SB 1137 provided by:
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I would like to submit my personal experience as a Breast Cancer Survivor who sought out flap reconstruction as a residence of Oregon.

During October 2015-March 2016 I had an initial single mastectomy with expander, later replaced by a 'Tear Drop' gummy implant by Allergan. Health issues ensued and I opted to have it removed (explant) in March of 2018. Shortly thereafter both the expander device and implant used on me were recalled by the FDA. I chose to remain a 'uni' and regain my health and raise my children following a divorce at the same time.

In 2023, now healthy, I began to pursue the idea of reconstruction with flap transfer. I felt it was clearly the most natural option for breast cancer patients as it is using your own tissue and not a foreign body that had caused so many problems for me.

There are multiple locations that the 'flaps' can come from, the most common being the abdominal wall or DIEP transfer. As a mother of twins delivered via C-section this was not an option for me. I'd like to add that even trying to get in to see an OREGON doctor who did DIEP for a referral or more information was impossible due to their patient load (only seeing 'active' cancer patients), limited providers and in one case a doctor that was only focusing on transgender patients

In researching other providers (out of state) that could perform reconstruction from other body flaps it became clear very early on that there were NO providers in all of Oregon who could do what I needed. I needed to utilize my gluteal flaps, referred to as SGAP.

I reached out in the very beginning to connect with a patient advocate with my health plan as I knew I needed help navigating this. I travelled to San Francisco to meet Dr. Buntic who told me the best group for my need was in New Orleans at the Center for Breast Reconstruction. They are a group of doctors, with their own hospital, who began focusing on flap transfers in 2005.

I scheduled a visit with them to ensure I was a candidate and began the appeal process with my insurance provider, Providence. Along with my advocate, I supplied all the information and history when requesting in network benefits. It was denied and stated 'a local provider could complete the surgery'. No list of qualified providers were given. I submitted a second request and an appeal-each time including information to educate the reviewer on the differing procedures. Each time it was denied for in-network extension.

I chose to proceed with the surgery anyway. Being a healthy woman with only one breast was not how I wanted to remain. My self esteem, confidence and mental health were taking a toll. In March of 2024 I did phase 1 and in September 2024 I had a phase 2 with the group in New Orleans. I cannot speak highly enough of the dedication, care and professionalism they provide to the women who feel broken as I did.

Despite the Breast Cancer Survivor Act of 1998 stating that insurance companies needed to cover reconstruction for women, I spent countless hours, wrote countless letters and placed countless phone calls to no avail. It should not be this way for any woman who chooses a more natural approach to reconstruction.

I ask that you enforce insurance companies to extend in-network benefits for any Oregon resident who is choosing flap transfer (either in or out of state due to provider shortage) as part of her cancer resolution and respect the intent of the Breast Cancer Survivor Act.

Thank You,
Courtney Daly