



April 15, 2025

Representative Wayne MacDonald, Chair
House Committee on Health, Human Services and Elderly Affairs
107 North Main Street
Concord, NH 03301

Dear Chair MacDonald and Members of the House Committee on Health, Human Services and Elderly Affairs,

The Northern New England Clinical Oncology Society (NNECOS) and the Association for Clinical Oncology (ASCO) have concerns with **SB 134**, which would direct the Department of Health to resubmit a Section 1115 waiver to the Centers for Medicare and Medicaid Services to implement work requirements for Medicaid enrollees in New Hampshire. NNECOS and ASCO believe work requirements could have significant negative consequences for patients with cancer and ask for a clear exemption for patients with cancer who are in active treatment and for the exemption to last at least one full year after their final treatment.

NNECOS is a professional organization whose mission is to promote the highest quality care for patients with cancer and blood disorders in northern New England. NNECOS members are a community of hematologists, oncologists, and other physicians and allied health professionals who specialize in cancer care. ASCO is an organization representing physicians who care for people with cancer. With over 50,000 members, our core mission is to ensure that cancer patients have meaningful access to high-quality cancer care.

According to a [2014 Policy Statement on Medicaid Reform](#) by ASCO's affiliate, the American Society of Clinical Oncology (the Society), people with cancer, for whom the costs of evaluation and treatment can be high, are particularly in need of insurance coverage to allow for timely diagnosis and high-quality treatment. The Society's [2018 Position Statement on Medicaid Waivers](#) and their impact on cancer care emphasizes the importance of patients not being faced with delays or barriers to treatment and finds that disruptions to care are linked to poorer cancer outcomes. In particular, the imposition of work or volunteer requirements could result in reduced access to treatment for some of the most vulnerable populations when they need it most.

Cancer is an unexpected and life-altering event. A cancer patient in active treatment may be limited in their ability to work because of the time commitment required to manage treatment and multiple medical appointments, recovery from surgery or other procedures, symptoms of the disease, and side effects of treatment. Research has shown that those in active treatment for cancer [often stop working entirely](#) or dramatically reduce the number of hours worked. Adding a clear exemption for patients who are under active treatment and one-year post treatment will help patients access life-saving care.

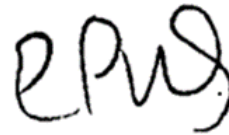
Failure to obtain timely care and screening has been shown to worsen cancer care outcomes. When patients are no longer able to access screening or other preventative care, they may (knowingly or not) delay seeking treatment until their disease is at an advanced stage. The benefits of screening and early detection are well documented for many types of cancer, and the evidence is clear that those with health care access through insurance coverage are more likely to receive screening.

SB 134 could have a detrimental impact on patients dealing with a life-threatening illness like cancer in New Hampshire and we urge you to include a clear exemption to the work requirements for patients with cancer. We offer ourselves as a resource to you. If you have any questions or would like assistance on any issue involving the care of individuals with cancer, please contact Jennifer Brunelle at Jennifer.Brunelle@asco.org.

Sincerely,



Sheila Pascual, MD
President
Northern New England Clinical Oncology Society



Eric P. Winer, MD,
Chair of the Board
Association for Clinical Oncology