



Representative Tina Liebling  
477 State Office Building  
St. Paul, MN 55155

**RE: HF 390 – SUPPORTING ACCESS TO BREAST CANCER SCREENING**

Dear Chair Liebling and Members of the Health Finance and Policy Committee:

On behalf of RAYUS Radiology, a network of multi-modality diagnostic imaging centers, that operates 23 advanced imaging centers across Minnesota, I am writing you today in strong support of the provision of HF 390 which looks to expand access to health care services regarding the diagnosis of breast cancer by prohibiting cost-sharing requirements for follow-up diagnostic mammography.

Breast cancer is the most commonly diagnosed cancer among women and, if not caught and treated early, is deadly. Due to restrictions on elective procedures and the following delays in screening, nearly one third of women missed their annual screening mammography during the COVID-19 pandemic. (Lowry KP, 2022)

Now, studies from oncologists have shown patients are presenting with more advanced-stage cancers – one showed that 1.9% of patients presented with stage IV breast cancer in 2019, 6.2% did in 2020, a threefold increase. Further, studies have shown patients who may have received an initial abnormal screening did not receive follow-up screenings ranged from nearly a 25% to over 70%. (Zhou JZ, 2022) (Reece, 2021)

Cost remains the largest factor in missed follow-up care - A Komen-commissioned study found the costs to patients for diagnostic tests range from \$234 for a diagnostic mammogram to \$1,021 for a breast MRI. The disparity in follow-up was found to be higher in disadvantaged and underserved communities. This additional cost can be especially onerous for patients who are breast cancer survivors, as higher modalities of screening are recommended over regular mammography. (Susan G. Komen Foundation, 2019)

More than ever, we must work to eliminate all barriers to care, and a patient's inability to pay should not prevent them from obtaining a potential lifesaving, and cost saving, early diagnosis. This legislation to ensure patient access to diagnostic mammography, like breast MR and ultrasound are strongly supported by our radiologist partners and this bill will save lives.

Sincerely yours,

Zachary Brunnert  
Senior Director, State Legislative Policy  
RAYUS Radiology



## Works Cited

- Lowry KP, B. M. (2022). Breast Biopsy Recommendations and Breast Cancers Diagnosed during the COVID-19 Pandemic. *Radiology*, 287-294.
- Reece, J. N. (2021). Delayed or failure to follow-up abnormal breast cancer screening mammograms in primary care: a systematic review. *BMC Cancer*, 21.
- Susan G. Komen Foundation. (2019). *Understanding Cost & Coverage Issues with Diagnostic Breast Imaging*. Dallas: Martec.
- Zhou JZ, K. S. (2022). Comparison of Early- and Late-Stage Breast and Colorectal Cancer Diagnoses During vs Before the COVID-19 Pandemic. *JAMA Open Network*, 5.