



***Written Testimony Supporting HF 447  
Submitted to the Commerce Committee  
February 24, 2021  
By Susan G. Komen***

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Chairman Stephenson, Vice Chairman Kotyza-Witthuhn, and Members of the Committee, thank you for the opportunity to provide testimony in support of HF 447, which relates to no-cost diagnostic services and testing following a mammogram. My name is Dana Carter, and I am the Regional Manager for State Policy and Advocacy for Susan G. Komen®.

Susan G. Komen is the world's leading non-profit breast cancer organization representing the millions of women and men who have been diagnosed with breast cancer, including the **4,850 women who will be diagnosed and 640 who will die from the disease this year alone in Minnesota**. We have a comprehensive 360-degree approach to fighting this disease across all fronts—we advocate for patients, drive research breakthroughs, improve access to high quality care, offer direct patient support and empower people with trustworthy information. Komen advocates for all women to have access to the tools and resources necessary to save their lives. We believe strongly that ensuring screening, diagnostic and treatment services are affordable and accessible for all increases the likelihood that women will have the ability to detect, diagnose and treat their breast cancer early - potentially saving their lives.

Millions of women throughout the United States are now able to access free, preventive screening mammography thanks to its inclusion as a required benefit under the Affordable Care Act (ACA). However, if the results of a mammogram lead to a recommendation for follow-up imaging (diagnostic mammography, breast ultrasound and/or breast MRI), patients will likely be facing hundreds to thousands of dollars in out-of-pocket costs – all before she even begins her treatment. Aside from follow-up testing, diagnostic imaging is also typically recommended as primary breast imaging for breast cancer survivors, women at high-risk for breast cancer and those who have undergone a lumpectomy followed by radiation therapy.

A recent Susan G. Komen-commissioned study found the out-of-pocket costs for patients to be high, with much variation for diagnostic breast imaging. For example, average patient cost for a mammogram is \$234, and for a breast MRI, \$1,021. The study found also that the inconsistency in cost and coverage is a recognized concern among patients, and healthcare providers. Which may lead to additional stress and confusion for women who are already dealing with the daunting possibility of a breast cancer diagnosis.

For women who receive abnormal results in a screening mammogram, eliminating out-of-pocket costs for diagnostic imaging would improve access and lead to more patients using available services - allowing for more timely diagnosis and treatment of breast cancer. Additionally, lower out-of-pocket costs would reduce the financial burden on patients that require diagnostic imaging as routine survivorship care.

From an early detection perspective, a screening mammogram would not be considered successful if the follow-up diagnostic imaging were not preformed to rule out breast cancer or confirm the need for a biopsy. The systematic use of breast cancer screening and follow-up diagnostics has led to significant increases in the early detection of breast cancer in the past 20 years.

If women are unable to afford the costs associated with diagnostic imaging, many might delay or forego additional tests to rule out or confirm a breast cancer diagnosis. This delay can mean that women will not seek care until the cancer has spread to other parts of her body making it much deadlier and much more costly to treat.

As committed partners in the fight against breast cancer, we know how deeply important it is for all cancer patients to have fair and equal access to the breast imaging that may save their lives. As such, we support HF 447 and urge you to pass this critical legislation.

**Thank you for your consideration.**

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