



February 14, 2022

Re: HF 1200

Dear Chair Noor and members of the Workforce and Business Development Finance and Policy Committee:

The American Cancer Society Cancer Action Network (ACS CAN) is the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society. We support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. The need for access to paid medical and family leave became clearer nationwide during the COVID-19 Public Health Emergency. ACS CAN supports policies such as HF 1200 that increase access to job-protected paid family and medical leave that can be used for cancer treatments, survivorship care, and caregiving as well as other illnesses. We thank Representative Richardson and the bill's co-authors for their leadership on this issue.

In 2018, over 6 million workers in the U.S. had a history of cancer.ⁱ Cancer treatment is time consuming – often requiring time off from work for doctor's visits, surgery and recovery, chemotherapy and radiation. The flexibility to balance cancer treatment and employment is essential.

Studies show that cancer patients who have paid leave have higher rates of job retention and lower rates of financial burden.^{ii,iii} Yet not all cancer patients, survivors and caregivers who work have access to paid leave, and without it they risk losing employment or not getting the care they need.

The American Cancer Society Cancer Action Network (ACS CAN) conducted multiple surveys in 2017- 2019 to explore this issue amongst cancer patients, survivors and caregivers.^{iv}

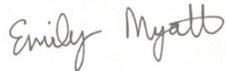
The survey results showed that access to paid medical/family leave makes an important difference for cancer patients, survivors and their caregivers; contributing to positive outcomes like being able to complete treatment, manage symptoms and side effects and afford treatments.

The survey results also showed that, access to paid leave is a health equity issue. Respondents who reported having issues with cancer/caregiving and their job – including the quality of their work suffering, having to take two or more days off of work in a row, or having to leave work early – most often tended to be those in lower income households, those with lower levels of education, younger respondents, and those working in smaller companies.

Additionally, those respondents who had paid medical/family leave were less likely to report experiencing problems related to financial pressures than those who did not have it.

HF 1200 increases access to job-protected paid family and medical leave by creating a statewide paid family and medical leave insurance program. Thank you for your consideration of this important policy. Please vote yes on HF 1200.

Sincerely,



Emily Myatt
Minnesota Government Relations Director
American Cancer Society Cancer Action Network

ⁱ National Center for Health Statistics. Survey Description (<https://www.cdc.gov/nchs/nhis/data-questionnairesdocumentation.htm>), 2018 National Health Interview Survey Public Use Data Release. Hyattsville, Maryland. Analysis performed by American Cancer Society Intramural Research team, April 7, 2020.

ⁱⁱ Veenstra CM, Regenbogen SE, Hawley ST, Abrahamse P, Banerjee M, Morris AM. Association of Paid Sick Leave With Job Retention and Financial Burden Among Working Patients With Colorectal Cancer. *JAMA*. 2015 Dec 22 29;314(24):2688-90. doi: 10.1001/jama.2015.12383. PubMed PMID: 26717032.

ⁱⁱⁱ Veenstra, C.M., Abrahamse, P., Wagner, T.H., Hawley, S.T., Banerjee, M. & Morris, A.M. (2018). Employment Benefits and Job Retention: Evidence Among Patients With Colorectal Cancer. *Cancer Med*. 2018 Mar; 7(3): 736–745. doi: 10.1002/cam4.1371.

^{iv} See Public Opinion Strategies. Key Findings – National Survey of Cancer Patients, Survivors and Caregivers. December 8, 2017.

<https://www.fightcancer.org/sites/default/files/ACS%20CAN%20Paid%20Leave%20Surveys%20Key%20Findings%20Press%20Memo%20FINAL.pdf>