

Chairman Huffman, Vice Chairman Antani, Ranking Member Antonio, and members of the Senate Health Committee:

I represent how the current breast cancer screening standards in Ohio can fail.

My name is Tamara Eggleton and I support House Bill 371 because it will ensure earlier detection of breast cancer. We all know that early detection is the most powerful tool we have to save the life of a person who develops breast cancer. It also reduces the amount of medical treatments that advanced stage cancer requires which are expensive and physically grueling. There is not a one size fits all screening test for breast cancer diagnosis and that is why HB 371 is so crucial for those with dense breast tissue.

I am a 47 year old, Summit County resident who received annual mammograms since turning 40. Each year I was informed that there was nothing of concern identified on these screenings. I was also notified in writing that I had dense breast tissue. Although this information was meant to be helpful, it just wasn't very useful because it didn't inform me how dense breasts could affect my health. It didn't educate me about the risks of having dense breasts. I still believed that annual 2D mammograms were my best and only option for detecting breast cancer early. I personally refer to dense breasts as a "Double Danger" because they increase your risk of developing cancer AND they make it more difficult to detect cancer during screenings. This is eye opening! Especially since more than 40% of women have dense breasts. HB371 includes a revision to the notification letter which is much more clear and informative in notifying people with dense tissue that they could benefit from additional imaging tests.

In January 2020, I started having obvious skin dimpling and puckering of the right breast. I knew something was wrong. I underwent a traditional 2D mammogram, and tomosynthesis (or 3D mammogram) and also a breast ultrasound. All three of these tests were read by doctors as being negative and cancer was not detected or suspected.

As covid swept across the world in the following months, I became increasingly uneasy about my condition and sought out an appointment with a breast surgeon on my own in July 2020. Even though I had what she referred to as "severe dimpling" and dense breast tissue, the doctor told me that she would NOT order an MRI because in her past experiences the insurance companies would not approve that test without more evidence on the previous screenings administered. On that day, all of the years of repeated denials by insurance became my care giver. It was not about my health or what screening test was best for me. It was about the money and the cost of these additional tests. My heart goes out to everyone who has been denied the accurate testing they needed due to the cost even when the technology of an MRI was available but withheld or denied.

The small ray of hope in my story is that I had randomly chosen to see a doctor from University Hospitals that day and she mentioned the option of a self-pay fast MRI that

UH offered. To my knowledge, UH is the only hospital system in NorthEast Ohio that offers this option. I paid for this test myself without hesitation.

(An abbreviated, or fast, MRI is not a test that insurance covers because this test has not received a CPT code from the American Medical Association. It is a 10 minute, less expensive MRI which is very effective in diagnosing cancer in dense breasts. My belief is that this option should be coded ASAP so that patients and insurance can begin to benefit from more facilities offering it.)

The fast MRI revealed that I had breast cancer. The mass was larger than 2 inches and had spread to my lymph nodes. This was discovered in an advanced stage even though I had been going for annual mammogram screenings the past 6 years to ensure early detection. These mammograms failed me because dense breast tissue can mask cancer. Dense tissue and cancer both appear white on the picture so the cancer can easily “hide” in the dense areas.

An MRI revealed my cancer. Ultrasound did not. Mammograms did not. And yet I had to pay for the MRI out of pocket because insurance would not cover this test historically.

In the past year, I have undergone several surgeries, chemotherapy, radiation and various treatments to stop the spread of this disease. And by God’s blessing, I am able to share my experience with you today.

My story is not unique. There are numerous medical studies that support how useful MRI is to the early detection of breast cancer in women with dense tissue, but only if it is used.

HB 371 is the next step for Ohio to ensure that women are not denied the proper tests needed for early diagnosis. For myself, that was an MRI. For another woman, that may be a 3D mammogram, an ultrasound, or even a new advancement in technology that is yet to be discovered. Either way, the decision should be made between a patient and health professional about what the best screening is for that individual rather than wrestling against insurance to receive coverage for life saving tests.

The organization DenseBreastInfo.org reports that 12 other states along with Washington, DC, have laws regarding insurance coverage and dense breast tissue. I am asking that HB 371 receive the support that is necessary for Ohio to join these states who have taken action to support women and modern medicine.

Until my recent experience the past two years, I was not aware that I had better options for the early detection of breast cancer. But now I know. And that is why I am here. I want others to know as well.

I ask that you use this knowledge to support HB 371 and fight for all of Ohio and their right to receive better health care.