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Senator John Eklund – Sponsor Testimony
Senate Bill 121
Senate Insurance and Financial Institutions Committee
September 19, 2017

Chairman Hottinger, Vice Chair Hackett, Ranking Member Brown and colleagues of the committee. Thank you for the opportunity to give sponsor testimony on Senate Bill 121 and to encourage your support on this legislation. SB 121 would include tomosynthesis as part of screening mammography benefits required under health insurance policies.

Tomosynthesis obtains multiple low-dose images of the breast from multiple angles and reconstructs those images into a 3-dimensional data set that is processed into thin slices for interpretation. The thin-slice interpretation helps minimize the interference of overlapping normal breast tissue when the radiologist is searching for breast cancer on a Tomosynthesis study.[1]

Breast Cancer is the second-leading cause of death among women in the United States and is the most commonly diagnosed cancer among women[2]. In early 2011, the Food and Drug Administration approved the first X-ray mammography device that provides 3D images for breast cancer screening and diagnosis[3].

Some insurance providers are currently covering Tomosynthesis in Ohio[4] but there are still those denying the coverage stating that the reason is because this technology is "investigational". The National Comprehensive Cancer Network updated their guidelines in July 2016 to state, "Multiple studies show a combined use of mammography and tomosynthesis appears to improve cancer detection and decreased call back rates". In addition, the American College of Radiology has determined that tomosynthesis is no longer investigational and CMS (Centers for Medicare and Medicaid Services) along with many private insurers across the country are covering Tomosynthesis.

Clinical use of Tomosynthesis in women undergoing screening mammography has led to increased cancer detection rate while simultaneously decreasing recall rates. One [study]

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[1] Digital Breast Tomosynthesis Utilization in the United States: A Survey of Physician Members of the Society of Breast Imaging, Journal of the American College of Radiology, Special Collection, November 2016, Vol. 13, No. 115, page R67
[2] Centers for Disease Control and Prevention, United States 1999-2004.
[3] Diagnostic Imaging, FDA Approves First 3-D Mammography Imaging System by Sara Michael, Feb. 11, 2011.
[4] Medicaid, Medicare, Aultman Health, ProMedica (Paramount), SummaCare, Cigna, United Healthcare, Anthem, Aetna, Anthem BCBS, Buckeye Health, CareSource, Molina, Paramount, Premier, WellCare

showed a 27% increase in cancer detection rate and a 15% decrease in recall rates with the use of Tomosynthesis relative to conventional digital mammography.[5] With fewer call backs, the patient suffers much less anxiety typically associated with a call back, and the insurance companies ultimately save money on more expensive follow-up testing.

I also wanted to point out that Tomosynthesis is simply the most advanced technology available for "screening mammography" at little additional cost. Screening mammography has been part of required coverage in the Ohio Revised Code since 1999, so this is **not** a new mandate. In fact, most insurance policies that cover Tomosynthesis state in their policies that 3D mammography is a medically necessary acceptable alternative to standard 2D screening mammography.

Thank you for the opportunity to provide testimony on Senate Bill 121, and I will be glad to answer any questions you may have.

[5] Digital Breast Tomosynthesis Utilization in the United States: A Survey of Physician Members of the Society of Breast Imaging, Journal of the American College of Radiology, Special Collection, November 2016, Vol. 13, No. 115, page R67,71